



**California Health and Human Services Agency
Office of Technology & Solutions Integration
California Healthcare Eligibility, Enrollment, and Retention
System (CalHEERS)
2329 Gateway Oaks, Suite 250
Sacramento, CA 95833**



October 31, 2025

This serves as notification for release of the CalHEERS SDMO RFP # 73040873 Addendum #1. Updates are noted in track changes in the following sections:

- Request For Proposal (RFP):
 - o RFP Section 1 - Introduction and Overview
 - o RFP Section 2 - Rules Governing Competition
 - o RFP Section 3 - Current System
 - o RFP Section 4 - Proposed System
 - o RFP Section 5 - Administrative Requirements
 - o RFP Section 6 - Bidder Requirements
 - o RFP Section 7 - Cost
 - o RFP Section 8 - Proposal Format
 - o RFP Section 9 - Evaluation
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- Appendix A-2: CalHEERS SDMO Special Provisions
- Appendix A-4: Statement of Work (SOW):
 - o SOW Section 1 - Introduction & Organization
 - o SOW Section 2 - Contractor Personnel Requirements
 - o SOW Section 3 - Project Management Requirements
 - o SOW Section 4 - System Changes & Enhancements Requirements
 - o SOW Section 5 - Program Support Requirements
 - o SOW Section 6 - Operation Requirements
 - o SOW Section 7 - Transition Requirements
 - o SOW Section 8 - Deliverables
- Appendix C – Glossary
- Appendix D – Cost Workbook

Sincerely,

Alina Corpus
Procurement Official



Request for Proposal For CalHEERS SDMO

OTSI CalHEERS SMDO RFP #73040873

Addendum 1

October 31, 2025

**California Health and Human Services Agency
Offices of Technology and Solutions Integration**

CalHEERS SDMO RFP

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Section 1

Introduction and Overview

SECTION 1 – INTRODUCTION AND OVERVIEW

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1 INTRODUCTION AND OVERVIEW

1.1 PURPOSE

The purpose of this Request for Proposal (RFP) (hereafter referred to as “solicitation” or “RFP”) is to obtain proposals from qualified bidders and secure a prime Contractor (System Integrator) to provide a System Development, Maintenance, and Operations (SDMO) solution for the California Healthcare Eligibility, Enrollment, and Retention System (CalHEERS) Project.

The Affordable Care Act of 2010, known as federal health care reform, allowed states to establish Health Benefit Exchanges and provided the opportunity for states to expand Medicaid coverage for individuals to obtain affordable health care coverage. CalHEERS is an automated system that:

- Serves as the consolidated system support for eligibility, enrollment, and retention for the California Health Benefit Exchange (also known in the marketplace as Covered California) and the Medi-Cal Program for individuals subject to the use of Modified Adjusted Gross Income (MAGI).
- Streamlines the use of resources from which individuals can research, compare, check their eligibility for, and purchase health coverage.

The CalHEERS Project is sponsored by Covered California and the Department of Health Care Services (DHCS). The Office of Technology & Solutions Integration (OTSI) is responsible for overall project management. While the Project has a single point of management, it will be guided by the Project Sponsors, Program Partners, and its programmatic objectives.

The SDMO solution is defined as services, products, or a combination of products and services provided by the Contractor in support of the obligations and responsibilities required by the CalHEERS Contract (hereafter referred to as “Contract”). Key services include system development, ongoing maintenance, operation, and enhancement of the CalHEERS, reporting, and customer service.

Responses to this RFP will be evaluated based on the total proposal, and the award, if made, will be to a single bidder who is responsive, responsible, and awarded the highest scored points as calculated in accordance with the methodology defined in RFP Section 9, EVALUATION, of this RFP.

1.2 SCOPE OF SOLICITATION

This solicitation is being conducted under the policies and procedures developed by the CalHEERS Sponsor organizations, Covered California and the Department of Health Care Services (DHCS), per California Government Code (GC) 100505 and the Negotiation Process for the CalHEERS Project. The OTSI will be executing the Contract on behalf of the Sponsor organizations. Refer to RFP Section 2, RULES GOVERNING COMPETITION, for further instructions on the full set of requirements the bidder must comply with for this solicitation.

This solicitation contains the instructions governing the requirements for a proposal to be submitted by interested bidders. The format for how that proposal information is to be submitted and the material to be included therein follows. This solicitation also addresses the requirements that bidders must meet to be eligible for consideration, as well as addressing bidder responsibilities before and after Contract award.

1.2.1 Negotiation Process

This procurement is being conducted under California GC 100505 and a Negotiation Process. The following steps are included in the Negotiation Process:

Submission of bidder proposals, including cost;
Evaluation of proposals, as defined in RFP Section 9, EVALUATION;
During Evaluation, there may be opportunity for bidder discussion(s);
Negotiations (may include Key Staff interviews and oral presentations);
Best and Final Offer (BAFO) submission & evaluation, if requested;
Award of Contract.

1.2.2 Bidder Admonishment

This RFP contains the instructions governing the requirements for a firm quotation to be submitted by interested bidders. The format that the bid information is to be submitted in and the material to be included therein follows. This RFP also addresses the requirements that bidders must meet to be eligible for consideration.

IF A BIDDER EXPECTS TO BE AFFORDED THE BENEFITS OF THE STEPS INCLUDED IN THIS SOLICITATION, THE BIDDER MUST TAKE THE RESPONSIBILITY TO:

- Carefully read the entire solicitation.
- Attend the mandatory Bidders Conference.
- Submit written questions by the date noted in RFP Section 1.4, KEY ACTION DATES AND TIMES, if clarification is necessary.
- Submit all required responses, completed to the best of the bidder's ability, by the required dates and times.
- Ensure that all procedures and requirements of the solicitation are accurately followed and appropriately addressed.
- Carefully re-read the entire solicitation before submitting proposal.

1.2.3 Availability

The selected Bidder must meet the requirements of this solicitation and be available to start work on the Contract Execution date as determined by the Negotiation Process.

1.2.4 Financial Stability

In order to minimize the potential risk of default due to financial issues, the State reserves the right to request additional documentation during the RFP process and throughout the life of the awarded Contract.

1.2.5 Americans with Disabilities Act

To comply with the nondiscrimination requirements of the Americans with Disabilities Act, it is the policy of the State to make every effort to ensure that its programs, activities, and services are available to all persons, including persons with disabilities.

For persons with a disability needing a reasonable accommodation to participate in the procurement process, or for persons having questions regarding reasonable accommodations of the procurement process, you may contact the Procurement Official. Persons with a disability needing a reasonable accommodation may also contact the State using the California Relay Service telephone numbers listed below.

Important: To ensure that we can meet your need, it is best that we receive your request for reasonable accommodations at least ten (10) State business days before the scheduled event (e.g. meeting, conference, workshop, or deadline due date for procurement documents).

The California Relay Service telephone numbers are:

Voice: 1-800-735-2922 or 1-888-877-5379

TTY: 1-800-735-2929 or 1-888-877-5378

Speech to Speech: 1-800-854-7784

1.3 TERM OF CONTRACT

Effective upon approval of the OTSI, the initial term of the Contract resulting from this solicitation will be five (5) years (core term).

The Contract term shall commence upon receipt of required State and federal approvals, or the agreed upon start date, whichever is later.

The State, at its sole discretion, may exercise its option to execute five (5) one-year optional extensions for a maximum Contract term of ten (10) years.

1.4 KEY ACTION DATES AND TIMES

The Key Action Dates and Times in the following table contain the important actions, dates and times associated with this solicitation by which the actions must be taken or completed. If the State finds it necessary to change any of these dates prior to the submission of the proposal, it will be accomplished via an addendum to this solicitation.

Table 1-1: Key Action Dates and Times

KEY ACTION DATES		
Item #	Action	Date
1.	Release of Solicitation	9/17/2025
2.	Last day to submit questions for clarification of solicitation for Bidder's Conference	10/10/2025
3.	Mandatory Bidders Conference	10/15/2025
4.	Last day to submit: Intent to Bid (Appendix B-3, INTENT TO BID FORM) & Signed Confidentiality Statement (Appendix B-4, CONFIDENTIALITY STATEMENT FORM)	10/22/2025
<u>5.</u>	<u>Release of RFP Addendum 1</u>	<u>10/31/2025</u>
<u>6.</u>	<u>State issues response to bidder questions</u>	<u>10/31/2025</u>
<u>7.</u>	Last day to: Submit written questions or request for changes regarding the RFP prior to submittal of proposals (See Section 1.5.1)	11/ <u>17</u> /2025 <u>by 9 a.m. PT</u>
<u>8.</u>	State issues response to bidder questions and bidder requests for change to the RFP requirements	12/ <u>5</u> /2025
<u>9.</u>	<u>Release of RFP Addendum 2 (if needed)</u>	<u>12/5/2025</u>
<u>10.</u>	Last day to submit proposals	1/ <u>20</u> /2026 by <u>11 a.m. PT</u>
<u>11.</u>	Begin Evaluation Process	1/ <u>24</u> /2026 <u>Post Submission</u>
<u>12.</u>	Notification of Award ¹	<u>5/13/2026</u>
<u>13.</u>	Contract Award ¹	8/ <u>31</u> /2026
<u>14.</u>	Contract Execution ¹	<u>9/1</u> /2026
¹ All dates after submission of proposals are approximate and may be adjusted as conditions indicate without addendum to this solicitation. These dates will also be determined through the Negotiation Process.		

1.4.1 Mandatory Bidders Conference

A mandatory Bidders Conference will be held, during which prospective bidders will meet with State personnel and discuss the content of the solicitation and the procurement process. The time, date, and place of the conference are specified in Cal eProcure. Written questions received prior to the cutoff date for submission may be answered at the conference without divulging the source of the query.

Vendors who wish to submit a proposal in response to this RFP must attend the Bidders Conference in person. Proposals submitted by vendors who do not attend the Bidders Conference will be rejected.

If questions are asked at or before the conference, prospective bidders will be asked to submit the question(s) in writing to the Procurement Official, specified in RFP Section 1.5, PROCUREMENT OFFICIAL AND CONTACT INFORMATION. Answers to these questions will be published in a question-and-answer set. Oral responses shall not be binding on the State. A transcript of the Bidders Conference will not be created.

1.4.2 Intention to Bid

Vendors who intend to submit a proposal must submit a notification of Intent to Bid on this procurement in accordance with instructions provided in RFP Section 2, RULES GOVERNING COMPETITION.

Only those vendors acknowledging interest in this solicitation will continue to receive additional correspondence throughout this procurement.

- The letter should identify the contact person for the solicitation process, plus include an e-mail address, and phone number.
- See Appendix B-3, INTENT TO BID FORM.
- The State is responsible for notifying one (1) contact person per bidder. Information related to a bidder will be given to the designated contact person.
- It shall be the bidder's responsibility to immediately notify, in writing, the Procurement Official identified in RFP Section 1.5, PROCUREMENT OFFICIAL AND CONTACT INFORMATION, regarding any revision to the information.
- The State shall not be responsible for proposal correspondence not received by the bidder if the bidder fails to notify the State, in writing, about any change pertaining to the designated contact person.

1.5 PROCUREMENT OFFICIAL AND CONTACT INFORMATION

This procurement is conducted by the OTSI CalHEERS Procurement Team. Bidders are directed to communicate with the Procurement Official, as a single point of contact, to request access for RFP related materials, proposals, and all other formal correspondence regarding this procurement. The Procurement Official and the mailing address for that official are listed below.

1.5.1 General E-mail Inquiries

All inquiries should be sent electronically, unless otherwise specified in this solicitation, to:

Alina Corpus, Procurement Official
Office of Technology and Solutions Integration
Phone: (916) 634-2905
E-mail: CalHEERSProcurement@otsi.ca.gov

1.5.2 Deliveries by Mail

Alina Corpus

CalHHS, Office of Technology & Solutions Integration (OTSI)

California Healthcare Eligibility, Enrollment, and Retention System (CalHEERS)

2329 Gateway Oaks, Suite 250

Sacramento, CA 95833

1.5.3 Access to Bidders' Library/Submit RFP Question or Request for Change

To obtain a User ID and password for RFP related materials (Bidders' Library), the ability to submit questions, and/or the ability to submit a request for change, bidders must sign and submit Appendix B-4, CONFIDENTIALITY STATEMENT FORM and Appendix B-5, ACCESS AUTHORIZATION FORM to the Procurement Official.

It is the bidder's responsibility to provide the Procurement Official the required documentation to obtain a User ID and password for SharePoint access. The bidder must identify a single point of contact, e-mail, street address, and phone number. The User ID, password, and instructions will be provided to the single company contact within five (5) State business days after receipt of required documentation.

This will be the sole method for bidders to submit RFP questions, clarifications, and/or Request for Change. If questions, clarifications, and/or Request for Change are submitted using another method, bidders will be redirected to the SharePoint site.

1.6 BIDDERS' LIBRARY

1.6.1 Use and Purpose

The State will make available a Bidders' Library containing reference documentation that bidders may review and use to prepare its proposals. The State will provide updated information as it becomes available during the course of the solicitation. The State will ensure the latest documents are provided in the Bidders' Library.

Bidders are encouraged to review the information in the Bidders' Library to gain a thorough understanding of CalHEERS and the SDMO effort in the business and technical environments in which it operates. It is each bidder's responsibility to check for updates to the Bidders' Library. Bidders are advised to review and use the CalHEERS architecture and technical composition data provided in the bidders' library for the development of their proposals and are cautioned against using external sources of information or making assumptions about the system without reaching out to the State for confirmation in the form of a submitted question to the procurement official identified in RFP Section GENERAL 1.5.1 E-MAIL INQUIRIES ~~4.5.4~~ above. It is the responsibility of bidders to contact the Procurement Official for a User ID, password, and link for access to the Bidders' Library. Bidders should check back frequently for updates to the Bidders' Library. Bidders are strictly forbidden to share access information with anyone.

Section 2

Rules Governing Competition

SECTION 2 – RULES GOVERNING COMPETITION

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2 RULES GOVERNING COMPETITION

2.1 IDENTIFICATION AND CLASSIFICATION OF REQUIREMENTS

2.1.1 Requirements

The State has established certain requirements with respect to proposals to be submitted by prospective bidders. The use of "shall," "must," or "will" (except to indicate simple futurity) in the RFP indicates a requirement or condition which is Mandatory. A deviation, if not material, may be waived by the State. A deviation from a requirement is material if the deficient response is not in substantial accord with the RFP requirements, provides an advantage to one bidder over other bidders, or has a potentially significant effect on the delivery, quantity or quality of items proposed, amount paid to the vendor, or on the cost to the State. Material deviations cannot be waived.

2.1.2 Desirable Items

The words "should" or "may" in the RFP indicate desirable attributes or conditions but are nonmandatory in nature. Deviation from, or omission of, such a desirable feature, even if material will not in itself cause rejection of the proposal.

2.2 BIDDING REQUIREMENTS AND CONDITIONS

2.2.1 General

This RFP, the evaluation of responses, and the award of any resultant contract shall be made in conformance with current competitive bidding procedures as they relate to the procurement of goods and services by public bodies in the State of California.

2.2.2 Irrevocable Offer

A bidder's Final Proposal is an irrevocable offer for 180 calendar days following the scheduled date for submission of Final Proposal or Best and Final Offer (BAFO). A Bidder may extend the offer in the event of a delay of contract award.

2.2.3 RFP Document

This RFP includes, in addition to an explanation of the State's requirements, which must be met, instructions which prescribe the format and content of proposals to be submitted and the model of the contract to be executed between the State and the successful Bidder. Refer to the following RFP sections for the full scope of Bidder requirements:

- Section 1, INTRODUCTION & OVERVIEW
- Section 2, RULES GOVERNING COMPETITION
- Section 5, ADMINISTRATIVE REQUIREMENTS
- Section 6, BIDDER REQUIREMENTS
- Section 7, COST
- Section 8, PROPOSAL FORMAT
- Section 9, EVALUATION

If a bidder discovers any ambiguity, conflict, discrepancy, omission, or other error in this RFP, the bidder shall immediately notify of such error in writing and request clarification or modification of the document. Refer to RFP Section 1.5.3, ACCESS TO BIDDERS'

LIBRARY/SUBMIT RFP QUESTION OR REQUEST FOR CHANGE on how to request access with the Procurement Official.

This solicitation document is an RFP, the word "proposal" as used throughout is intended to mean "proposed," "propose" or "proposal" as appropriate. Modifications will be made by addenda issued pursuant to the Addenda Section below. Such clarifications shall be given by written notice to all vendors who have identified themselves as bidders to the Procurement Official identified in RFP Section 1, INTRODUCTION & OVERVIEW, without divulging the source of the request for same. Insofar as practicable, the State will give such notices to other interested vendors, but the State shall not be responsible therefore.

If the RFP contains an error known to the Bidder, or an error that reasonably should have been known, the bidder shall propose at its own risk. If the Bidder fails to notify the State of the error prior to the date fixed for submission of proposals, and is awarded the contract, the Bidder shall not be entitled to additional compensation or time by reason of the error or its later correction.

2.2.4 Examination of Work

The bidder should carefully examine the entire RFP and any addenda thereto, and all related materials and data referenced in the RFP or otherwise available to the bidder and should become fully aware of the nature and location of the work, the quantities of the work, and the conditions to be encountered in performing the work.

2.2.5 Questions Regarding the RFP

2.2.5.1 ~~2.2.4.1~~ Clarification Questions

Bidders requiring clarification of the intent or content of this RFP or on procedural matters regarding the competitive proposal process may request clarification by submitting questions in our SharePoint site. Refer to RFP Section 1.5.3, ACCESS TO BIDDERS' LIBRARY/SUBMIT RFP QUESTION OR REQUEST FOR CHANGE on how to request access with the Procurement Official.

This will be the sole method for bidders to submit RFP questions, clarifications, and/or Request for Change. If questions, clarifications, and/or Request for Change are submitted using another method, bidders will be redirected to the SharePoint site.

Question and Answer (Q&A) sets will be provided to all bidders without identifying the submitters. At the sole discretion of the State, questions may be paraphrased by the State for clarity. These will be posted on Cal eProcure.

2.2.5.2 ~~2.2.4.2~~ Confidential Questions

A bidder who desires clarification or further information on the content of the RFP, but whose questions relate to the proprietary aspect of that bidder's proposal and which, if disclosed to other bidders, would expose that bidder's proposal, may submit such questions in the same manner as above, but also marked "CONFIDENTIAL," and not later than the scheduled date identified in RFP Section 1.4, KEY ACTION DATES AND TIMES, to ensure a response.

The bidder must explain why any questions are sensitive in nature. If the State concurs that the disclosure of the question or answer would expose the bidder's proprietary information, the question will be answered, and both the question and answer will be kept in confidence. If the State does not concur with the proprietary aspect of the question, the question will not be answered in this manner and the bidder will be so notified.

2.2.5.3 ~~2.2.4.3~~ Requests for Changes to RFP Requirements

If the bidder believes that one or more of the RFP requirements is onerous, unfair, or imposes unnecessary constraints to the bidder in proposing less costly or alternate solutions, the bidder may request a change to the RFP in the same manner as above, Clarification Questions. This will be the sole method for bidders to submit RFP questions, clarifications, and/or Request for Change. If questions, clarifications, and/or Request for Change are submitted using another method, bidders will be redirected to the SharePoint site.

The bidder must explain the recommended change(s), facts substantiating this belief, and reasons for making the recommended change. Refer to RFP Section 1.5.3, ACCESS TO BIDDERS' LIBRARY/SUBMIT RFP QUESTION OR REQUEST FOR CHANGE on how to submit such request. The State, at its sole discretion, will determine if the recommended changes will be accepted.

Request for changes and State's response will be published as a Q&A set.

Oral answers shall not be binding on the State.

2.2.6 Mandatory Bidders Conference

A mandatory Bidders Conference will be held, during which prospective bidders will be afforded the opportunity to meet with State personnel and discuss the content of the RFP and the procurement process.

- The time, date, and place of such conference is specified in Cal eProcure.
- Written questions received prior to the cutoff date for submission of such questions may be answered at the conference without divulging the source of the query.
- The State may also accept oral questions during the conference and will make a reasonable attempt to provide answers prior to the conclusion of the conference.
- If questions asked at the conference cannot be adequately answered during the discussion bidders will be asked to submit the questions(s) in writing to the Procurement Official.
- Answers will be published in a Q&A set. Oral answers shall not be binding on the State.

2.2.7 Intention to Bid

Vendors who would like to participate in the bidding process are required to state their intention by the date specified in RFP Section 1.4, KEY ACTION DATES AND TIMES with respect to submission of proposals.

The State is also interested as to a vendor's reason(s) for not submitting a proposal. For example, requirements that cannot be met or unusual terms and conditions that arbitrarily raise costs. Vendors who are not intending to participate in the bidding process are asked to share their reasons by the date specified in RFP Section 1.4, KEY ACTION DATES AND TIMES.

If a vendor intends to submit a bid, the letter should include the additional information identified in RFP Section 1.4.2, INTENTION TO BID. If vendors have indicated significant problems with the RFP requirements, the State will examine the stated reasons for the problems and will attempt to resolve any issues in contention, if not contrary to the State's interest, and will amend the RFP if appropriate. All suppliers who have submitted an intention will be advised by the State of any actions taken as a result of the suppliers' responses.

Hereafter, for the purposes of the instructions of this RFP, all vendors who have indicated their intent to submit a proposal are called bidders until such time that the bidder withdraws, or other

facts indicate that the bidder has become nonparticipating. Should a bidder not participate in a bid step, the State reserves the right to remove them from the participating bidder list and they will not receive any further correspondence until they contact the Procurement Official to indicate that they would like further correspondence.

2.2.8 Addenda

The State may modify the RFP prior to the date fixed for Contract Award by issuance of an addendum. Addenda will be numbered consecutively and posted to Cal eProcure. If any bidder determines that an addendum unnecessarily restricts its ability to propose, the bidder is allowed five (5) business days to submit a Request for Change to the addendum.

2.2.9 Bonds

The State reserves the right to require a faithful performance bond or other security document as specified in the RFP from the bidder in an amount not to exceed the amount of the contract. In the event a surety bond is required by the State that has not been expressly required by the specification, the State will reimburse the bidder, as an addition to the purchase price, in an amount not exceeding the standard premium on such bond.

2.2.10 Discounts

In connection with any discount offered, except when provision is made for a testing period preceding acceptance by the State, time will be computed from date of delivery of the supplies or equipment as specified, or from date correct invoices are received in the office specified by the State if the latter date is later than the date of delivery. When provision is made for a testing period preceding acceptance by the State, date of delivery shall mean the date the supplies or equipment are accepted by the State during the specified testing period. Payment is deemed to be made, for the purpose of earning the discount, on the date of mailing the State warrant or check.

Cash discounts offered by bidders for the prompt payment of invoices will not be considered in evaluating offers for award purposes; however, all offered discounts will be taken if the payment is made within the discount period, even though not considered in the evaluation of offers.

2.2.11 Loss Leader

“Loss leader” is defined in section 17030 of the California Business and Professions Code (BPC) as any article or product sold at less than cost: (a) Where the purpose is to induce, promote or encourage the purchase of other merchandise; or (b) Where the effect is a tendency or capacity to mislead or deceive purchasers or prospective purchasers; or (c) Where the effect is to divert trade from or otherwise injure competitors.

It is unlawful for any person engaged in business within this State to sell or use any article or product as a “loss leader” as defined in section 17030 of the California Business and Professions Code.

2.2.12 Joint Venture Submittals

As applied to this RFP, the term “joint venture” means is a partnership between the persons or companies formed for the purpose of submitting a proposal and of performing the Contract if one is awarded to the joint venture.

If the Contract is awarded to a joint venture, it shall be one indivisible contract. The joint bidders must designate, in writing, one individual having authority to represent them in all matters relating to the contract that will be solely liable for the performance of the entire contract. The State assumes no responsibility or obligation for the division of orders or purchases among joint bidders.

2.2.13 Fair Employment and Housing Commission Regulations

California Government Code section 12990 requires all State bidders to have implemented a Nondiscrimination Program before entering into any contract with the State. The Civil Rights Department randomly selects and reviews State bidders to ensure their compliance with the law. The Civil Rights Department periodically disseminates a list of vendors who have not complied. Any vendor so identified is ineligible to enter into any State contract.

2.2.14 Exclusion of Conflict of Interest

No consultant shall be paid out of State funds for developing recommendations on the acquisition of information technology (IT) products or services or assisting in the preparation of a feasibility study if that consultant is to be a source of such acquisition or could otherwise directly and/or materially benefit from State adoption of such recommendations or the course of action recommended in the feasibility study. Further, no consultant shall be paid out of State funds for developing recommendations on the disposal of State surplus IT products if that consultant would directly and/or materially benefit from State adoption of such recommendations.

2.2.15 Seller's Permit

This RFP is subject to all requirements set forth in sections 6452, 6487, 7101 and 18510 of the Revenue and Taxation Code, and section 10295.1(b) of the California Public Contract Code, requiring bidders to provide a copy of their California seller's permit or certification of registration, and, if applicable, the permit or certification of all participating affiliates issued by the California Department of Tax & Fee Administration (CDTFA). Unless otherwise specified in this RFP, a copy of the bidder's seller's permit or certification of registration, and, if applicable, the permit or certification of all participating affiliates, must be submitted within five (5) State business days of the State's request. Failure of the bidder to comply by supplying the required documentation will cause the bidder's proposal to be considered ~~nonresponsive~~ [non-responsive](#) and the proposal rejected.

2.2.16 Disclosure of Financial Interests

Proposals in response to State procurements for assistance in preparation of feasibility studies or the development of recommendations for the acquisition of IT products and services must disclose any financial interests (e.g., service contract, Original Equipment Manufacturer (OEM) agreements, remarketing agreements) that may foreseeably allow the individual or organization submitting the proposal to materially benefit from the State's adoption of a course of action recommended in the feasibility study or the acquisition recommendations. If, in the State's judgment, the financial interest will jeopardize the objectivity of the recommendations, the State may reject the proposal.

2.2.17 Unfair Practices Act and Other Laws

Bidder warrants that its proposal complies with the Unfair Practices Act (California Business and Professions Code section 17000 et seq.) and all applicable State and Federal laws and

regulations.

2.2.18 Plastic Trash Bag Certification Violations

California Public Resources Code section 42290 et seq. prohibits the State from contracting with any vendor, manufacturer, or wholesaler, and any of its divisions, subsidiaries, or successors that have been determined to be noncompliant to the recycled content plastic trash bag certification requirements. This includes award of a State contract or subcontract or renewal, extension, or modification of an existing contract or subcontract. Prior to award the State shall ascertain if the intended awardee or proposed Subcontractor is a business identified on the current California Integrated Waste Management Board noncompliant list(s). In the event of any doubt of the status or identity of the business in violation, the State will notify the California Integrated Waste Management Board of the proposed award and afford the California Integrated Waste Management Board the opportunity to advise the State. No award will be made when either the bidder or a Subcontractor has been identified either by published list or by advice from the California Integrated Waste Management Board, to be in violation of certification requirements.

2.2.19 Air or Water Pollution Violations

Unless the contract is less than \$25,000 or with a noncompetitively bid contractor, California Government Code section 4477 prohibits the State from contracting with a person, including a corporation or other business association, who has been determined to be in violation of any state or federal air or water pollution control law.

Prior to an award, the State shall ascertain if the intended awardee is a person included in notices from the Boards. In the event of any doubt of the intended awardee's identity or status as a person who is in violation of any state or federal air or water pollution law, the State will notify the appropriate Board of the proposed award and afford the Board the opportunity to advise the Department that the intended awardee is such a person.

No award will be made to a person who is identified either by the published notices or by advice, as a person in violation of state or federal air or water pollution control laws.

2.3 BIDDING STEPS

2.3.1 Negotiations

The State of California reserves the right to negotiate. This solicitation is being conducted under the policies and procedures, per California Government Code section 100505 and the Negotiation Process. The purpose of the Negotiation Process is to maximize the State's ability to obtain a best value solution, based on the requirements and the evaluation factors set forth in the solicitation.

2.3.2 Compliance Phase (Not Applicable)

2.3.3 Confidentiality

THE CONTENTS OF ALL PROPOSALS, CORRESPONDENCE, AGENDA, MEMORANDA, WORKING PAPERS, OR ANY OTHER MEDIUM WHICH DISCLOSES ANY ASPECT OF A BIDDER'S PROPOSAL SHALL BE HELD IN THE STRICTEST CONFIDENCE UNTIL CONTRACT EXECUTION. BIDDERS SHOULD BE AWARE THAT MARKING A DOCUMENT "CONFIDENTIAL" OR "PROPRIETARY" IN A PROPOSAL MAY EXCLUDE IT FROM CONSIDERATION FOR AWARD AND WILL NOT KEEP THAT DOCUMENT FROM BEING

RELEASED AFTER NOTICE OF AWARD AS PART OF THE PUBLIC RECORD, UNLESS A COURT HAS ORDERED THE STATE NOT TO RELEASE THE DOCUMENT. THE CONTENT OF ALL WORKING PAPERS AND DISCUSSIONS RELATING TO THE BIDDER'S PROPOSAL SHALL BE HELD IN CONFIDENCE INDEFINITELY UNLESS THE PUBLIC INTEREST IS BEST SERVED BY AN ITEM'S DISCLOSURE BECAUSE OF ITS DIRECT PERTINENCE TO A DECISION, AGREEMENT OR THE EVALUATION OF THE PROPOSAL. ANY DISCLOSURE OF CONFIDENTIAL INFORMATION BY THE BIDDER IS A BASIS FOR REJECTING THE BIDDER'S PROPOSAL AND RULING THE BIDDER INELIGIBLE TO FURTHER PARTICIPATE. ANY DISCLOSURE OF CONFIDENTIAL INFORMATION BY A STATE EMPLOYEE IS A BASIS FOR DISCIPLINARY ACTION, INCLUDING DISMISSAL FROM STATE EMPLOYMENT, AS PROVIDED BY CALIFORNIA GOVERNMENT CODE SECTION 19570 ET SEQ. TOTAL CONFIDENTIALITY IS PARAMOUNT; IT CANNOT BE OVER EMPHASIZED.

2.3.4 Submission of Proposals

The instructions contained herein apply to the Bidder's Proposal. The Proposal must be complete, including all cost information and required signatures.

2.3.4.1 ~~2.3.4.1~~—Preparation

Proposals are to be prepared in such a way as to provide a straightforward, concise delineation of capabilities to satisfy the requirements of this RFP. Expensive bindings, colored displays or promotional materials are not necessary or desired. EMPHASIS SHOULD BE CONCENTRATED ON CONFORMANCE TO THE RFP INSTRUCTIONS, RESPONSIVENESS TO THE RFP REQUIREMENTS, AND ON COMPLETENESS AND CLARITY OF CONTENT.

2.3.4.2 ~~2.3.4.2~~—Bidder's Cost

Costs for developing proposal are the responsibility entirely of the bidder and shall not be chargeable to the State.

2.3.4.3 ~~2.3.4.3~~—Completion of Proposals

Proposals must be complete in all respects as required by RFP Section 8, PROPOSAL FORMAT. A proposal may be rejected if it is conditional or incomplete, or if it contains any alterations of form or other irregularities of any kind. A proposal must be rejected if any such defect or irregularity constitutes a material deviation from the RFP requirements. The proposal must contain all costs required by RFP Section 7, COST, setting forth a unit price and total price for each unit price item, and a total price for each lump sum price item in the schedule, all in clearly legible figures.

2.3.4.4 ~~2.3.4.4~~—False or Misleading Statements

Proposals that contain false or misleading statements, or that provide references that do not support an attribute or condition claimed by the bidder, may be rejected. If, in the opinion of the State, such information was intended to mislead the State in its evaluation of the proposal, and the attribute, condition, or capability is a requirement of this RFP, it will be the basis for rejection of the proposal.

2.3.4.5 ~~2.3.4.5~~—Signature of Proposal

The bidder must submit a cover letter (which shall be considered an integral part of the proposal) on the company's official letterhead that includes a statement that substantiates that

the individual who signs the letter is authorized to bind the bidding firm contractually and a statement that the bidder commits to fulfilling the requirements of the RFP. The signature block must indicate the title or position that the individual holds in the firm. An unsigned proposal may be rejected.

2.3.4.5.1 Electronic Signatures

Each party of this Proposal agrees to the use of electronic signatures, such as digital signatures that meet the requirements of the California Uniform Electronic Transactions Act (“CUETA”) Cal. Civ. Code §§ 1633.1 to 1633.17), for executing this Proposal. The parties further agree that the electronic signatures of the parties included in this Proposal are intended to authenticate this writing and to have the same force and effect as manual signatures. Electronic signature means an electronic sound, symbol, or process attached to or logically associated with an electronic record and executed or adopted by a person with the intent to sign the electronic record pursuant to the CUETA as amended from time to time. The CUETA authorizes use of an electronic signature for transactions and contracts among parties in California, including a government agency. Digital signature means an electronic identifier, created by computer, intended by the party using it to have the same force and effect as the use of a manual signature, and shall be reasonably relied upon by the parties. For purposes of this section, a digital signature is a type of “electronic signature” as defined in subdivision (h) of Section 1633.2 of the Civil Code.

2.3.4.6 ~~2.3.4.6~~—Delivery of Proposals Email Submissions

The Proposal must be delivered physically and electronically to the Procurement Official (listed in RFP Section 1, INTRODUCTION & OVERVIEW).

Electronic submissions of the Proposal must be sent to the Procurement Official’s email address at: **CalHEERSProcurement@otsi.ca.gov**

For procurement purposes, emailed responses will be considered properly “sealed” if received prior to the time and date specified in Section 1.4, KEY ACTION DATES AND TIMES.

Solicitation responses sent to any other email will not be considered. If necessary, multiple emails can be submitted as long as the subject of the email contains, “Part X of Y” (X identifies the number assigned to this email, and Y identifies the total number of emails expected).

Physical submission of the Proposal shall be mailed or delivered to the Procurement Official (listed in RFP Section 1, INTRODUCTION & OVERVIEW). If mailed, it is suggested that you use certified or registered mail with return receipt requested as delivery of documents is at the Bidder’s own risk of untimely delivery, lost mail, etc.

The complete Proposal must be submitted in the number of copies indicated in the RFP Section 8.2, PROPOSAL CONTENT and no later than the dates and times specified in RFP Section 1.4, KEY ACTION DATES AND TIMES. One copy must be clearly marked “Master.” The overall package shall be sealed, labeled, and properly identified as outlined in RFP Section 8.6.6, PACKAGING AND LABELING. Bidders should be aware that marking the proposal “confidential” or “proprietary” may exclude it from consideration for award. Proposals, both electronic and physical, not postmarked or received by the date and time specified in RFP Section 1.4, KEY ACTION DATES AND TIMES, or not sealed, will be rejected. Proposals submitted under improperly marked covers may be rejected. If discrepancies are found between two or more copies of the proposal, the proposal may be rejected. However, if not so rejected, the Master Copy will provide the basis for resolving such discrepancies. If one copy of the

proposal is not clearly marked "Master Copy," the State may reject the Proposal; however, the State may at its sole option select, immediately after proposal opening, one copy to be used as the Master Copy.

2.3.4.7 ~~2.3.4.7~~—Withdrawal and Resubmission/Modification of Proposals

A bidder may withdraw its proposal at any time prior to the proposal submission date and time specified in RFP Section 1.4, KEY ACTION DATES AND TIMES, by submitting a written notification of withdrawal signed by the bidder authorized in accordance with ~~Paragraph Subsection 2.3.4.5, Signature~~ SIGNATURE OF Proposal ~~PROPOSAL~~, to the Procurement Official. The bidder may thereafter submit a new or modified proposal prior to such proposal submission date and time. Modification offered in any other manner, oral or written, will not be considered. Other than as allowed by law, proposals cannot be changed or withdrawn after the date and time designated for receipt, except as provided in this section.

2.3.5 Rejection of Proposals

The State may reject any or all proposals and may waive any immaterial deviation or defect in a proposal. The State's waiver of any immaterial deviation or defect shall in no way modify the RFP documents or excuse the bidder from full compliance with the RFP specifications if awarded the contract.

2.3.6 Evaluation and Selection Process

Proposals will be evaluated according to the procedures contained in the RFP Section 9, EVALUATION. This process may also apply as the State continues negotiations with up to the three (3) highest scored Proposals and the possible submission of a bidder(s)' Best and Final Offer (BAFO). Upon completing the evaluation of the BAFOs, final selection will be determined on the responsive and responsible bidder submitting the Highest Total Scored bid, after preferences and incentives are considered. The State reserves the right at any time to reject any or all proposals.

2.3.6.1 ~~2.3.6.1~~—Evaluation Questions

During the evaluation and selection process, the State may desire the presence of a bidder's representative for answering specific questions, orally and/or in writing. During the evaluation of Proposals, the State may ask the bidder to clarify their submitted information.

2.3.6.2 ~~2.3.6.2~~—Errors in the Proposal

An error in the proposal may cause the rejection of that proposal; however, the State may at its sole option retain the proposal and make certain corrections.

In determining if a correction will be made, the State will consider the conformance of the proposal to the format and content required by the RFP, and any unusual complexity of the format and content required by the RFP.

1. If the Bidder's intent is clearly established based on review of the complete proposal submittal, the State may at its sole option correct an error based on that established intent.
2. The State may at its sole option correct obvious clerical errors.
3. The State may at its sole option correct discrepancy and arithmetic errors on the basis that if intent is not clearly established by the complete proposal submittal the Master

Copy shall have priority over additional copies, the proposal narrative shall have priority over the contract, the contract shall have priority over the cost sheets, and within each of these, the lowest level of detail will prevail. If necessary, the extensions and summary will be recomputed accordingly, even if the lowest level of detail is obviously misstated. The total price of unit-price items will be the product of the unit price and the quantity of the item. If the unit price is ambiguous, unintelligible, uncertain for any cause, or is omitted, it shall be the amount obtained by dividing the total price by the quantity of the item.

4. The State may at its sole option correct errors of omission, and in the following four situations, the State will take the indicated actions if the bidder's intent is not clearly established by the complete proposal submittal.
 - a) If an item is described in the narrative and omitted from the contract and cost data provided in the proposal for evaluation purposes, it will be interpreted to mean that the item will be provided by the bidder at no cost.
 - b) If a minor item is not mentioned at all in the proposal and is essential to satisfactory performance, the proposal will be interpreted to mean that the item will be provided at no cost.
 - c) If a major item is not mentioned at all in the proposal, the proposal will be interpreted to mean that the bidder does not intend to supply that item.
 - d) If a major item is omitted, and the omission is not discovered until after contract award, the bidder shall be required to supply that item at no cost.

The determination of whether an item is minor or major is the responsibility of the State.

5. If a bidder does not follow the instructions for computing costs not related to the contract (e.g., State personnel costs), the State may reject the proposal, or at its sole option, recompute such costs based on instructions contained in the RFP.

If the re-computations or interpretations, as applied in accordance with this section, Subsection 2.3.6.2, ERRORS IN THE PROPOSAL, result in significant changes in the amount of money to be paid to the bidder (if awarded the contract) or in a requirement of the Bidder to supply a major item at no cost, the Bidder will be given the opportunity to promptly establish the grounds legally justifying relief from its proposal.

IT IS ABSOLUTELY ESSENTIAL THAT BIDDERS CAREFULLY REVIEW THE COST ELEMENTS IN THEIR FINAL PROPOSAL, SINCE THEY WILL NOT HAVE THE OPTION TO CORRECT ERRORS AFTER THE TIME FOR SUBMITTAL.

In the event an ambiguity or discrepancy between the general requirements described in RFP Section 4, PROPOSED SYSTEM and the specific bidder requirements set forth in RFP Section 6, BIDDER REQUIREMENTS is detected after the opening of proposals, RFP Section 6, BIDDER REQUIREMENTS and the bidder's response thereto, shall have priority over RFP Section 4, PROPOSED SYSTEM and the bidder's response thereto. Refer to prior SubParagraph-section 2.2.2, RFP document, regarding immediate notification to State contact when ambiguities, discrepancies, omissions, etc., are discovered.

At the State's sole discretion, it may declare the Proposal(s) to be a draft Proposal(s) in the event that the State determines that Proposals from all bidders contain material deviations, or if it is in the best interest of the State. If draft Proposals are declared, the State may issue an addendum to the RFP. Should this occur, confidential discussions will be held with bidders who are interested in continuing to be considered. Each bidder will be notified of the due date for the submission of a new Proposal to the State. This submission must conform to the requirements of the original RFP as amended by any subsequent addenda. The new Proposals will be

evaluated as required by RFP Section 9, EVALUATION.

2.3.7 Protests

This procurement process does not include any provisions to protest either the process or resulting contract award(s). An unsuccessful Bidder may file a petition for a writ of mandate in accordance with Section 1085 of the California Code of Civil Procedure. The venue for the petition for a writ of mandate will be Sacramento, California.

2.3.8 Award of Contract

Award of contract, if made, will be in accordance with RFP Section 9, EVALUATION, to a responsible bidder whose proposal complies with all the requirements of the RFP documents and any addenda thereto, except for such immaterial defects as may be waived by the State. Award, if made, will be made within 90 calendar days after the scheduled date for Contract Award specified in RFP Section 1, INTRODUCTION & OVERVIEW, however, a bidder may extend the offer beyond 90 days in the event of a delay of contract award.

The State reserves the right to determine the successful bidder(s) either on the basis of individual items or on the basis of all items included in its RFP, unless otherwise expressly provided in the State's RFP. Unless the bidder specifies otherwise in its proposal, the State may accept any item or group of items of any proposal. The State reserves the right to modify or cancel in whole or in part its RFP.

Written notification of the State's award will be made to all bidders submitting a proposal.

2.3.9 Debriefing

A debriefing may be held after contract award at the request of any Bidder for the purpose of receiving specific information concerning the evaluation. The discussion will be based on the evaluations of the bidder's proposal. A debriefing is not the forum to challenge the RFP specifications or requirements.

2.4 CONTRACTUAL INFORMATION

2.4.1 Contract Form

The State has model contract forms to be used by State agencies when contracting for information technology (IT) goods and services. The model contract(s) appropriate for the specific requirements of this RFP are included in the RFP.

2.4.2 Specific Terms and Conditions (Not applicable)

2.4.3 Approval of Proposed Contract

The State will, at any time after submission of the Proposals or as outlined in the RFP Section 9, EVALUATION, negotiate changes to the Contract pursuant to California Government Code section 100505 and the Negotiation Process. The State, at its sole discretion, may choose to negotiate with all bidders if it is in the State's best interest. A vendor who intends to submit a Proposal on this RFP must submit its Proposal to the State in accordance with the schedule contained in RFP Section 1.4, KEY ACTION DATES AND TIMES.

2.4.4 Contacts for Information

Bidders may contact the Procurement Official listed in RFP Section 1, INTRODUCTION &

OVERVIEW to request visits to the physical installation for purposes of familiarization and evaluation of the current processes. Visits shall be made by appointment only, during normal business hours, and will be limited to the Procurement Official listed in RFP Section 1, INTRODUCTION & OVERVIEW or the Official's designee. Visits may be permitted based at the State's discretion, and to the extent that they do not unduly interfere with the conduct of State business.

Oral communications of department officers and employees concerning this RFP shall not be binding on the State and shall in no way excuse the bidder of any obligations set forth in this RFP.

Section 3 Current System

SECTION 3 – CURRENT SYSTEM

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3 CURRENT SYSTEM

3.1 INTRODUCTION

This section of the solicitation provides an overview of the current California Healthcare Eligibility, Enrollment, and Retention System (CalHEERS) Project and the system that was implemented by the project. The CalHEERS Project is a cloud-based solution that supports eligibility, enrollment, and retention for consumers for healthcare affordability programs in the state of California. It is jointly sponsored by the California Health Benefit Exchange (Covered California) and the Department of Health Care Services (DHCS). The CalHEERS is an integrated and automated system that:

- Acts as the single streamlined application for the eligibility, enrollment, and retention of consumers into a health care insurance affordability programs, including:
 - o Modified Adjusted Gross Income (MAGI) Medi-Cal
 - o Children's Health Insurance Program (CHIP), which includes the Medi-Cal Access Program (MCAP)
 - o Advanced Premium Tax Credit (APTC)
 - o Cost Sharing Reductions (CSR) and CSR Surcharge Plans
 - o Unsubsidized Coverage
 - o Family Planning, Access, Care and Treatment (FPACT)
- Provides a user-friendly resource for families and individuals seeking to determine their eligibility for affordability programs, evaluate, select, enroll in, purchase, and maintain healthcare coverage.

3.1.1 Background

Two federal laws, at the highest level, govern the activities of the CalHEERS: the Patient Protection and Affordable Care Act (PPACA or ACA), signed into law on March 23, 2010, and the Health Care and Education Reconciliation Act of 2010, signed into law on March 30, 2010. The federal ACA provided the opportunity for the development of state-based exchanges as “a mechanism for organizing the health insurance marketplace to help consumers and small businesses shop for coverage in a way that permits easy comparison of available plan options based on price, benefits, services, and quality.” Federal and state goals for health insurance marketplaces include streamlining access to increase efficiency, avoiding adverse selection, ensuring continuity of care, consumer education via public outreach and stakeholder engagement, and ensuring public and financial accountability via transparency.

In the fall of 2010, California enacted the first state law in the nation establishing a health benefit exchange under the Affordable Care Act, the California Patient Protection and Affordable Care Act (CPPACA). The CPPACA included legislative intent for the creation of the Exchange to:

- Reduce the number of uninsured Californians by creating an organized, transparent marketplace for Californians to purchase affordable, quality health care coverage, to claim available federal and state tax credits, cost-sharing subsidies, and to meet the personal responsibility requirements imposed under the federal act.
- Strengthen the health care delivery system.
- Guarantee the availability and renewability of health care coverage through the private health insurance market to qualified individuals and qualified small employers.
- Serve as an active purchaser, including creating competitive processes to select participating carriers and other contractors.
- Require that health care service plans and health insurers (collectively “carriers”) issuing coverage in the individual and small employer markets compete based on price, quality, and service, and not on risk selection.

- Meet the requirements of the federal act and all applicable federal guidance and regulations.

In addition, the Affordable Care Act (ACA) introduced changes to Medi-Cal through the introduction of Modified Adjusted Gross Income (MAGI) based Medi-Cal. This change added a new method to determine eligibility, incorporating the MAGI Medi-Cal household composition methodology, which utilizes federal tax filing rules. The ACA also introduced a new household income counting methodology using federal tax filing rules to determine Medi-Cal eligibility.

The Affordable Care Act (ACA) changed Medi-Cal by authorizing the states to expand Medicaid to many low-income individuals under age 65 who were previously ineligible for coverage. The ACA established a new income eligibility limit of 138 percent of the federal poverty level, increasing the number of Californians eligible.

In May 2012, the project sponsors (Covered California and DHCS) completed the planning and establishment phase for the health benefit exchange and formally initiated the CalHEERS Project to create the IT solution to support it. In June 2012, the project sponsors received federal approval for, and signed, the contract with the selected System Integrator (SI) - Accenture, LLP, to develop, implement, maintain, and operate CalHEERS. The development effort was formally launched at the end of June 2012 and CalHEERS went live to the public 15 months later on October 1, 2013. CalHEERS is the California solution for the implementation of federal and state requirements and goals for eligibility, enrollment and retention into insurance affordability programs. The system provides functionality that supports a multitude of programs related to health care enrollment, including eligibility, plan preview and selection, financial management, and ongoing retention (including management of available healthcare plans and affordability options). CalHEERS interfaces with a variety of sources including the Federal Data Services Hub (FDSH), insurance carriers, and State companion systems such as DHCS' Medi-Cal Eligibility Data System (MEDS) and the California Statewide Automated Welfare Systems (CalSAWS) consortia to support shared case management among the programs and organizations. CalHEERS validates eligibility using data interfaces with Centers for Medicare & Medicaid Services (CMS), the Internal Revenue Service (IRS), Franchise Tax Board (FTB), Department of Homeland Security (DHS), and Employment Development Department (EDD) and Verify Current Income (VCI). CalHEERS interfaces with health insurance carriers via Electronic Data Interface (EDI) transactions to complete health plan enrollment.

The CalHEERS Project is governed by Covered California and DHCS and is managed by the Office of Technology & Solutions Integration (OTSI). While the project has a single point of management, it is guided by its sponsors and its programmatic objectives. The following information describes the project sponsors, program partners, and oversight agencies. While not all groups directly participate in governance decisions, they collaborate with OTSI and the project sponsors on matters relating to the CalHEERS.

3.1.1.1 Covered California

California chose early on to operate its own state-based marketplace, Covered California, under the Affordable Care Act. Covered California is an independent entity within state government governed by a five member board. Covered California supports the operations of CalHEERS through the review of project planning deliverables, initiating system change requests, and participation in user acceptance testing (UAT) including defect mitigation.

3.1.1.2 California Department of Health Care Services (DHCS)

The DHCS is the single state agency responsible for effective administration and operation of the California's Medicaid Program, known as Medi-Cal and its Children's Health Insurance Program (CHIP) and Family Planning, Access, Care and Treatment (Family PACT). The DHCS

supports the operations of CalHEERS through the review of project planning deliverables, system change requests and participation in UAT.

3.1.1.3 Office of Technology & Solutions Integration – CalHEERS Project Office (OTSI)

The OTSI is a state agency that provides project management, oversight, procurement, and Support Services for the CalHEERS Project. OTSI manages the CalHEERS System Integrator contract, is the primary participant in UAT and facilitates participation from CovCA and DHCS.

3.1.1.4 CalHEERS System Integrator

Under the current contract, the SI (Deloitte) has transitioned into the System Development, Maintenance & Operations (SDMO) phase where the SI:

- Performs and supports daily operations of CalHEERS, including ensuring the system is operational, stable, and secure; providing back office support; providing service desk services; and providing project management office services.
- Performs maintenance and development activities, including implementing system changes required by policy and federal program changes and enhancements requested by the project sponsors and program partners via formal Change Requests (CRs).
- Delivers and maintains CalHEERS Project Deliverables.

3.1.1.5 County Welfare Directors Association of California (CWDA)

The CWDA is an association representing the human services directors from each of California's 58 counties. The CWDA provides guidance and support with program changes for counties and attends Joint Application Design (JAD) sessions. The assigned CWDA staff are co-located with the project team at the CalHEERS Project site.

3.1.1.6 California Statewide Automated Welfare Systems Collaboration (CalSAWS)

The CalHEERS Project collaborates and works with the California Statewide Automated Welfare System (CalSAWS). The system provides coordination of consumer health information and request for benefits between the CalHEERS and CalSAWS. The activities include communicating changes made to electronic Health Information Transfer (eHIT) and other interfaces that are used to transmit data to and from the CalSAWS system. Our CalSAWS partners are included in all aspects of the Systems Development Lifecycle (SDLC) processes.

3.1.2 Oversight Agencies

3.1.2.1 Centers for Medicare and Medicaid Services (CMS)

The CMS is the federal agency, under the U.S. Department of Health and Human Services, that is responsible for overall oversight of the implementation of ACA, including federal and state exchanges. CMS approves solicitation documents and final contracts. The Center for Medicaid and CHIP Services within CMS is responsible for oversight of California's Medi-Cal and CHIP programs.

3.1.2.2 California Health and Human Services Agency (CalHHS)

The CalHHS oversees twelve departments that provide a range of health care and social services, including the programs managed by DHCS, and the Secretary of CalHHS is a voting member on Covered California's Board of Directors.

3.1.2.3 California Department of Finance (DOF)

The DOF monitors and reviews the direction and progress of State projects ensuring appropriate funding for acquisition, development and implementation activities. DOF has funding approval of all automated System Projects developed or contracted by state departments within the executive branch.

3.1.2.4 Internal Revenue Service (IRS)

The IRS is the federal agency CalHEERS reports on the processes, procedures and security controls in place to protect Federal Tax Information (FTI).

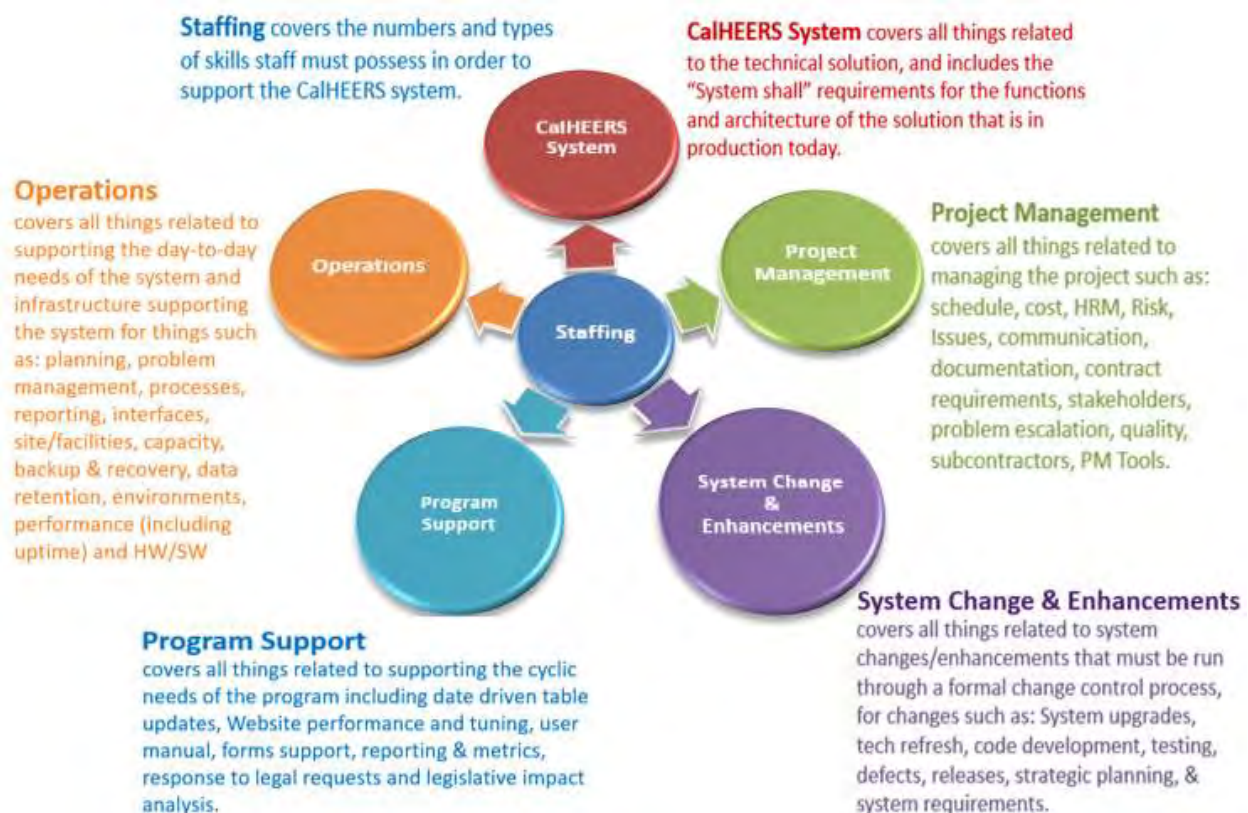
3.1.2.5 Center for Consumer Information & Insurance Oversight (CCIIO)

The CCIIO is a federal oversight entity within CMS, which oversees the implementation of the provisions related to private health insurance. In particular, CCIIO works with states to establish new Health Insurance Marketplaces.

3.1.3 CalHEERS Project Overview

The following graphic provides an at-a-glance view of the current CalHEERS Project. These Project components include Staffing Resources, the CalHEERS System, Project Management, System Change & Enhancements,) Program Support and Operations.

Figure 3-1: Current CalHEERS Project



CalHEERS is a cloud-based system that supports a combination of public-facing and State administrator portals, backend validation, and transfer of information supporting both Covered California and DHCS programs. The CalHEERS key business function is to provide an integrated experience for consumers seeking healthcare and affordability assistance as follows:

- Allow consumers to respond to a single set of eligibility determination criteria either on their own via the Web Portal or by utilizing consumer assistance services such as:
 - o Selecting a Certified Assister or Certified Insurance Agent via the Web Portal,
 - o Using the online help within the Web Portal,
 - o Contacting a Covered California Service Center staff via online chat or a toll-free phone line,
 - o Locating and requesting assistance from their closest DHCS county assistance office, or
 - o Submitting an application via U.S.P.S mail;
- Serve as the single consolidated system supporting eligibility, enrollment, and retention for insurance affordability programs administered by both Covered California and DHCS;
- Interface with federal and state services to verify application information to support automated real-time eligibility determinations;
- Present eligibility determination results to consumers and, if determined eligible, provide options for subsidies enabling more affordable coverage for consumers;
- Electronically transfer consumer enrollment electronic verification and eligibility determination factors between the CalHEERS and CalSAWS via the eHIT interface.
- Allow consumers to shop for health plans and make side-by-side comparisons of the different options available;
- Provide Electronic Data Information (EDI) 834 transaction processing to health insurance carriers; and
- Provide financial management and carrier invoicing capabilities, including the initial and retroactive calculation of premium assessments to carriers.

3.2 CALHEERS SYSTEM OVERVIEW

CalHEERS was developed under an extremely aggressive timeline (15 months from project initiation to solution implementation), enabling the public to apply for and obtain healthcare insurance and benefits beginning October 1, 2013, as scheduled and mandated. CalHEERS has been fully operational since, and has subsequently supported annual cycles of renewals, open enrollment, special enrollment, and tax reporting while continuing to be refined and enhanced through system development, maintenance and operations processes.

There are three core applications that make up the CalHEERS which support the capabilities of the CalHEERS Architecture that rely on each other for services and data.

- Eligibility – A custom application referred to as Health Benefit Exchange (HBX)
- Enrollment – A custom application referred to as Plan Choice and Assister Portal (PCAP)
- Billing Engine – A custom application referred to as Accenture Billing Engine (ABE)

The system is designed to support a flexible number of users and concurrent sessions depending on high peak public access. During the most recent annual Renewal and Open Enrollment period, the CalHEERS was configured to support 134,000 users a day with 10,500 concurrent logged on user sessions.

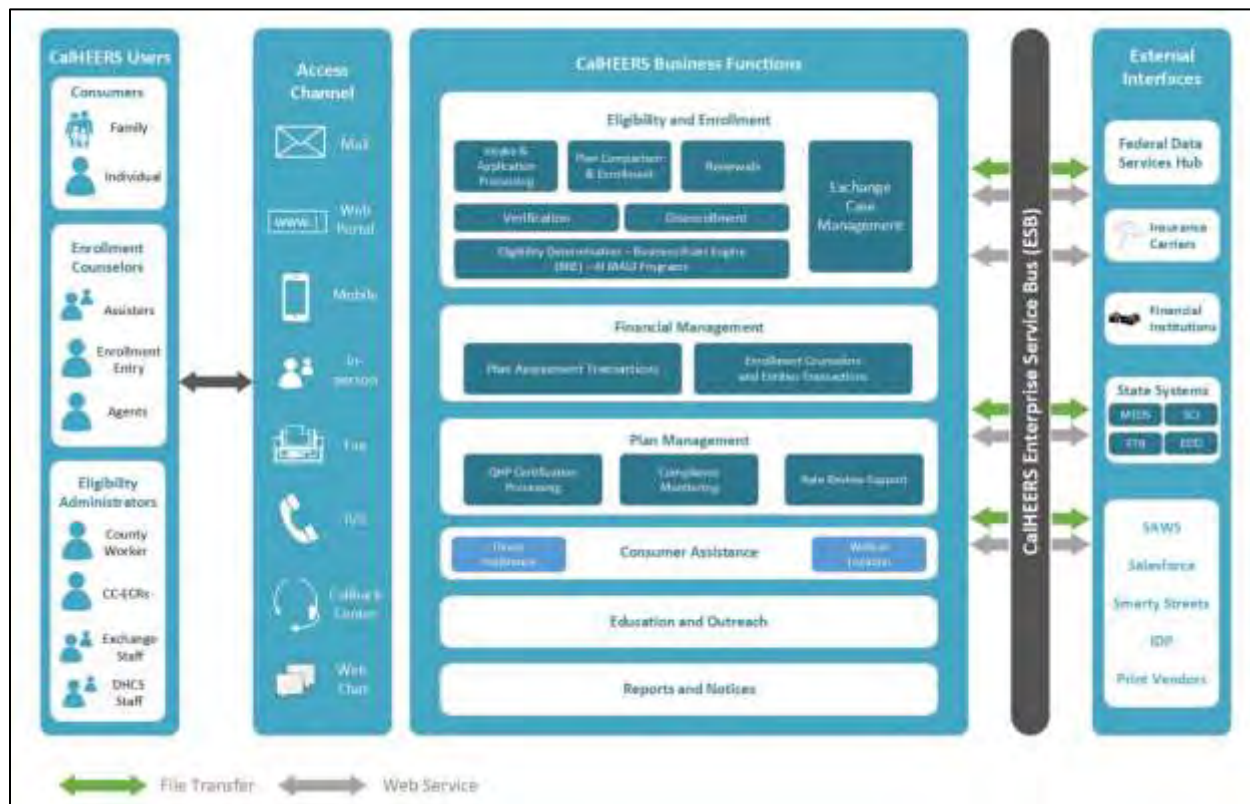
The CalHEERS Security Services perform authorization and access management utilizing ForgeRock, 3 Scale, and Camel verification processing ensuring that consumers accessing the CalHEERS application are authenticated and authorized.

The CalHEERS Decision Services engine provides encapsulation and isolation of complex business rules using Drools which is the Red Hat Decision Manager, Decision Services which is consumed real-time, and via batch for internal and external business decision automation.

The CalHEERS technical architecture represents a composition of multiple enterprise, technology, security, and systems architectures that form a best of breed framework to support

all aspects of the application.

Figure 3-2: CalHEERS Business Model Overview



3.2.1 CalHEERS Architecture

The CalHEERS Architecture design is aligned to the Centers for Medicare & Medicaid Services (CMS) Medicaid Information Technology Architecture (MITA) Technical Architecture and Eligibility Reference Architecture (ERA).

The CalHEERS runs in Amazon Web Services (AWS) utilizing AWS Content Delivery Network (CDN) and AWS Network Load Balancer (NLB), and AWS Storage. It has been modernized to a containerized, open source, and lightweight architecture utilizing 3 Scale Gateway + Fuse, Smarty Streets-USPS, JWS Tomcat, ForgeRock, RedHat Fuse and Aurora PostgreSQL.

To further increase flexibility, the system uses lightweight services containerized on a Red Hat OpenShift Container platform using the strangler fig pattern. The Red Hat OpenShift platform is based on Kubernetes and includes a suite of open-source development, operations, and management tools that integrate with both AWS and the other management tools in use within CalHEERS today.

Figure 3-3: CalHEERS Architecture

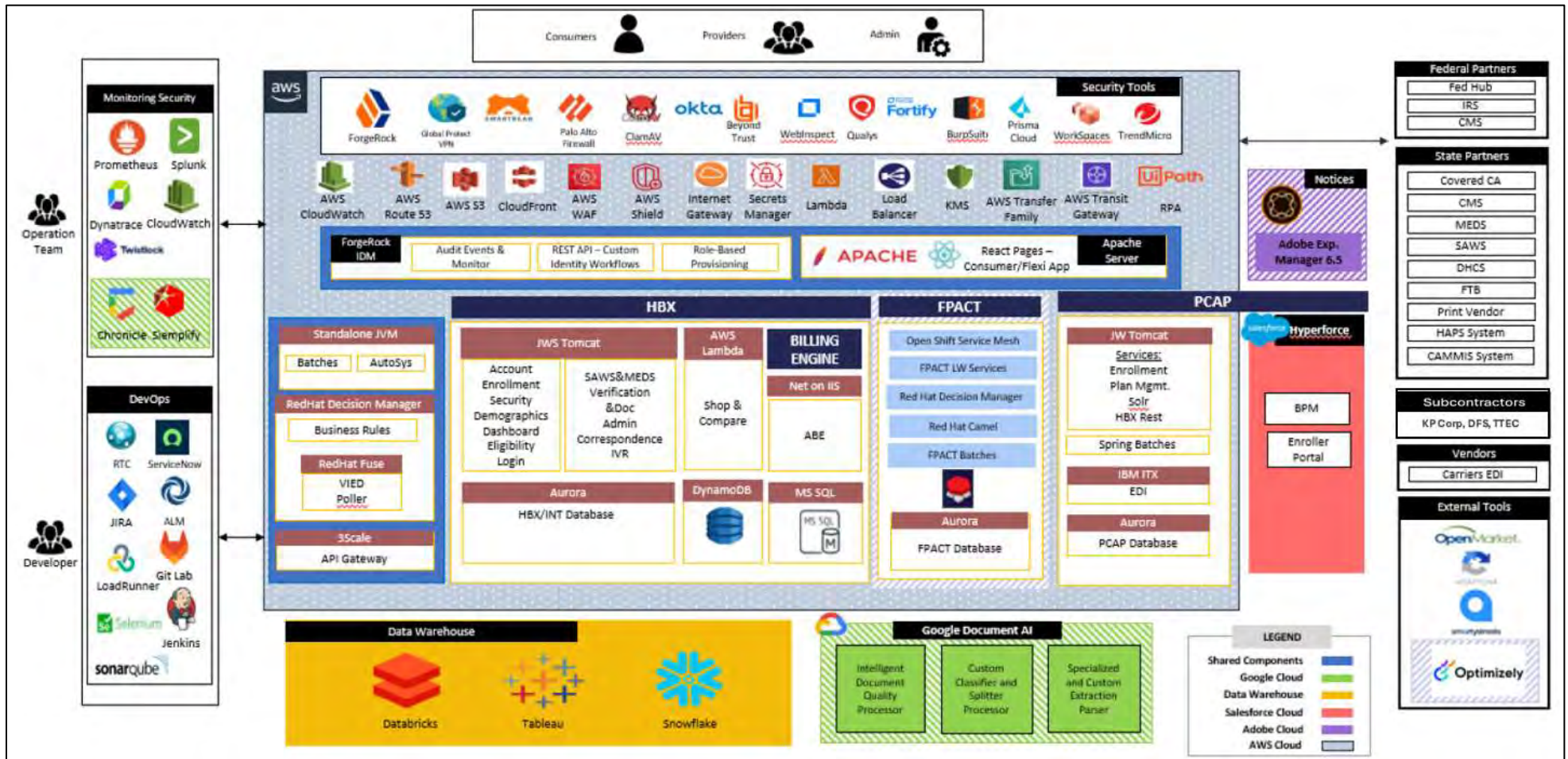
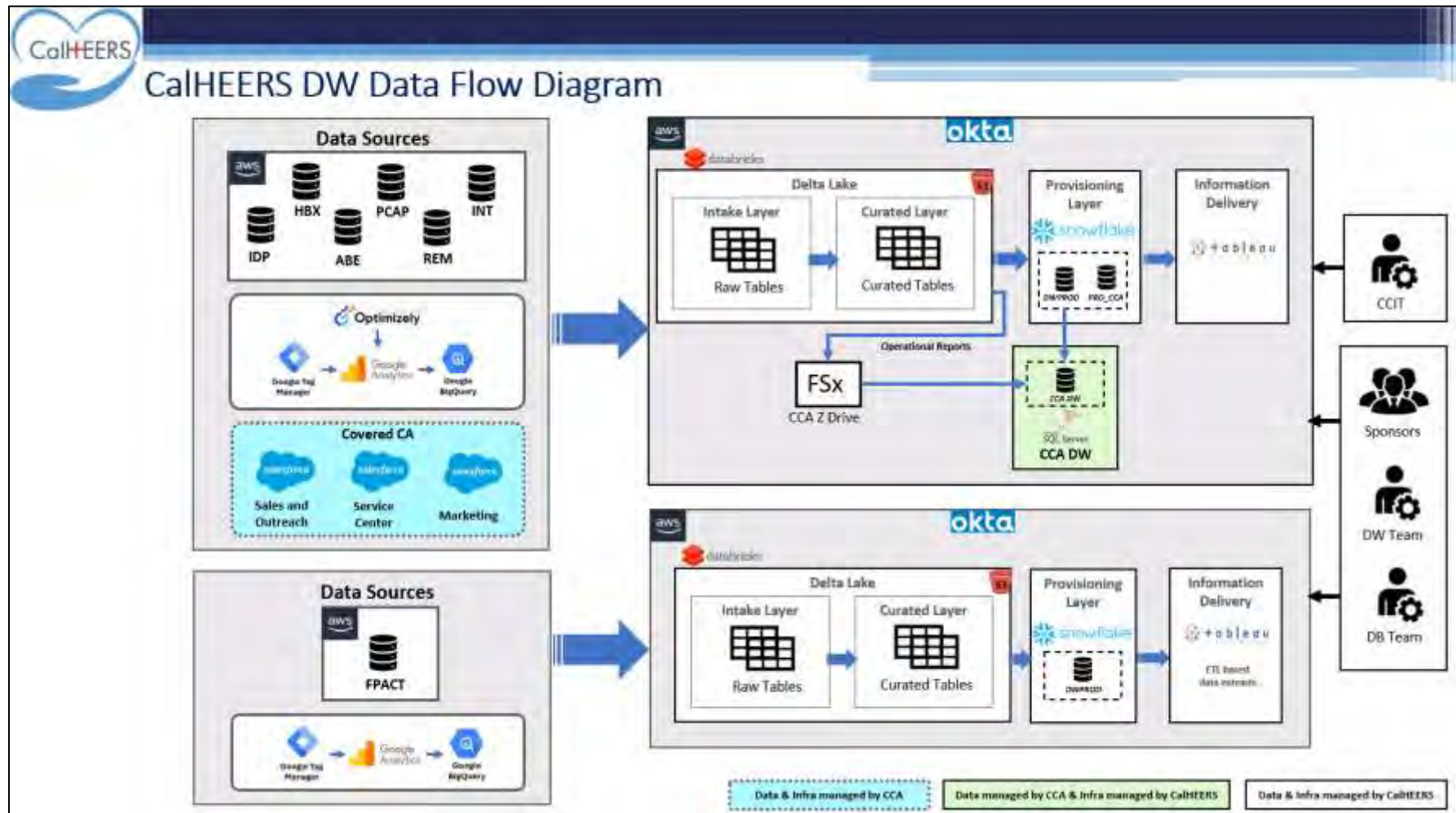


Figure 3-4: CalHEERS Data Architecture



3.2.2 System Functionality

The architecture supports the following system functionality:

3.2.2.1 Eligibility – Health Benefits Exchange (HBX)

The Health Benefits Exchange (HBX) is a customized software product that provides the core program functionality for fulfilling the requirements of determining eligibility for insurance affordability programs, based on policy guidance from Covered California and DHCS.

The consumer-facing front-end system provides access for individuals, families, and enrollment assisters to input application information for individuals applying for insurance affordability programs. This component also allows consumers to shop for health plans and make side-by-side comparisons of the different plans available in Covered California.

The CalHEERS solution leverages HBX, which is designed and configured to meet the business needs for Modified Adjusted Gross Income (MAGI) Medi-Cal and insurance marketplace eligibility processes. The HBX system performs Remote Identify Proofing (RIDP) for all consumers creating accounts and accessing the system. RIDP utilizes the Federal Data Services Hub (FDSH) and services of the CalHEERS RIDP vendor. If real-time RIDP is not possible, alternative methodologies employed by county social services offices, agents/enrollers, coupled with the CalHEERS RIDP vendor support, to provide consumers the ability to ID proof.

Key Eligibility Functions include:

- Application Submission and Update
- Application Information Verification
- Document Upload and Verification
- Eligibility Determination
- Renewals
- Appeals
- Case Management
- Reporting Changes to application information (Report a Change)
- Consumer secure mailbox

3.2.2.2 Enrollment - PCAP

The Plan Choice and Assister Portal (PCAP) is a custom software product that provides the marketplace capabilities for the Individual Shop and Compare, Assister Management, Plan Management, and Qualified Health Plan Agencies, Agents, and Enrollment specialists.

3.2.2.3 Financial Management (Accenture Billing Engine – ABE)

The Accenture Billing Engine (ABE) is a commercial customized software product that provides the capabilities for the Financial Management business area. This includes billing, collections, and reconciliation.

3.2.2.4 Integration and Interfaces

The CalHEERS System supports an Enterprise Integration Architecture. The Integration Application Style uses Service Oriented Architecture (SOA) Architectural Styles, Service Oriented Modeling and Architecture (SOMA), Model Driven Architecture (MDA), and Extensible Markup Language (XML) Schema design best practices, including National Information Exchange Model (NIEM), using two methodologies: (1) Service Identification Framework (SIF)

and (2) end-to-end business process analysis and modeling methodology.

The CalHEERS services adhere to the Web Services Interoperability (WS-I) standard and are based on the Service Contract Specification providing interoperability guidance for core web services specifications such as Service Oriented Application Protocol (SOAP), JavaScript Object Notation (JSON), Web Services Definition Layer (WSDL), and Universal Description, Discovery, and Integration (UDDI).

Where the CalHEERS does not interconnect via web services, the system provides reusable, non-invasive connectivity with end applications. Connectivity is provided through interface adapters that are either uni- or bi-directional with transport services supporting Hypertext Transfer/Transport Protocol (HTTP(S)) and Secure File Transfer Protocol (SFTP).

3.2.2.5 CalHEERS Batch Processing

CalHEERS supports batch processing and consists of over 400 jobs supporting plan management, billing, notices, scheduled reporting (FTB, IRS, CMS), and enrollment processing via carrier interfaces (EDI/834). Batch processing is primarily supported by Autosys, but also supplemented by CRON, database, and Enterprise Grid Management job scheduling.

3.2.2.6 Consumer Assistance

The Consumer Assistance functionality supports multiple user types presenting information in the most useful format which differ based on the different users. The online customer service functionalities are comprised of the following:

- Web Portal online help for consumer application
- Web Portal online help for consumer shop and compare for health plans
- Web Portal ability for consumer to review and select a Certified Enrollment Counselor (CEC) to assist and act on the consumer behalf. The functionality allows for the consumer to search and select a CEC based on several variables (i.e., location, name, language preference). The information displayed tells the consumer how to contact the CEC directly, either through email or phone, but also prompts the CEC to contact the consumer. This functionality further allows for the delegation of authority from the consumer to the CEC to act on their behalf in the completion of the application, introduction of life events and/or selecting and changing health plans.

3.2.2.7 Analytics & Reporting

CalHEERS provides reporting capabilities required by the ACA, Covered California, DHCS, and the State of California. Additionally, as described in 3.6 below, CalHEERS supports its sponsors with data and analytics through an agile process for ad-hoc analytics and report enhancements as new questions and needs for information and analysis arise. Together, these solutions ensure that program operations for CalHEERS and its sponsors are supported by data that is timely, accurate, and insightful.

The foundation of the CalHEERS data platform is a Data Warehouse solution implemented in a cloud-native technology stack that enables reporting and analytics on large datasets with high performance using a range of data modeling and analytic tools and techniques.

The Data Warehouse solution includes the ability for CalHEERS, DHCS, and Covered California to generate monthly reports for CMS, data reports on internal, state, and federal audit and oversight requirements, as well as monthly reports related to Covered California and DHCS enrollees. The data domains for CalHEERS reports include, but are not limited to:

- Enrollment and premium trends

- Eligibility determination outcomes
- Consumer experience, including website interaction data
- Consumer assistance reporting (such as by broker, certified assister, service center or county eligibility workers)
- Notices and member communications
- Financial Reports
- Audit and compliance reporting, including related to data interfaces (such as with IRS)
- Transactional and system monitoring reports

The analytics solution provided by CalHEERS is a robust data platform that, among other features:

- Ingests data from both CalHEERS (HBX and PCAP) and external sources such as Google Analytics, Salesforce, and other data feeds (including from other state agencies and custom datasets);
- Uses an extract transform and load (ETL) design built on Databricks platform. The ETLs are capable of delivering data refreshes at the latency required by the business (e.g. daily for many financial reports, but hourly or even more real-time for consumer actions requiring immediate response);
- Hosts analytics platform on AWS S3 and Snowflake with data assets at staging, curated, and final reporting;
- Provisions role-based access to all layers (across both production and test environments), and applies role-based security controls (such as column-level masking, etc.);
- Documents and catalogs data lineage and metadata;
- Enables User Acceptance Testing (UAT) for new report and data product development that is capable of running on a production-like copy to simulate realistic data behaviors and volumes;
- Allows users to obtain data and results using both no-code and advanced self-service, leveraging tools such as Tableau for visualization, direct access for querying in Snowflake, Databricks, and over ODBC with industry standard data analytic tools (Python, R, etc.);
- Enables the integration and governance of external data sources needed by DHCS or Covered California;
- Hosts and integrates data with separate servers (such as SQL Server and ArcGIS);
- Automates data integrations with other cloud data platforms, such as SAS Viya;
- Provides secured data environments integrated with the core data platform for approved data engineers and analysts at either Covered California or DHCS to securely test, develop, and maintain new data products.

3.2.2.8 Document and Forms Management

As part of normal CalHEERS operations, notices and forms must be generated and sent to a variety of consumers. These notices are mailed to consumers to request an action be taken or to provide a status update of an individual's application, enrollment, and eligibility or in support of annual tax reporting. Senate Bill SB1341 (Reg. Sess. 2013-2014) implemented functionality into the CalHEERS Application that determines whether the notice is printed and mailed by the CalHEERS Print Services or sent to the consumer's county (via electronic file) for generation, printing, and delivery. In addition to applying for coverage and uploading documents (in formats such as: pdf, word, excel, etc.) online, consumers can mail or fax applications and verification documents. Once these documents are received, they are scanned and uploaded for visibility in CalHEERS. Covered California printing and mailing services and all inbound document management services are currently provided by a source subcontracted by the SI. The SI is

solely responsible for the performance of its Subcontractor and provides direct oversight of Outbound and Inbound Print Processing, which includes providing Print Services for Outbound and Inbound Mail. These services are provided by KP and DFS for Covered California.

3.3 CALHEERS STAFFING RESOURCES

3.3.1 CalHEERS State and System Integrator (SI) Staff

The CalHEERS Project is staffed by a team that consists of State and SI resources all of whom are expected to possess personal and human character aligned with our defined and realized culture statement:

“The CalHEERS Project, business partners, and sponsors are a single team that enjoy and take pride in doing important work in support of our Mission. We strive to operate with trust, integrity, and a positive state of mind. We respect the time, expertise, and contributions of all team members. We seek to understand different viewpoints and assume positive intent. We are accountable for our individual and group obligations, actions, and outcomes.”

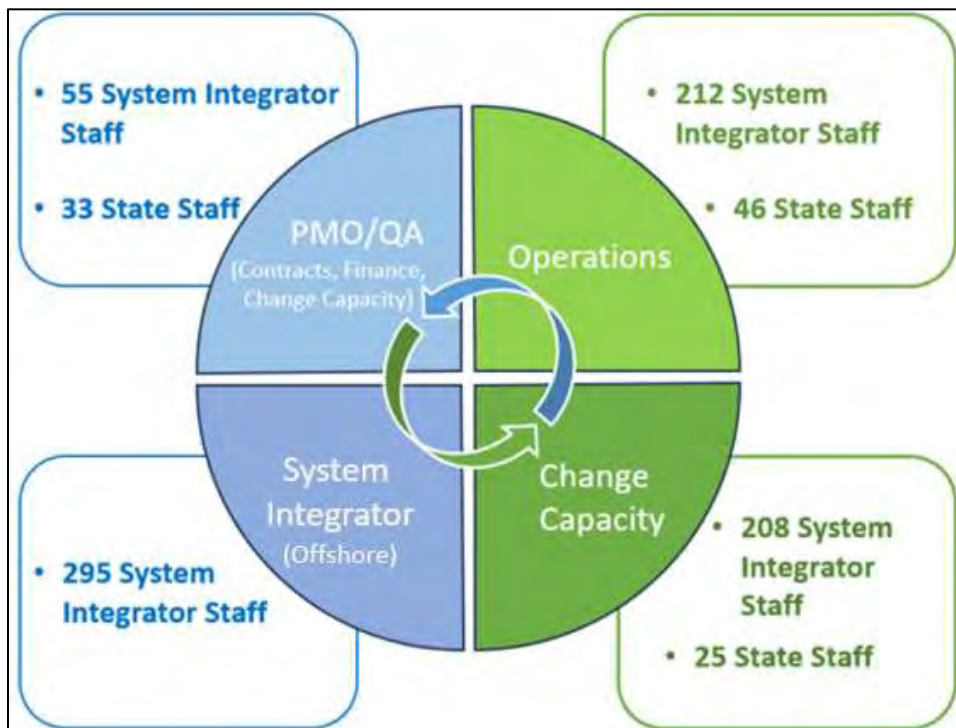
Specific traits identified by our team members as positive influences on our culture include creativity, optimism, insightfulness, interest, trust, ownership, gratitude, collaboration, innovation, accountability, and reliability.

As a team, these resources are responsible for implementing, maintaining, and continuously improving the business functions and operational efficiency as the project and system mature. Staff is currently organized into four (4) quadrants defined as:

1. Project Management Office and Quality Assurance (PMO / QA)
2. Operations
3. Change Capacity
4. System Integrator (includes Offshore Delivery Services)

These quadrants are staffed as follows:

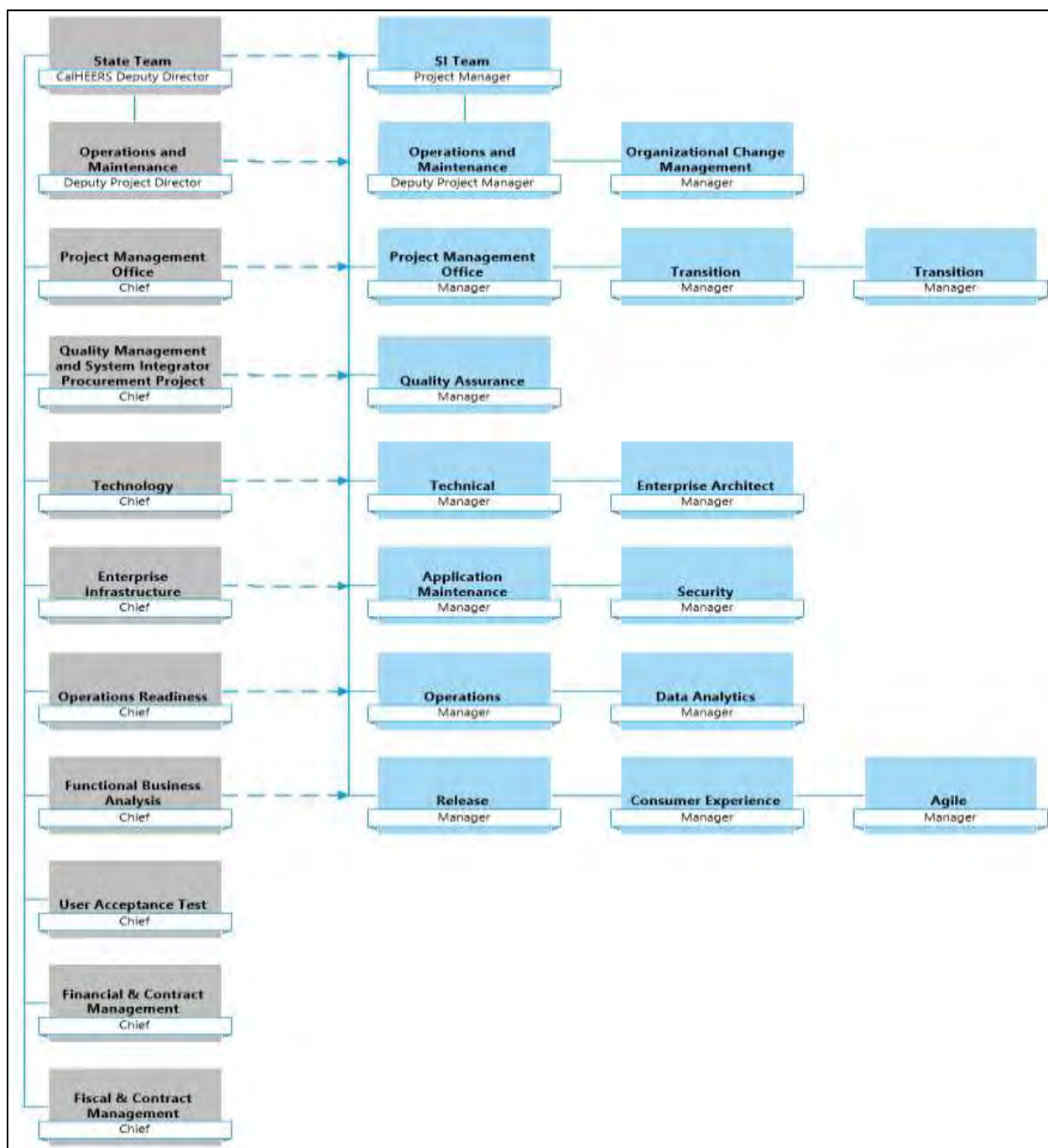
Figure 3-5: Existing CalHEERS Project Staffing



3.3.2 CalHEERS State and SI Key Staff

The State and SI Key Staff are aligned by project or service area to ensure consistency, coverage, and appropriate direction across the project. For example, the CalHEERS Project staff works in concert with the SI PMO to perform the processes and procedures related to deliverables and contract management, invoice approval and payment, as well as several oversight and management activities on behalf of Covered California and DHCS. The key State and SI staff members are co-located at the State project site and are functionally aligned as counterparts as shown below:

Figure 3-6: Existing State and SI Key Staff Counterpart Mapping



The CalHEERS State Project Management Team is comprised of the State Project Director, Assistant Project Director, Project Management Office Chief, Administration Chief, Operations Readiness Chief, and the Systems Development Chief. At the highest level, these team members support the following tasks and activities:

- The State Project Director or designee directs the CalHEERS Project and holds the primary responsibility for the success of the project and the effectiveness of all resources assigned to the project. The State Project Director or designee manages issue resolution assessing impact to schedule or risk and is an active participant and approver in the Change Control Process (CCP), including the escalation of items to the project sponsors and/or Executive Steering Committee (ESC) as necessary. The State Project Director or designee serves as the primary liaison between the CalHEERS Project and the project sponsors, ESC, Covered California Legal Counsel, OTSI Management, and sponsor stakeholder communities. The State Project Director or designee reviews and approves all SI contract Deliverables and approves payment for Services rendered. The SI Project Manager is the direct counterpart supporting the State Project Director or designee.
- The State Assistant Project Director reports directly to the State Project Director and ensures information related to the CalHEERS Project is consistent, correct, accurate, and timely. This role reviews and approves all information provided to the various stakeholders and any external agencies; oversees the day-to-day operations of the State and SI teams' activities; supports the Change Control process; and is responsible for managing the project (i.e., schedule, cost, scope, issues, risks, etc.) and overall project status reporting. The SI Deputy Project Manager is the direct counterpart supporting the State Assistant Project Director.
- The Chief of Technology reports directly to the Assistant Project Director. The Chief of Technology has full management responsibility for organizing, planning, coordinating, directing, and controlling all day-to-day activities spanning across the following units: Application Development and Enterprise Infrastructure, Operational Readiness, Functional Business Analysis, and User Acceptance Testing. They also are responsible for effective oversight of the Project's service delivery, production operations, system testing, performance management and adherence to processes and procedures, which are all critical for the successful delivery of system services.
- The CalHEERS Financial & Contract Management Chief reports directly to the State Project Director and ensures all Fiscal, contract management, procurement, and quality management activities are conducted in compliance with all state and federal requirements. Additionally, the Financial & Contract Management Chief assists both State and SI staff in resolving contract-related questions. The Financial & Contract Management Chief's counterparts are directly or indirectly the SI Deputy Project Manager and the SI PMO Manager.
- The CalHEERS Project Management Office (PMO) Chief reports directly to the Assistant Project Director and works closely with the State Project Director to manage State and consultant resources in support of operations for the Project. In this role, the PMO Chief identifies and implements methods to reduce or mitigate risk; monitors the overall project progress; and coordinates with stakeholders to ensure timely involvement and response. The SI PMO Manager, Application Maintenance Manager and Technical Maintenance Manager are either direct or indirect counterparts in support of this position. In some instances, the counterpart Staff may have a relationship with State staff reporting to Chief.

- The Quality Management & System Integrator Procurement Project chief reports to the CalHEERS Financial & Contract Management Chief and has responsibilities that include managing all quality management activities and procurement project activities.
- The CalHEERS Fiscal & Contract Management Chief reports to the CalHEERS Financial & Contract Management Chief and has responsibilities that include all fiscal and budget activities and various administrative responsibilities. The SI PMO Manager is a direct counterpart to the activities of the Fiscal & Contract Management Chief as they relates to administration and facilities.
- The Operations Readiness Chief plans and directs the activities of the CalHEERS Operations Readiness Team. This position is responsible for ensuring all operational readiness communication, planning, management and support activities lead to a thorough and well documented process to implement the CalHEERS solution. Also, the position is responsible for overseeing the CalHEERS System Integrator (SI) implementation, data strategy, and analytics efforts and provides general leadership and supervision to the CalHEERS Operations Readiness unit consisting of State IT staff and consultants.
- The CalHEERS Functional Business Chief plans, directs, and oversees the day-to-day development and maintenance activities of State and SI staff, ensuring that system development practices are executed in accordance with the documented project processes. This role facilitates weekly stakeholder and project meetings to review progress; discuss priorities; and address issues, changes, and risks. The role also oversees and manages project Change Requests, from inception to implementation, on behalf of the project stakeholders. The SI Application Maintenance and Technical Maintenance Manager(s) are the direct counterparts to this position.
- The CalHEERS Application Development and Enterprise Architecture Chief reports directly to the Chief of Technology and is responsible for ensuring that the CalHEERS Project architecture fits within the State's overall architecture strategy and meets the needs of the State, counties and other stakeholders.
- The CalHEERS User Acceptance Testing (UAT) Chief reports to the Chief of Technology and works closely with the Functional Business Chief, and other CalHEERS divisions to ensure the successful implementation of new and updated system functionalities. This role is responsible for verifying that all functionalities adhere to design specifications and perform as intended. Additionally, the UAT Chief provides leadership and supervision to the UAT team which is responsible for developing and executing test scripts to validate system functionality, and the UAT Test Automation Team to enhance efficiency, accuracy, and testing coverage. The UAT chief is also responsible for managing CalHEERS system integrator (SI) testing, ensuring coverage, and compliance with system requirements, and alignment with overall project objectives.

3.3.3 State and SI Non-Key Staff

In addition to the State and SI Key Staff, the project is supported by various Non-Key Staff, as described in Statement of Work (SOW) Section 2, CONTRACTOR PERSONNEL REQUIREMENTS. These Non-Key Staff members are located both onsite, at the State project site, and offshore. The Non-Key Staff support the project functions and teams depicted in Figure 3-5: Existing CalHEERS Project Staffing, above.

The group of Non-Key (System Change) Staff include numerous roles that are billable under Change Requests as defined within the Appendix D-7, System Changes Costs tabs.

3.4 PROJECT MANAGEMENT

The CalHEERS Project employs a Project Management Methodology consistent with Project Management Institute (PMI) Project Management Body of Knowledge (PMBOK®) and the CMS System Lifecycle Framework guidelines for project management. The project is managed using a structured, repeatable, and disciplined approach to plan, design, develop and implement changes into CalHEERS.

3.4.1 Schedule Management

The project team uses the schedule (work plan) to manage the project, including tracking project tasks, task durations, task resourcing, and progress towards completion. Schedule analysis and reporting is conducted to inform project management of performance risks so they can be mitigated in a timely manner. The project uses the following tools to track, manage, and report on the Contractor and the CalHEERS Project schedule:

- Microsoft® Project Professional
- Microsoft® Project Online
- Microsoft® Project Web App
- Microsoft® SharePoint
- Microsoft® Office (Word, Excel, PowerPoint, Outlook)
- Adobe

The schedule development processes captures hours worked as well as work completed by both Contractor and State resources. The project schedule is organized in a format that permits accurate measurement and reporting of accomplishments and potential schedule impacts.

3.4.2 Cost / Cost Estimating Management

The CalHEERS Operations and Program Support costs are based on set number of hours and a firm fixed price per month. As part of the System Development (Change Request) aspect of the project, the CalHEERS State Management Team works with sponsors and stakeholders to identify enhancements, changes, and modifications and lays out the schedule of those on a rolling 24-month roadmap. The System Change & Enhancements costs are based on either time & materials or firm fixed price, as determined within the change request process.

3.4.3 Human Resources Management

The SI maintains a resource management matrix that contains a month-by-month staffing forecast for the full duration of the project. The matrix is used to drive start and end dates documented on each position description. The SI maintains position descriptions for the CalHEERS Project Team resources that work on the Project.

3.4.4 Risk and Issue Management

Project risks and issues are reviewed by the Risk and Issue Management Group (RIMG). The RIMG evaluates each potential risk to confirm or deny it as a risk; set an agreed-upon risk level; confirm mitigation steps are appropriate; and track and monitor progress toward mitigation or resolution. The SI PMO administers the risk and issue management process. The RIMG members consist of:

- CalHEERS Project Director
- CalHEERS Assistant Project Director

- CalHEERS Chief of Technology
- CalHEERS Operational Readiness Chief
- CalHEERS Enterprise Infrastructure Chief
- CalHEERS Functional Business Analysis Chief
- CalHEERS User Acceptance Testing Chief
- CalHEERS PMO Manager
- CalHEERS Financial & Contract Management Chief
- CalHEERS Fiscal & Contract Management Chief
- CalHEERS Quality Management Chief
- CalHEERS Risk and Issue Lead
- SI Project Manager
- SI Deputy Project Manager
- SI PMO Manager
- SI Risk and Issue Lead
- Risk Owners
- IV&V Vendor Representative
- DHCS Representative
- Covered California Representative

3.4.5 Communication Management

Communication is critical to project success. The CalHEERS Project places a high value on timely, useful, transparent, and effective communications to project sponsors, program sponsors and stakeholders. Open, ongoing communication among project participants is critical to the success of the CalHEERS.

The Communication Plan identifies the procedures used to manage communications for the project. The plan focuses on formal communication elements and channels. Other communication channels exist on informal levels, augmenting those discussed within the plan. The plan is intended to enhance rather than limit communication practices. All project team members are expected to adhere to the established project's Communication Plan.

3.4.6 Document Management

The CalHEERS SharePoint project site provides a central repository for all project information, working documents, and formal deliverables. While it is the primary document management tool for the project, it also serves as a primary communication tool for quick access to key information as well as sharing information across the teams and with project stakeholders and program partners. Key Functions of document management include but is not limited to:

- Deliverables management
- Version control, document naming conventions and standards
- Work Product management process
- Content management

3.4.7 Incident / Problem Management

Incident and problem management consists of the activities used to identify, manage, diagnose and resolve service delivery interruptions. The primary objective of problem management is to solve current interruptions, prevent future interruptions, and to minimize the number and impact of any that cannot be prevented. The State is responsible for providing the overall strategy for incident and problem management and the SI is responsible for implementing the agreed upon resolutions.

3.4.8 Contract Requirements Management

The contract management team is responsible for managing compliance with the terms and conditions in the SI Contractor and Subcontractors' contract; ensuring the processes used by the CalHEERS Project Team align with project objectives and requirements. The project teams understand and fulfill those obligations in a timely manner. Contract Management tracks specific processes related to the following outline areas:

- Deliverables management
- Equipment and Software purchases and ongoing maintenance and support
- Schedule management
- Key Staff performance
- Service Level Agreements (SLAs) management
- Payment management
- Warrant assessment and reporting
- Subcontractor management

3.4.9 Quality Management

To achieve predictable performance and minimize errors and defects as early as possible, team leads are charged with executing quality activities in accordance with plans and defined processes. Deliverable reviews assess and confirm the integrity of individual pieces while reviews across teams verify that the integrated solution satisfies requirements. The Project Management Plan (PMP) and Quality Assurance Methodology define quality reviews on the project.

3.4.10 SI / Subcontractor Management

Subcontractors follow the same PMP rules and standards established for the management of the project. All Subcontractor work is governed by a written contract. Subcontractor provisions and terms are aligned and consistent with Prime Contract and include flow down clauses.

The SI Contract Manager is responsible for the overall management of the subcontract life cycle, which includes solicitation, negotiation, selection, development, implementation, management, and closeout of any and all subcontracts.

Each Subcontractor is assigned a SI project team executive-level resource. The assigned executive is responsible for directing the day-to-day activities and responsibilities of the Subcontractor.

3.4.11 CalHEERS Strategic Planning and Management

The CalHEERS mission is to provide an integrated eligibility, enrollment, and retention solution that supports the Sponsor organizations in delivering health insurance services to consumers in collaboration with business partners throughout California. This is accomplished using industry methodologies that support Strategic Planning Methodology and Activities. Existing Strategic Plan and Roadmap process are located in the Bidders' Library.

3.4.12 Policy & Legislative Impact Analysis and Change Management

State and federal statutory and regulatory changes in support of the healthcare affordability options provided to consumers within the CalHEERS Application are subject to constant change. Analysis of these changes and assessment of system and project impact are a large part of ongoing project work.

3.4.13 Audit Evaluation and Findings Services

CalHEERS manages numerous audits throughout the year and relies heavily on support of the SI pertaining to audit assessments, data analysis, recommendations and reporting, presentation of findings, and finally the implementation of any changes resulting from audit findings.

3.5 SYSTEM CHANGE & ENHANCEMENTS

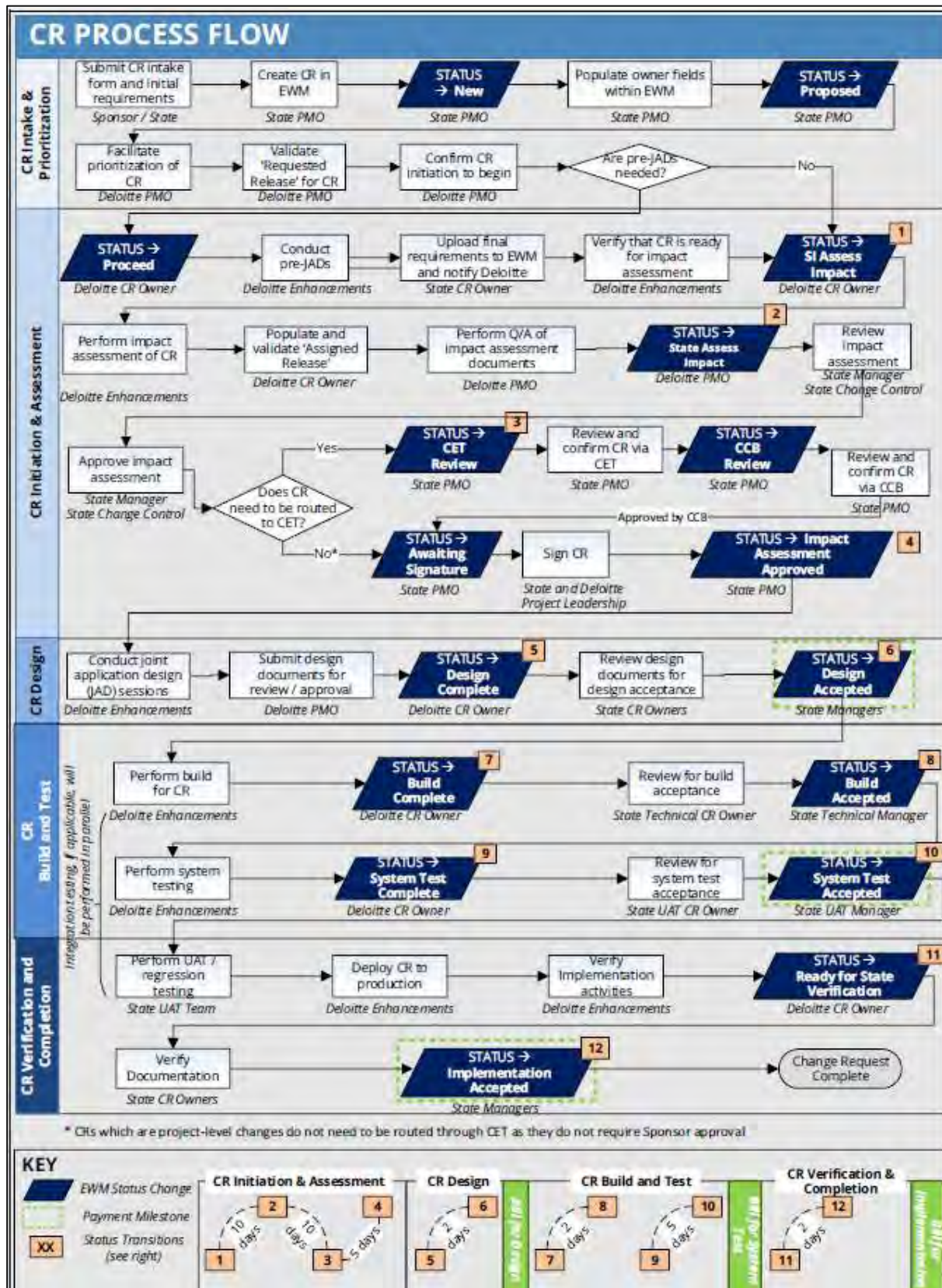
3.5.1 System / Software Development Lifecycle

The CalHEERS software development lifecycle (SDLC) is composed waterfall, modified agile and iterative development methodologies. The current process diagrams are located in Deliverable D-4.2-1 SDLC Plan in the Bidders' Library.

3.5.2 Change Management

The Change Management Process (CMP) is used to manage changes to scope, schedule, costs, requirements, and project deliverables and documentation. The SI PMO and State PMO jointly administer the CCP, with the State having ultimate decision authority over it. The flow for the Change Management process follows:

Figure 3-7: Change Management Process



3.5.3 Change / Refresh / Upgrades

3.5.3.1 System Enhancements / Changes

The CalHEERS Project follows a development lifecycle associated with completing and implementing system enhancements and changes through Change Requests. The software development approach as defined in the CD-4.12-1 - SDLC Plan and CD-4.2-1 - Change Request Process deliverables, which provide the methodology, key activities, responsibilities, and the outcomes expected for each phase of the SDLC for any CR being executed at CalHEERS and documents the approved SDLC methodology for designing, developing, testing, implementing, operating, and maintaining CalHEERS.

A feature is a logical unit of work defined by the design team and approved by the State team. A feature usually consists of many requirements which satisfy a particular component or flow. However, a developer's intimate knowledge of the CalHEERS architecture and code may require them to be part of the requirement gathering and detailed design phase.

3.5.3.2 Change Management

The SI PMO and the State PMO jointly administer the Change Control Process with the State having ultimate decision authority over it.

Potential Change Requests (CRs) can be raised and entered into IBMs' EWM by any CalHEERS project member. In the CR Intake and Prioritization swimlane of the CR Process Flow diagram above, sponsors and program partners can initiate a change by providing details to a project team member to enter on their behalf.

The Change Request Process Deliverable describes the detailed process that will be followed during CalHEERS Project's SDLC detailed in SDLC Plan for both Traditional Waterfall, Agile, and Agile-Hybrid Initiatives. CRs that do not follow the SDLC Plan for Traditional Waterfall, Agile, or Agile-Hybrid Initiatives are considered exceptions to the CR Process and are detailed in section 8.3, Exceptions to the CR Process, of the CD-4.2-1 - Change Request Process deliverable. Please note that the methodology, activities, and outcomes updated for each SDLC phase are detailed in SDLC Plan. The CR Process will expand upon each SDLC phase by providing detailed guidelines of how activities are performed in order to move through the phases of the SDLC.

3.5.3.3 Architectural Design Document

The development architecture supports the development of the application and technical architecture for the project. It consists of the technical services, tools, processes and standards for designing, building, testing application and architecture components. The development architecture is described in four sections:

- Development Architecture Diagram
- Tools Specification
- Procedures and Standards Approach
- Development Architecture Environments

The Architectural Design Document is updated and maintained based on implemented changes. The current document resides in the Bidders' Library.

3.5.3.4 Detailed System Design

The Detailed System Design (DSD) document is divided into multiple documents detailing the components of how the features were built and released during the CalHEERS development.

The document incorporates both system design and wire frame details. The DSD can be found in the Bidders' Library.

The CalHEERS solution is the integration of three products, HBX, PCAP, and ABE. Design components of the System are modified via the Change Request (CR) process and approved on an incremental basis. Detailed design documentation is included as part of the Bidders' Library for review.

3.5.3.5 Database Design

The CalHEERS Database Design is a combination of materials, data and information, some of which is proprietary to the current SI. All components of design that are not proprietary are available for review in the Bidders' Library. In general, the design is comprised of the following three high level components:

- **Data Governance** – The CalHEERS Data Management Strategy (DMS) focuses on implementation strategies for complying with relevant statewide and Covered California data policies and processes.
- **Data Architecture** – The CalHEERS DMS focuses on strategies of data sizing, storage and management of physical data models. Data retention and deletion are addressed with archive and purge policies.
- **Data Sharing Architecture** – CalHEERS adheres to CMS required national standards such as the NIEM and the Health Information Portability and Accountability Act (HIPAA) standards for exchanging data with external entities.

3.5.4 System Requirements Management

The OpenText (Micro Focus) ALM serves as the current source of record for all requirements.

3.5.4.1 System Requirements Management Plan

A complete Requirements Management Plan is documented in Deliverable CD-4.5-1 – System Requirements Management Plan deliverable. This Deliverable provides further details on the requirements documentation, the requirements traceability matrix (RTM) maintenance approach, and the reporting mechanisms for requirements.

3.5.5 Release Management

There are three types of releases that occur as part of the existing release management process.

- **Feature Release** – implementation of key features but can include defect fixes and change requests.
- **Maintenance / Priority Feature Release** – implementation of defect fixes, change requests, enhancements, technical configurations, and deferred functionality.
- **Priority Release** – implementation of critical defect fixes and workarounds to address urgent business needs.

Feature Releases include major enhancements and integration changes with the CalHEERS major business partners such as CalSAWS, MEDS, and carriers. Priority Releases are restricted in scope and are scheduled to implement required fixes and necessary workarounds and to allow the project flexibility for change and defect fixes throughout the year. The number of feature and priority Releases are planned in advance and mapped to support the 24-Month Roadmap referenced earlier in this document.

3.5.5.1 Release Management Plan

The Release Management Plan describes the portions of CalHEERS functionality that will be developed and implemented in each defined release and the rationale for each release. It includes the roles and responsibilities of all participating teams, processes and procedures, assumptions, constraints, risks, and referenced documents used as part of the release approach.

3.5.6 Testing

CalHEERS is in a constant state of change. The teams support multiple concurrent releases and conduct varying levels of testing. Testing components include but are not limited to unit, assembly, integration, system, interface, performance and load, security, end-to-end build validation, regression, UAT, smoke, and the Americans with Disabilities Act (ADA Section 508 compliance testing).

CalHEERS supports a large number of interface partners representing both electronic and batch interface. Significant effort is invested in testing activities including these interface partners to ensure that migration of any change is seamless and does not cause disruption in any operational environment.

The components of the CalHEERS testing methodology are documented in the Master Test Plan (refer to Bidders' Library). The posted plan includes existing activities supporting Release Testing, Installation Verification Reporting, Certification Results, Performance Testing, and Management.

3.5.7 Defect Management

The CalHEERS defect management process is used to manage all defects to resolution and verification. Defects may be found at any point during the testing cycle or in pre-production or production environments. Defects are organized, prioritized, and allocated to SI resources to properly manage each defect through the defect lifecycle. The defect management lifecycle is further described in the Defect Management Plan.

3.6 Program Support Services

The SI is responsible for providing all aspects of Program Support, which includes back-office support activities such as change, release, defect, issue, risk, incident, service request, asset, and contract management. The functional processes related to those activities are embedded in highly customized, hosted, and internal solutions consisting of Application Lifecycle Management (ALM), Engineering Workflow Management™ (EWM), Microsoft® SharePoint, and ServiceNow / ITIL to support the project, its Staff (State and Subcontractors), and sponsors.

3.6.1 Insurance Carrier Support

The SI is responsible for providing support to insurance carriers in their use of CalHEERS, which includes ensuring the quality and technical accuracy of the carrier interfaces and supporting the carriers directly. Support activities include monitoring, reviewing, supporting, testing and communicating changes to the CalHEERS Portal application, system interfaces, and supporting software. It also includes changes and/or upgrades to the technical architecture and infrastructure as it relates to the CalHEERS carrier Interfaces to the carriers. Some of the more common support functions with carrier support includes, but is not limited to:

- Supporting Federally mandated changes with interfaces
- Reviewing transmission of the EDI 834 files to carriers
- Troubleshooting of the inbound and outbound transactions

- Monitoring and troubleshooting data reconciliation processes
- Developing the monthly CMS carrier reconciliation reports
- Monitoring and reporting for the CMS reports
- Supporting annual plan loading for QHPs (health and dental)

3.6.2 Website Management

The SI is responsible for the CalHEERS website that supports the online portal applications. These support services include deployment, monitoring, security reviews, as well as the coordination and execution of communications via the website. These communications include both emergency and non-emergency messages, conveying system outage notifications, extension of annual open enrollment periods and variables, as well as other information.

3.6.3 Consumer Journey

CalHEERS actively maintains and monitors both a self-service and an assisted consumer journey. Consumers are asked focused questions about their experience within the initial application, eligibility determination, and other aspects of the enrollment and retention process, and responses are actively reviewed and considered during limited data analysis including application abandonment rates.

3.6.4 Annual Renewal and Open Enrollment

Each year, members currently enrolled in a Covered California health plan, need to confirm their healthcare coverage for the next calendar year. The process of notifying and managing the automated renewal process constitutes an extremely high volume of online and batch processes for CalHEERS.

Adjacent to the Renewal period is the Annual Open Enrollment period which allows for Californians to apply, have eligibility for financial assistance determined, and, if appropriate, select and enroll in health coverage for the next calendar year. Both Medi-Cal and Covered California programs use the same application and, depending on factors such as family size, income and citizenship or immigration status, eligibility is determined for a Covered California health plan, with or without financial assistance; Medi-Cal, County Children's Health Initiative Program (CCHIP) or Medi-Cal Access Program for pregnant women (MCAP).

Annual Renewal and Open Enrollment cover the majority of the 4th calendar quarter each year and require the CalHEERS online portal to support over 2 million applications with associated back-end integration and noticing components reaching maximum capacity.

3.6.5 IRS / CMS Reporting and 1095 Processing

CalHEERS is required to adhere to the CMS Business Services Definitions (BSD) and IRS §36B(f)(3), which requires monthly and end-of-year reporting for individuals who enroll, or enroll a family member, in a Qualified Health Plan (QHP) through the Marketplace. To comply with these requirements, CalHEERS has a defined number of batch jobs to support this effort that must be supported by the SDMO provider. File generation processes utilizes the Spring Batch framework scheduled by the Autosys batch scheduling system. File transfer is provided by 3scale for communication and transfer between Marketplace and CMS.¹

The ACA added section 6055 to the Internal Revenue Code, which provides that every provider of minimum essential coverage will report coverage information by filing an information return with the IRS and furnishing a statement to individuals. The information is used by the IRS to administer – and individuals to show compliance with – the individual shared responsibility

¹ BSD – Federal And State Interfaces – Internal Revenue Service (IRS) 1095 End-of-Year Reporting

provision in section 5000A.²

CalHEERS complies by providing all consumers Qualified Health Plans (QHPs), active or terminated, a 1095-A form annually for tax reporting purposes. CalHEERS annually generates 1.3 million IRS 1095-A notices composed of original and corrections with 1.1 million produced in January each year. Job queuing, coordination, and communications with the CalHEERS print contractor is critical to the success of the annual effort.

3.6.6 CalHEERS 3895 Processing

Beginning with tax year 2020, the state of California requires residents and their dependents to obtain qualifying health care coverage, also referred to as Minimum Essential Coverage (MEC). This requirement reinstates a state penalty on individuals who do not have MEC, with revenues collected by the Franchise Tax Board. The legislature appropriates the revenue, collected as the Health Care Affordability Reserve Fund (HCARF), and allocates it for use by Covered California to provide financial assistance for marketplace enrollees. This program is known as the Premium Assistance Subsidy (PAS) or the California Premium Subsidy (CAPS).

The amount of CAPS available to a household is calculated when the taxpayer enrolled in the qualified health care plan based on the projected household income for the year. CAPS) paid throughout the year will need to be reconciled at the end of the year with the actual amount allowed based on the actual household income for the year, less federal Premium Tax Credit (PTC) amounts. The decision to provide the CAPS is made on a year-by-year basis by Covered California based on legislative authority and budget.

CalHEERS complies with the Covered California request in determining eligibility for CAPS and providing the applicable tax reporting documents required to claim the subsidy on the California Tax Forms. Covered California consumers, active or terminated, are provided with a 3895 form annually for tax reporting purposes. If Covered California opts to not provide the subsidy in any given year, CalHEERS must continue to provide access to historical documents and regenerate them for the consumers upon request as well as continuing to execute the annual file processes as if the decision was to provide the subsidy

3.6.7 CalHEERS Project Processes

The CalHEERS PMO supports a wide variety of project processes in support of daily operations. These processes are documented in a series of guides that cover a range of activities including communication, fiscal oversight, deliverables management, change and organizational management. When appropriate, the guides include instructions on the use of the associated project management and reporting tools. The processes have been defined in partnership with the sponsor organizations and with updates managed by both the State and vendor Staff.

3.6.8 CalHEERS Application Training

The CalHEERS Application training for Covered California Service Center staff, Certified Enrollment Counselors (CEC) and DHCS County Eligibility Workers is provided by Covered California University (CCU). Modifications to training curriculum based on system enhancements are developed as a component of the CR process and delivered to CCU for inclusion as appropriate.

² IRS Website: <https://www.irs.gov/affordable-care-act/questions-and-answers-on-information-reporting-by-health-coverage-providers-section-6055>

3.6.9 CalHEERS Data Warehousing, Analytics, and Reporting

The CalHEERS data and analytics program is designed to enable CalHEERS and its sponsors to run its programs and operations, and answer critical business questions, with accurate and insightful data. The CalHEERS data warehouse and associated data solutions described in [Subsection 3.2.2.7](#) provide a platform for data warehousing, reporting, dashboards, and analytics activities.

The CalHEERS data and analytics program provides a broad range of operational and analytical support services throughout the data and analytics lifecycle to help CalHEERS and the sponsors leverage the data platform.

Support activities include, but are not limited to:

- **Data platform administration** – maintain configuration, security, maintenance, archival and retention policy (including purging), access control, performance monitoring), across all tools and systems (including AWS S3, Databricks, Snowflake, Tableau, SQL Server, Okta, etc.)
- **Data quality oversight and lifecycle** – including quality reporting, defect identification, root cause analysis and mitigation
- **Performance monitoring and support** – to ensure data users receive timely results from the system.
- **New development** – an agile monthly sprint process is used to triage new requests and ensure that the data and analytics provided to Covered California and DHCS adapt timely to evolving business needs and questions.
- **Training & technical assistance** – technical assistance through venues such as team-led trainings, ad-hoc support, investigations, and weekly office hour sessions.
- **Ad-hoc analytics** – upon request from sponsors, provides data investigations and analyses on emerging or urgent issues.
- **Strategic updates and roadmap** – ensures CalHEERS data and analytics program evolves to meet business needs in a changing landscape, and ensures that the data platform grow sustainably while leveraging new opportunities for modernization.
- **Documentation and data cataloging** – all new data, reporting, and analytics products are fully documented and cataloged to ensure that data about the program is accessible, understood, and used as efficiently as possible.
- **Audit and operational reporting support** – provides responsive reporting for federal and state oversight activities and other audits, as needed.

3.7 OPERATIONS

The existing Operations Plan and Management Report (including the Operations Manual) are located in the Bidders' Library. At the highest level, the artifacts describe the details outlined by the following Framework:

Figure 3-8: Operations and Maintenance Integrated Delivery Framework



The Integrated Delivery Framework identifies the four main activities or Operational Groups that serve as the baseline methodology for the M&O Phase of the CalHEERS Project.

- **Manage Service** – The Operational Areas that define the interface between the State and the SI and govern all aspects of service delivery.
- **Deliver Service** – The Operational Areas focused on delivering specific services, which can be classified as Infrastructure, Application, or Business Process areas.
- **Manage Service Delivery** – The Operational Areas focused on verifying that an appropriate level of service and performance has been and is being provided.
- **Support Operations** – The Operational Areas that provide tangible resource support to the other Operational Areas.

M&O team members are responsible for implementing, maintaining, and continuously improving the material in each Operational Area as the project grows and matures. To support the as-is state of the project, the CalHEERS Project provides 24/7 support from an application development and maintenance and operations perspective. The definition of the existing structure is located in the Bidders' Library.

3.7.1 CalSAWS Collaboration

The CalHEERS Project collaborates and works with the CalSAWS. The system provides coordination of consumer health information and request for benefits between the CalHEERS and the CalSAWS. The activities include communicating changes made to eHIT and other interfaces that are used to transmit data to and from the CalSAWS System, inclusion of CalSAWS representatives in the Change Management Process and UAT testing and support.

3.7.2 Medi-Cal Eligibility Data System (MEDS) Interface

MEDS is the designated system used for verification of consumer status in State-subsidized

eligibility and benefit programs. Both CalSAWS and CalHEERS send updates to MEDS regarding the eligibility into the respective health care assistance programs within CalHEERS.

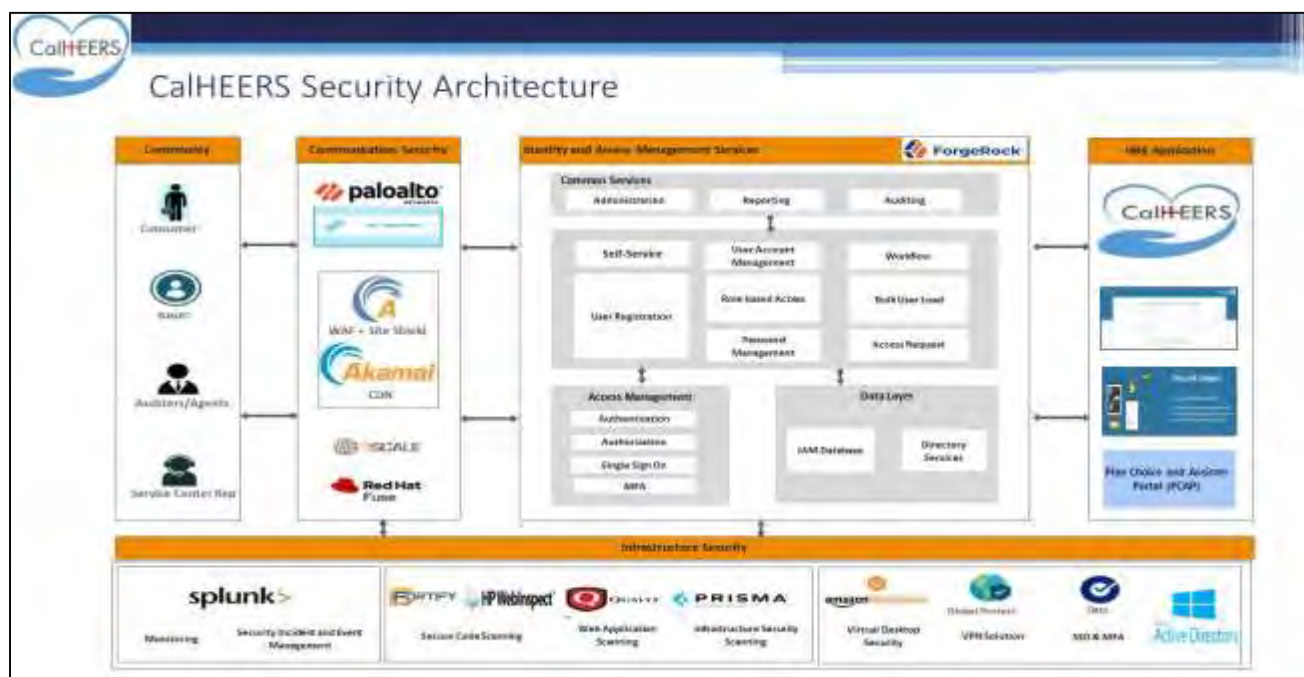
The CalHEERS to MEDS interface is comprised of both real-time Web Services and scheduled Batch Processes. Together, these systems implement the data transfer necessary to update MEDS with data collected from the CalHEERS Single Streamline Application Case Management Solution.

3.7.3 System Security

The CalHEERS enterprise security framework provides a structured approach to establish the baseline controls across CalHEERS and its interfacing partner systems and the security functions necessary to support CalHEERS' current security policies. It also facilitates the analysis of processes, governance, interfaces, and technical capabilities employed by CalHEERS while aligning with federal and state-level standards.

Furthermore the framework focuses on protecting the sensitive data the CalHEERS processes, transmits, and stores. It is the foundation of the data protection and privacy activities in compliance with industry standards, best practices, and regulations governing data protection. The risk management and operational activities within the framework provide the necessary processes and procedures to support the data protection effort all of which are operated within the governance and compliance structure of the framework.

Figure 3-9: CalHEERS Enterprise Security Framework



Guidelines and compliance drivers CalHEERS must adhere to include IRS Publication 1075, FIPS 140-2 (Federal Information Processing Standard), and MARS-E v2.2 (Minimum Acceptable Risk Safeguards for Exchanges) which is derived from NIST SP 800-53 rev 4 (National Institute of Standards and Technology). Effective 2025, MARS-E retires and will be replaced by ARC-AMPE (Acceptable Risk Controls for ACA, Medicaid, and Partner Entities), which is derived from NIST SP 800-53 rev 5, final effective date pending.

3.7.4 System Hardware / Software

Equipment and Third-Party Software licenses to which the State takes title or holds under prime contract shall reside in the Asset Management Software (AMS). Extracts of this data can be found in the Bidders' Library.

3.7.5 Forms Support

As part of the normal CalHEERS Project operations, notices and forms must be generated and sent to a variety of Covered California consumers and Medi-Cal consumers. Notices are mailed to consumers to request an action be taken or to provide a status update of an individual's application, enrollment, or eligibility.

Consumers send application and verification documents to Covered California. Once these documents are received, they are scanned and sent to the CalHEERS. The SDMO SI is responsible for the performance of its Subcontractor and provides direct oversight of Outbound and Inbound Print Processing. This process includes providing Print Services for outbound and inbound mail. Operational detail of the Print Processing Facility is in the Program Support Plan deliverable.

3.7.6 Service Center Services

The current Contractor, at the direction of the State, took over providing service center services for CalHEERS in January, 2024. The service center services include hosting provider and service maintenance and operations, planning, execution, reporting, performance monitoring, capacity planning and sizing, technology recovery, and evaluating and resolving issues. See SOW Section 6.19, SERVICE CENTER SERVICES.

3.8 PROJECT CLOSEOUT

Project closeout is the process of closing out all the obligations of the SI over the duration of the contract term. This effort begins during the final year of the contract.

The existing CalHEERS Services contract with Deloitte includes Project Closeout tasks (SOW 3.1.3 CONTRACT CLOSEOUT) and activities related to the existing contract which ensures that nothing is missed regarding existing contract commitments.

Not to be confused with project closeout, the existing contract also includes specific transition-related activities under a separate contract section SOW 7 TRANSITION to assist with transition essentials between the existing contract and the new contract.

Section 4

Proposed System

SECTION 4 – PROPOSED SYSTEM

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4 PROPOSED SYSTEM

4.1 INTRODUCTION

This section describes the vision for the ongoing CalHEERS System Development, Maintenance and Operations (SDMO) services and proposed system sought through this procurement. Bidders are strongly encouraged to first read RFP Section 3, CURRENT SYSTEM, and any documents referenced in the Bidders' Library prior to reading this section.

4.1.1 Overview

Covered California, the Department of Health Care Services (DHCS), and the Office of Technology & Solutions Integration (OTSI) are committed to partnering with a Contractor that will assist in ensuring that the CalHEERS System is a 'Best in Class' solution and that the CalHEERS Project Office is working with a 'Best in Class' Contractor. The State is seeking a bidder who shares this commitment and can bring foresight, efficiencies, and innovation into consideration by submitting a proposal that will ensure affordability for maintaining existing services.

The selected Bidder must guide the project, with creativity and collaboration, through the transformation of our solution to obtain higher levels of maturity, innovation, cost efficiency, and responsiveness, all while retaining the stability required to support the State's healthcare needs. The selected Bidder must also be nimble and able to quickly adapt to changes in legislation, emerging technologies, and new market opportunities. Finally, the Bidder will identify and deploy accompanying business solutions which represent the best value to the State.

The concepts presented in this section frame the State's vision and high-level outcomes, but do not constrain nor prescribe the bidder's solution methodology, toolset, or approach for achieving the vision and outcomes. The bidder's response must highlight the approach, methodology, and creativity of its proposed offerings to enable the bidder to set itself apart from its competitors. Refer to RFP Section 6, BIDDER REQUIREMENTS for instructions for submitting the proposal.

4.1.2 CalHEERS Vision

The CalHEERS Vision Statement documents that we want to "be the most customer centric portal and a trusted leader in providing access to affordable, high-quality health and human services." To enact that vision, CalHEERS has identified several strategic priorities which are shown in the figure below.

4.1.3 CalHEERS Strategic Roadmap

The CalHEERS Strategic Roadmap records the outcomes of strategic planning efforts between CalHEERS Management and Sponsors and documents the timeline for introduction of change into the CalHEERS Solution (refer to the Bidders' Library – CalHEERS 24-Month Roadmap). The 24-month roadmap is regularly and continuously updated to reflect changes in the environment. As stated above, Covered California, DHCS and OTSI are extremely motivated to select a Bidder who will assist in the continued development of the 24-month Roadmap. Keeping an eye on the future and transformation via applied innovation, while improving the value and quality of changes implemented will be key components of this partnership.

Figure 4-1: CalHEERS Strategic Plan Priorities



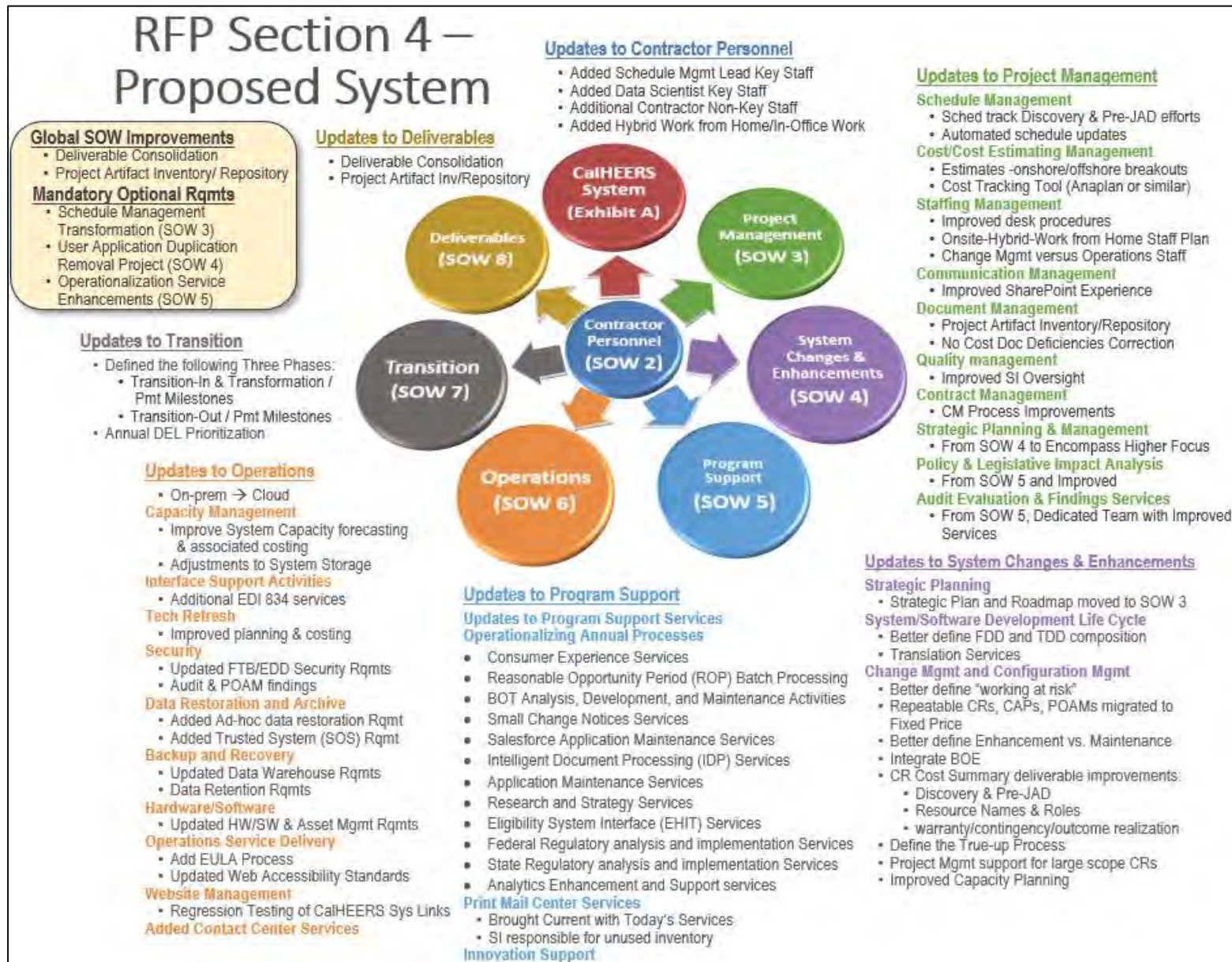
4.1.4 Opportunities for Transformation

This section identifies some of the changes the State seeks to accomplish through the execution of this new contract. The term transformation refers to changes between the existing contract services and the services of the new contract, which combine the vision from both the CalHEERS STRATEGIC ROADMAP (discussed in 4.1.3 above) and any new requirements, marked as "NEW" in the Req # column throughout the Statement of Work (SOW), in the new contract. For more information on the roadmap and timelines for transformation, refer to [Section 4.7 TRANSITION](#) (below).

Covered California, DHCS, and OTSI have identified transformation areas within specific SOW sections where desired improvements are to be brought about via the new contract.

The remainder of this document is devoted to providing Bidders with a guide to the areas in the SOW where enhancements were applied to encourage maturing of project process and tools during, or immediately following, the transition (take-over) period. These focus areas are depicted in the figure below (in the context of their application) and further described in the subsequent subsections.

Figure 4-2: RFP Section 4 – Focus Areas



4.2 CONTRACTOR STAFFING

RFP Section 3, CURRENT SYSTEM, describes the vision and culture of the CalHEERS Project, including the types of skills the SDMO Contractor must possess to support both CalHEERS and its partners. While the CalHEERS Project expects staffing levels appropriate to support services delivery comparable to the current system integrator, refer to RFP Appendix A-4, SOW SECTION 2, CONTRACTOR PERSONNEL REQUIREMENTS, there are particular staffing areas where the State wants to increase focus by applying changes in both Key and Non-Key Staffing, associated skill sets, addressing the hybrid work environment, and refinements applied to both onsite/offsite & onshore/offshore staffing activities. These changes were applied to support the further maturing of the CalHEERS business processes and the anticipated expansion of CalHEERS' business functionality and technology throughout the term of this Contract.

4.2.1 Updates to Key and Non-Key Staffing

The State seeks high quality resources who are both trained and experienced with human services systems and programs with an emphasis on healthcare. These resources will not only need to and have the right skillsets and certifications for maintaining CalHEERS today but also the creativity and experience in collaboration and innovation to help enhance the system with newly emerging technology. The Bidder will also need to bring a breadth in staffing that will permit the ability to ramp up/down staffing as needed to meet both the M&O and Innovation demands of the project. The State also seeks a Bidder team that is organized to complement CalHEERS' organizational structures.

4.2.2 Updates Onsite/Offsite Staffing & Onshore/Offshore Activities

The State will consider the use of both onshore(onsite/offsite) and offshore staffing resources for this Contract, as the State would like to realize the highest value while delivering quality services and client interactions. To do this, the Bidder must ensure that its Staff is knowledgeable and responsive to program needs; willing to make customer satisfaction a priority; and has the ability to obtain, train, and utilize subject matter experts (SMEs) who understand the business and technology of the CalHEERS System. Additionally, the use of Bidder offshore staff requires compliance with security requirements.

4.2.3 Hybrid Remote Work Environment

Following the COVID Pandemic the State has maintained a hybrid remote work/office model on the CalHEERS Project. As of July 1, 2025, the policy includes working remotely one (1) day a week and working in the office four (4) days a week. The State is looking for a Bidder that will work with the State to determine the best onboarding plan, including determining the employees that will be required to work at the CalHEERS office(s) or participate in a hybrid remote work/office model.

4.3 PROJECT MANAGEMENT

The State values and recognizes the quality of people that a Bidder brings to the table are paramount to successful partnerships. Project Management as discussed in RFP Section 3, CURRENT SYSTEM, covers the areas and relationship to managing the project. While the CalHEERS Project maintains much of the same expectations for project management as with the current system (refer to RFP Appendix A-4, SOW Section 3, PROJECT MANAGEMENT REQUIREMENTS), the following are particular project management areas on which the State wants to focus as it plans for the future.

4.3.1 Updates to Schedule Management

The State seeks a Bidder that will implement exceptional Schedule Management practices across the many project work plans. In addition, the State Project Management Office (PMO) has identified the desired improvements to the Schedule Management services provided by the Bidder:

- Improved planning and tracking of Discovery and Pre-JAD efforts, via the implementation of tracking tools, which support Change Requests within the Software Release Work Plans (SRWP).
- Implementation of an automated solution for soliciting and applying schedule updates into the project work plans.
- Schedule Management Transformation – The State desires to transition the project to effort driven schedules, which would promote schedule management efficiencies, improved resource management, and provide transparency pertaining to actual efforts for project activities.

4.3.2 Updates to Cost/Cost Estimation

The State Financial Team seeks a Bidder that can implement a financial tracking system, and bring experienced staff to operate the system. The State is also interested in applying improvements to project cost estimation process, integrating benefit realization and return on investment (ROI) into project cost considerations, and having the Bidder take benchmark data to track key performance indicators (KPI) through system enhancement efforts.

4.3.3 Updates to Staffing Management

The State is looking to apply additional improvements to staffing, including the development of a more comprehensive set of desk procedures, refinement of process/procedures related to long term vacation, absences or illness, and finally delineating between Operations and Change Management staffing.

4.3.4 Updates to Communication

SDMO services of the Bidder must be transparent, meaning that all forms of communication are clear, open, comprehensive, and timely. The Bidder must provide transparency in the cost and effort for system changes; resolution for system or service issues/defects; and system performance for daily operations. Whether through e-mails, phone calls, in-person discussions, formal notifications, deliverables, reports, or structured meetings, transparency must be maintained to ensure the overall health and success of the CalHEERS Project. An area the State desires having the Bidder bring improvements to is the project SharePoint site, including how it's organized and maintained for use by the different project teams. Additionally, the State desires to improve communication with stakeholders specifically as part of planning for Pre-JAD and change request meetings.

4.3.5 Updates to Document Management & Contract Management

The CalHEERS Project depends on exceptional document management techniques in the oversight of the system enhancements and coordination to maintain the high demand for system changes throughout the year. With a myriad of interdependencies between CRs, and teams making changes/updates to system documentation, the State seeks a Bidder that can manage the sophisticated CalHEERS document management processes with great vigilance. To that end, the State has updated the Contract to ensure that deficiencies found in documentation are fixed at no additional cost to the State.

In addition, the State has also augmented the content management services required within the future Contract ~~to better~~ to better utilize some of the content management tools on the project, most notably SharePoint. The Bidder will need to augment their staffing with resources that bring substantial experience in this area.

The State is also looking for a Bidder who will take over and maintain the Project Artifact Inventory, which organizes and identifies the relationships between Deliverables and project artifacts, which include project processes, standard operating procedures (SOP), reports, work plans, tools, reference materials, and work products. Finally, the State desires to have the Bidder work collaboratively with the State management to prioritize the review and update of CalHEERS Project Deliverables.

4.3.6 Updates to Quality Management

The State has applied updates throughout the Contract to provide for improved quality and vendor oversight.

4.3.7 Access to Enterprise Tools

The CalHEERS Project has two main sponsor entities whose staff play large roles in the project's processes. The State is looking for a bidder that not only maintain all the tools used for the project, but also seamlessly provide and manage access to those tools for the large number of CalHEERS or Sponsor staff who use them.

4.3.8 Enhancing Strategic Planning and Management

A lot of effort goes into the Strategic Planning activities on CalHEERS, as they look at least five (5) years into the future strategizing needed system maintenance and desired project innovation, feeding into the Strategic Plan and Roadmap development. And with the number of State desired innovations identified in Section 4.5.4 – GENERAL INNOVATIONS (below), there are a lot of inputs for the Bidder and State to consider.

Additionally, with the rapid advancement of technology and use of data, the State desires a Bidder that will focus on aligning the CalHEERS strategic planning with our Sponsor strategic plans (Covered California and the Department of Health Care Services), as well as the IT and Data Strategic Plan of the California Health and Human Services (CalHHS).

4.3.9 Policy & Legislative Impact Analysis and Change Support

The State desires a Bidder that will bring the experience and needed expertise and lead the project in legislative analysis and policy impact assessment.

4.3.10 Updates to Audit Evaluation and Findings Services

The State is also looking for a Bidder that will provide a dedicated Audit Data Support team.

4.4 SYSTEM CHANGE & ENHANCEMENTS

System Change & Enhancements covers the changes/enhancements to the system that are approved through the formal change control process. These changes include, but are not limited to, new or updated system features/functions, system upgrades or improvements, technical refresh activities, as well as innovations that come from strategic planning, prioritized stakeholder requests, and policy or legislative mandated changes. Please refer to RFP Appendix A-4, SOW SECTION 4, SYSTEM CHANGE & ENHANCEMENTS REQUIREMENTS, the following are particular areas where special attention should be given.

4.4.1 Updates the CalHEERS Solution to keep it Relevant

CalHEERS is an evolving, ever-improving System that must meet the ongoing challenges of healthcare eligibility, options and consumer retention. The State seeks a Bidder who can support these challenges with the right mix of strategic planning, technological innovation, process, and efficiency, all while ensuring the security of the system. Areas of particular importance, include but are not limited to:

- Continuous Improvement
- Adopting/implementing technologies that keep the system relevant and secure
- Improving the CalHEERS Project's ability to manage changes with efficiency, effectiveness and quality
- Focus on the self-service and assisted consumer journey/experience with an emphasis on access to care for all consumers (based on program eligibility and regulation)
- Reconciling cost estimates with actual costs (as appropriate)

4.4.2 Updates to Strategic Planning

The State has moved the Strategic Plan and Strategic Roadmap Deliverables under APPENDIX A-4 – SOW 3 PROJECT MANAGEMENT REQUIREMENTS, aligning the deliverables with the project's structure.

4.4.3 Updates to System/Software Development Lifecycle

It is critical for the Bidder to fully understand all aspects of CalHEERS' functional and technical design and be able to both accurately and efficiently maintain the system design documentation as they implement a high volume of change requests for the project.

Additionally, the State has need for a Bidder that can coordinate and support translation services as required to support CalHEERS public facing client portals and all notices required to support threshold languages within the CalHEERS system as defined by our sponsor organizations.

4.4.4 Updates to Change Management and Configuration Management

The State has applied several updates under the Change Management and Configuration Management areas of the Contract, ranging from smaller improvements to larger updates:

- Improvements for Pre-JAD Planning and other change request meetings to include stakeholders
- Improvements to the Change Request Cost Summary
- Improvements to the Cost True-up methodology
- Integrating the Basis of Estimate content into the Change Request Process Deliverable
- Improvements to Change Management resource capacity planning
- Ensuring Plans of Action and Milestones (POAM) and Corrective Action Plan (CAP) updates are at no cost to the State
- Separating modernization vs mandatory security upgrades
- Improvements around the definitions of work-at-risk and enhancement vs. maintenance
- Improved functional and technical design document compositions
- Defining the required Project Management support for large scope change requests
- Decreasing the "Innovation-to-Implementation" pipeline execution duration

- Improvements to Outcome Realization to identify opportunities to produce the best return on investment (ROI) for change requests

4.4.5 Staffing for Innovation

With the additional technological innovations CalHEERS is considering implementing, it is expected that the Bidder will augment the standard change management staffing with additional, specialized staff. Staff should have proven experience when it comes to implementing and supporting specific technologies. Experience that ranges from confirming proof of concepts through design, development, testing, implementation and the evaluation of KPI's during and post implementation. Technologies include but are not limited to : GenAI, LLM, Consumer Journey/Experience solutions, consumer feedback collection solutions, etc.

4.4.6 Updates to Defect Management

The State seeks a Bidder who will take responsibility of the CalHEERS System, including any existing defects and make it a priority to resolve all defects, maintaining the system to the best of their abilities.

4.5 PROGRAM SUPPORT

Program Support Requirements cover a set of activities and services that support the day-to-day needs of CalHEERS and will be carried out under the fixed price portion of the Contract. Please refer to Appendix A-4, SOW Section 5, PROGRAM SUPPORT REQUIREMENTS, for the scope of this work. The State Points out the following areas of program support services where the State wants to give special attention with an eye towards the future Contract.

4.5.1 Updates to Program Support Services

The State seeks a Bidder who will strive to clearly understand the business needs of the CalHEERS Project and is willing to enhance their understanding as the affordable healthcare options within CalHEERS continue to mature. The State is seeking a Bidder that understands the Affordable Care Act (ACA) regulations, policies, and procedures, and values an understanding of the DHCS programs and how these programs interact as a result of their integration and implementation in the CalHEERS System. The State will expect that the Bidder train their personnel on how affordability programs are administered in the State of California.

The State is seeking a Bidder who will integrate into and actively support the needs of the business. It is critical to the CalHEERS Project that the Bidder develop, deliver, and conduct Program Support activities that clearly defines the roles and responsibilities of the Bidder staff in the day-to-day activities partnering with the business to make informed decisions about the introduction of change into the organization. The State requires the Bidder to update and maintain a Program Support Plan that details out the roles and responsibilities for all activities associated with program support.

4.5.2 Operationalizing Processes

The State is seeking a Bidder able to operationalize and integrate a specific set of activities with a focus on reducing overhead, impact, and costs to the State. The State expects the Bidder to remain consistent with the delivery of quality services while automating, innovating, making efficient and properly documenting each of the following services.

4.5.2.1 Updates to Consumer Experience Support

The State desires to have a Bidder team take over the existing consumer experience services, provided by the incumbent Bidder, assess and improve upon those services and properly

document the process and procedures associated with that body of scope.

4.5.2.2 Reasonable Opportunity Period (ROP) Batch Processing

The State is seeking a Bidder team to assist in operationalization the ROP timeframes associated with healthcare assistance eligibility on behalf of our sponsors. The ROP period is the period of time that a consumer is determined conditionally eligible for healthcare assistance while providing additional documentation to support a final determination of eligible or ~~not-eligible~~not eligible.

4.5.2.3 BOT Services

The State wants a Bidder who can provide skilled staff resources able to assist in the identification, design, deployment and ongoing performance of the current CalHEERS BOT technology services. The responsibilities include both assessing ~~current services~~current services as well as proposing future innovation.

4.5.2.4 Small Change Notices Services

The Bidder will take over and provide the Small Change Notices Services, facilitating small textual changes to system notices.

4.5.2.5 Salesforce Application Maintenance Services

The State is looking for the Bidder to support Salesforce application maintenance, assessing and providing improvements to these services.

4.5.2.6 Intelligent Document Processing (IDP) Services

The State is interested in having the Bidder take over and provide IDP services, expanding the functionality to provide additional benefits to CalHEERS.

4.5.2.7 Application Maintenance Support

Bidder shall provide the Application Maintenance support services

4.5.2.8 Usability Research Services

The State desires a capable, knowledgeable Bidder team to take over and provide usability research services for CalHEERS. The usability research function will align and collaborate with ongoing existing customer research activities at Covered California and DHCS.

4.5.2.9 Eligibility System Interface (EHIT) Services

The Bidder shall take over and operationalize the ongoing process and services supporting the Eligibility System Electronic Health Information Transfer (EHIT) interface.

4.5.2.10 Federal Regulatory analysis and implementation Services

The State desires a Bidder that will take over and improve the Federal Regulatory Analysis and implementation services, including:

- Advanced Premium Tax Credit (APTC) Reporting Support
- Evaluate and design, code and implement the changes required by Federal regulation to the IRS Tax forms
- Modifications to CalHEERS based on Federal Regulation changes

4.5.2.11 State Regulatory analysis and implementation Services

The State desires a Bidder that will take over and improve the State Regulatory Analysis and implementation services, including:

- State Regulatory Analysis and Implementation support
- Evaluate and design, code and implement the changes required by State regulation to the FTB Tax forms
- Modifications to CalHEERS based on State Regulation changes

4.5.2.12 Analytics Enhancement and Support Services

The Bidder shall take over and support the existing CalHEERS data analytics services and assess future enhancements.

4.5.3 Print and Mail Support

The Bidder shall provide the Print Mail Center Services in support of the Contract, as well as any future needs as requested by the State. Additionally, the Bidder shall be responsible for all unused inventory related to these services.

4.5.4 General Innovations

With technology advancing at an ever-increasing pace, the State is looking for a Bidder that can bring to bear a world class team of resources to lead the project into the future via the execution of innovation. The State needs a team experienced in the technology of today with an eye on the horizon for future technology innovations. A team that can quickly pilot new innovative technology. This team needs to bring knowledge and experience in Public Benefit Policy (both state and federal) and be able to identify when innovation might conflict with policy. The team needs to bring customer conversion and consumer experience skillsets to identify improvements that better the system and add value for its end users. The team needs experience in state-of-the-art data research and analysis to help identify system changes/innovations that provide the highest return on investment to the State. And finally, the team will need to be experienced in the very latest security standards and trends, keeping the system as secure as possible. Some of the innovations the State is interested in are discussed in the subsections below.

4.5.4.1 Private Sector-Like Ideation

The State desires to work with a Bidder that can bring innovation ideation processes to the project like those used in the private sector, analyzing, and aiding the state in finding the desired balance between innovation speed to market and risk tolerance, in order to provide the most benefit to the CalHEERS consumers.

4.5.4.2 World Class Innovation Team

Pertaining to Innovation, the State is in need of a Bidder that will not only bring a staffing level to takeover and execute the existing services of CalHEERS but will also bring staff that are world class innovators with specialized skills in project areas where the State desires enhancement and/or innovation. Some of the teams the State anticipates needing include but are not limited to:

- Innovations Team
- Specialized Research and Strategy Team
- Artificial Intelligence (AI) Team
- Dedicated Data Analytics Team
- Dedicated Enrollment Data Team

- Dedicated PRA Data Team
- Dedicated Audit Support Team

4.5.4.3 Time to Market SDLC Innovation

The State is looking for a Bidder to analyze and enhance the project SDLC, with the goal of reducing the time between enhancement or innovation ideation and implementation.

4.5.5 Data & Analytics Innovations

4.5.5.1 Data & Analytics Program Innovations

In March 2024, California Health and Human Services (CalHHS) introduced their CalHHS IT & Data Strategic Plan which outlined the strategic direction for the future of data. As part of the strategy, CalHHS identified seven (7) key elements of the Future Digital Ecosystem (FDE) that enables them to:

1. Identify a set of services that can improve an Individual, Community, and/or Population's (ICPs) overall wellness, with consent (Holistic Assessment).
2. Understand the potential for specific service delivery to ICPs (Screening).
3. Connect with ICPs with services (Referral and Outreach).
4. Validate service conditions and permissions across all services (Eligibility).
5. Formally initiate service delivery (Enrollment).
6. Coordinate, provide and inform service usage (Care Management).
7. Understand the impact and continuously improve services through longitudinal data analysis (Evaluation).

The State seeks a Bidder who will advise the CalHEERS towards alignment with the IT & Data Strategic Plan that provide an outcome which maximizes such benefits.

4.5.5.2 Data & Analytics Platform Innovations

The State seeks an assessment of the CalHEERS data platform to identify opportunities for expansions and innovations. In addition to generating innovations across the spectrum of data analytics technologies and processes, CalHEERS seeks to improve its data governance tools and processes (including metadata and catalogs) that can integrate effectively with Covered California and DHCS's own processes and environment. The CalHEERS data platform also seeks to leverage innovations that allow seamless integration between environments to reduce the redundant copying and transferring of data and thereby reduce total cost of ownership. Attention to data retention and archiving for analytics is also increasingly important as CalHEERS matures.

Examples of some of the data platform innovations that CalHEERS might consider through a future change request enhancement include:

- Enhancement and improvement of the shared oversight between secured sponsor-controlled data environments and the broader CalHEERS-specific data platform.
- Simplification of data product and visualization sharing across environments (such as Covered California service center representatives, DHCS staff, etc.), stakeholders (e.g. sharing data assets or reports with carriers or counties) and the public (such as publicly accessible visualizations).
- Deployment of a modern technology for data catalog and discovery, collaboration and sharing, meta-data and data governance management, etc.
- Integration of a full geo-coding and geo-spatial enrichment data into the CalHEERS System.

- Leverage new technologies and processes to strengthen analytics development lifecycle.
- Data and Analytics Development Lifecycle Innovations.

4.5.5.3 Data & Analytics Development Lifecycle Innovations

CalHEERS is a continually evolving system and requires an approach to Data & Analytics that grows with the platform. Delivering insights requires a development approach to data and analytics that includes the strategic, flexible, and creative approaches of an agile environment, while still retaining the sustainability, dependability, and security of traditional development lifecycles. CalHEERS seeks to partner with a Data & Analytics team that is committed to making data meaningful and using it to evaluate CalHEERS operations and improve the way it serves Californians.

CalHEERS seeks to move beyond merely fulfilling report requests and instead ensure that data and its insights are infused throughout system design and development. Among the innovations we see for Data and Analytics Development Lifecycle include, but are not limited to:

- An operating model for analytics that includes both data management and analytical activities.
- A development lifecycle that includes active partnership with CalHEERS and its sponsors to build shared purpose and allow the Bidder to anticipate program analytical needs and achieve easy and fluid communication with data customers.
- A roadmap for incrementally building “customer 360” data products (including foundational components like identity resolution).
- The integration of Bidder, CalHEERS, sponsor staff, and other stakeholders as needed, as key subject matter experts on nimble data product teams.
- Potential deployment of analytics pods or communities that build knowledge and capabilities in analytics and can be deployed with system product owners to derive new insights and help CalHEERS innovate.

4.5.5.4 Advanced Analytics & Data Science Innovations

For advanced analytics and data science, CalHEERS seeks a team with expertise to both envision and implement the data foundation to power artificial intelligence (AI) and other data-driven technologies that can accelerate innovation in our service to consumers.

The advanced analytics and data science innovations sought by CalHEERS include, but are not limited to:

- Potential for turning structured and unstructured data (e.g. call center recording, web interaction data, etc.) from a variety of consumer interactions into opportunities for improving service.
- Leveraging advanced empirical techniques to increase automation and generate insights into consumer behavior – accompanied always by assessments of the empirical and ethical appropriateness of model applications to generate impact at scale in a government setting.
- Building experiments and evaluation frameworks informed by expert research design attuned to make strong causal inferences.
- Highlighting other Covered California data assets (surveys, health care utilization data, product data, etc.) that could be used to develop new data products.

4.5.5.5 Outcome Realization Innovations

The State wants a Bidder data analytics team to mature the existing CalHEERS data analytics, analyzing data from the data warehouse and change management process, focusing on

outcomes, to inform the strategic planning and prioritization processes on what changes provide the most return on the State's investment.

4.5.6 Consumer Journey & Experience Innovations

4.5.6.1 Self-service & Assisted Consumer Journey and Experience Innovations

The State desires a Bidder that is highly experienced in analyzing and improving the consumer journeys of their clients. A Bidder that can analyze and make recommendations pertaining to the CalHEERS' consumer journey and data boundaries, and identify improvements to data management, (e.g., moving towards Consumer 360 data, conducting analysis and road-mapping, advancing A/B Testing, providing input for next best action campaigns, and permitting focus on equity). Ultimately bringing innovation to both the self-service and assisted consumer journeys and experiences on CalHEERS with a focus on outcome realization.

4.5.6.2 Consumer Feedback Collection Solution Innovations

The State is interested in having a Bidder institute consumer feedback collection functionality, e.g., consumer surveys, to collect data on the consumer experience to inform the Bidder and State on future innovations.

4.5.6.3 Choice Architecture & Nudging Innovations

The State is interested in having a Bidder improve the CalHEERS' choice architecture and nudging functionality, identifying options for how the system could better promote decisions that benefit the consumer, and trigger next best action nudges, being mindful of government restrictions or policies.

4.5.7 Artificial Intelligence Innovations

4.5.7.1 Artificial Intelligence (AI) & Generative Artificial Intelligence (GenAI) innovations

The State is interested in a Bidder that is an expert in implementing Artificial Intelligence (AI) and Generative Artificial Intelligence (GenAI), and desires to enhance the AI functionality in use today and propose GenAI solutions that would allow CalHEERS to "do more with less," e.g., implementing a chatbot or assistant which takes advantage of Large Language Models (LLM) and would be accessible to all users of CalHEERS.

4.5.8 Organizational Innovations

4.5.8.1 Multi-Sponsor Design Strategy

The State would like to have a Bidder analyze, make recommendations, and assist with implementing organizational changes moving the State closer to a single design strategy shared by CalHEERS and Sponsor organizations.

4.5.8.2 Project to Product Management

The State has interest in having a Bidder conduct research and analysis, providing advice/guidance on organizational changes for CalHEERS that move the State from a project management focus to a product management focus. This shift in focus should bring efficiencies to CalHEERS, via improved Sponsor product team involvement, leading to improved products and services for consumers. Additionally, Covered California is already using Prosci's OCM methodology within their organization and desires the Bidder be experienced with and utilize that methodology for implementing this shift in focus.

4.5.9 Security Innovations

4.5.9.1 Security Innovations

In the Security realm, the State is looking for a Bidder to bring a best-in-class Security Operations Center (SOC) that will ensure CalHEERS is compliant with all applicable security standards, whether that be Minimum Acceptable Risk Standards for Exchanges (MARS-E) or Acceptable Risk Controls for ACA, Medicaid, and Partner Entities (ARC-AMPE) and any other dictated standards. The Bidder will need to be capable of bringing the most state-of-the art, iron-clad security solutions, able to enhance existing AI security solutions, able to automate incident reporting, provide transparency with internal security metrics, and provide more stringent security monitoring of third-party vendors on the contract.

4.6 OPERATIONS

Operations covers all things related to supporting the day-to-day needs of the system and infrastructure supporting the system for things such as: planning, problem management, processes, reporting, interfaces, site/facilities, capacity, backup and recovery, data retention, environments, performance, and hardware/software. Although the CalHEERS Project will maintain much of the same expectations for operations as the current system (refer to RFP Appendix A-4, SOW Section 6, OPERATIONS REQUIREMENTS), the following are particular areas related to operations where the State wants to give special attention, with an eye towards the future Contract.

4.6.1 Effective/ Efficient Operations

This procurement seeks to improve the maintainability, reliability, and efficiency of CalHEERS. The Bidder must be able to leverage emerging technologies and industry best practices in their implementation of policy and program changes. Ideally, the Bidder must blend system maintenance and strategic planning to provide a well-planned roadmap for system improvements that include evaluation and recommendation of SDMO service improvements to save costs and provide better functionality. The State is also looking for a Bidder to take on more operations process responsibilities, reducing State overhead in areas like management of end-user licensing agreements (EULA).

4.6.2 Updates to the CalHEERS Infrastructure

One of the largest changes CalHEERS has undergone was the migration of the system from an on-prem infrastructure to the cloud. The State will continue to work with the Bidder to ensure that all applicable CalHEERS System components are cloud-based and optimized to ensure that the advantages of the cloud are achieved.

4.6.3 Updates to Capacity Management

The State has applied updates to ensure the Bidder has the ability to accurately forecast and transparently cost both system capacity and storage.

4.6.4 Updates to Interface Support Activities

The State has applied updates to acquire additional support services around EDI 834 transactions.

4.6.5 Updates to Technical Refresh

CalHEERS conducted technical refresh activities which accomplished the following:

- Access Gateway Modernization
- Lightweight Modernization
- IAM Modernization
- Data Warehouse Modernization
- CDN Modernization
- Database Modernization
- Poller Services Modernization
- Rules Engine Modernization

These updates to the system open the door for future improvements to be planned/implemented which the State has identified improvements in the areas of planning and cost effectiveness.

4.6.6 Updates to Security

The State is interested in a Bidder that will bring a world class Information Security Team, with comprehensive expertise and capabilities across all security domains, to ensure a robust cybersecurity defense for the project. Requirement updates were also applied to address FTB and EDD security requirements, changes around processing Audits or POAM findings, and 3rd Party Vendors that provide services to CalHEERS.

The State seeks to continue to add different data sources to CalHEERS (as with EDD and FTB) that may involve different legal requirements. As such, the state is interested in a bidder who can provide a security framework that is adaptable to a variety of data with diverse security, audit, and privacy requirements.

4.6.7 Operations Service Delivery

The Bidder shall assume responsibility of maintaining CalHEERS and continually improve the SDMO services described in Section 3, CURRENT SYSTEM, while meeting all the requirements stated in Appendix A-4, STATEMENT OF WORK (SOW). The Bidder must ensure the stability, consistency, and reliability of the system functionality while delivering the SDMO services and process improvements.

4.6.8 Website Management

The State desires a Bidder that will not only takeover the existing website management activities on CalHEERS, but bring needed improvements, like regression testing of system links, accessibility testing or ADA compliance for updates, etc.

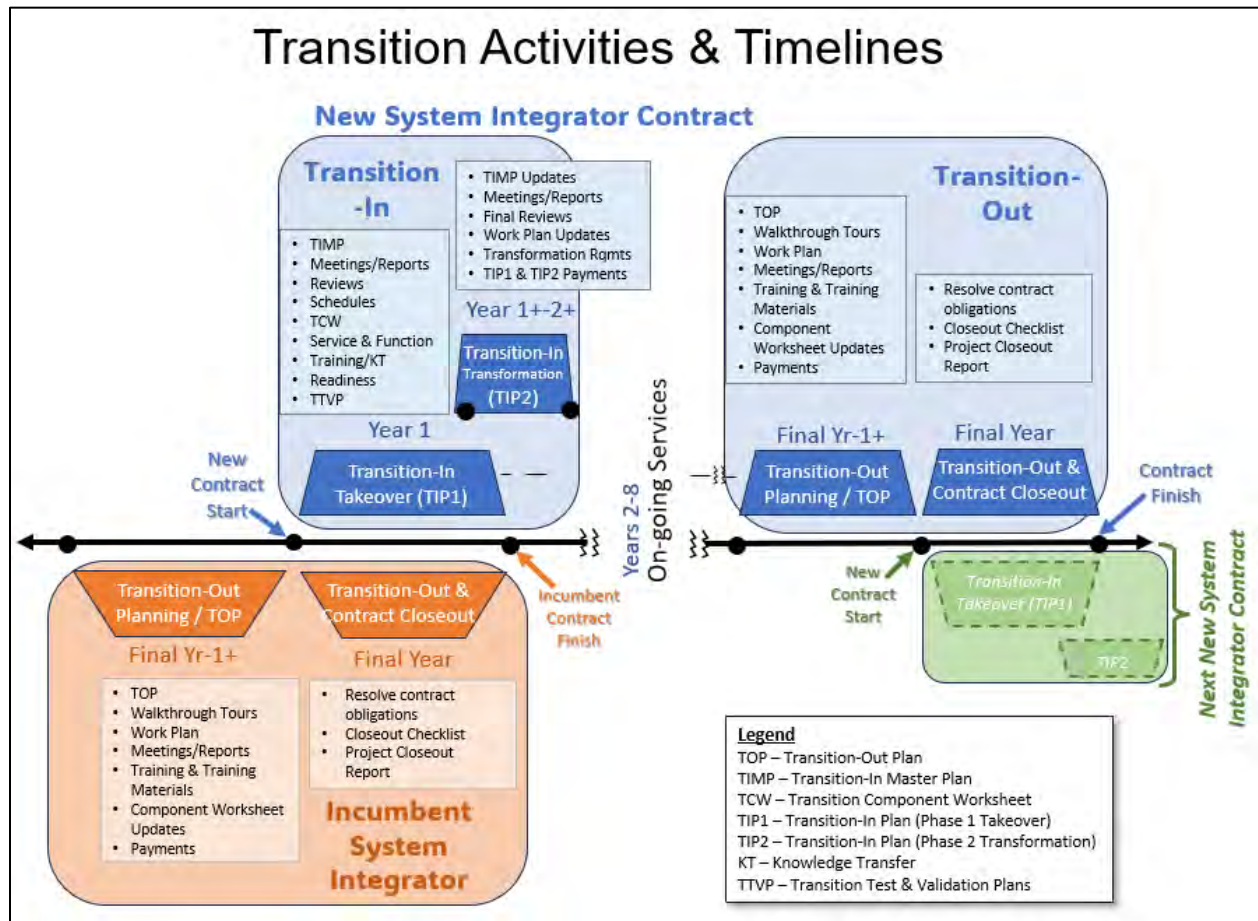
4.6.9 Service Center Services

The Bidder needs to bring a team with extensive Service Center Services experience to the project that can both continue to provide the day-to-day maintenance, support, and operational stability of the Services and technology provided today. The Bidder will provide development and support related to the Service Center applications, currently Amazon Connect and Verint, assessing and providing improvements and enhancements to these services.

4.7 TRANSITION

Transition will take place from the current contract to the new contract, and possibly between the incumbent Contractor and a new Contractor. Therefore, transition is articulated into the three critical areas needed to ensure a timely and successful changeover takes place upon Contract Award/Execution. The three areas are: Transition-In (Takeover), Transition-In (Transformation), and Transition-Out.

Figure 4-3: Transition Phases



4.7.1 Transition-In Phase 1 (TIP1) - Takeover

Transition-In (Takeover) is the period of time starting at contract execution with the winning bidder, through assumption of operation of CalHEERS. If the winning bidder is also the incumbent contractor, the Transition-In (Takeover) effort may be minimized or not be applicable. SOW Appendix A-4, SOW SECTION 7.1, TRANSITION-IN PHASE 1 (TIP1) TAKEOVER of this RFP covers this body of work in detail.

NOTE: Refer to the Bidder Library for Transition-In artifacts to guide Bidders in preparation for their proposal response.

4.7.1.1 A Timely Transition-In

Transition between the start of the new contract (referred to as transition-in) and the closeout of the existing contract (referred to as transition-out) will occur concurrently with the normal operation of the CalHEERS system. Under the contract that results from this procurement, the transition period (overlaps between the two contracts) is set for up to one (1) year. It is vital that this complex and risky first part of transition be completed without disrupting the stability of normal business operations and CalHEERS system availability. If the winning bidder is also the incumbent contractor, the Transition-In period will be minimal or may not be applicable.

4.7.1.2 Minimizing and Mitigating Risk in Transition-In

The State understands there is risk associated with “contractor” transition-in and “contract” transition-in; and values a partner that can minimize risk throughout the transition-in period. It is imperative that bidders articulate how they will identify, minimize, manage, and mitigate risks during the transition-in period.

4.7.1.3 Collaboration, Transparency, and Leadership During Transition-In

Transition-In of the CalHEERS contract (and potentially the bidder) will require a great deal of collaboration and leadership to ensure it is successful. The State seeks a bidder who will be able to balance the needs of the CalHEERS Project, the sponsors, and other bidder resources to lead and navigate the transition-in to success. It is highly important that bidders articulate how they will work with the incumbent contractor to ensure a smooth transition. If the winning bidder is also the incumbent contractor, the Transition-In period will be minimal or may not be applicable.

4.7.2 Transition-In Phase 2 (TIP2) - Transformation

The Transition-In (Transformation) period will begin concurrently with the Transition-In (Takeover) phase. The timeframes for TIP2 will be planned collaboratively with the State and documented via updates to the Transition-In Master Plan (TIMP). Contract Transformation will incrementally roll out changes between the old and new contract into the CalHEERS culture. The Contract Transformation body of work is spelled out in the new contract, Appendix A-4, SOW SECTION 7.2, TRANSITION-IN PHASE 2 (TIP2) TRANSFORMATION.

4.7.3 Transition-Out

4.7.3.1 Transition-Out of the Winning Bidder

Under this RFP, the Transition-Out period occurs at the tail end of the current Contract. This work is described in the new contract Appendix A-4, SOW SECTION 7.3, TRANSITION-OUT. This body of work requires the winning bidder to collaborate with the State and winning bidder to transition-out the system and management infrastructure to the winning bidder of any follow-on contract that may exist at contract term end.

4.7.3.2 Transition-Out for the Deloitte Contract

Under the current Deloitte contract Appendix A-4 SOW SECTION 7.3, [TRANSITION-OUT Deloitte](#) also has transition-out expectations which spell out detailed expectations. This body of work requires that Deloitte collaborate with the State and winning bidder to transition-out the system and management infrastructure to the winning bidder. Refer to the Bidders Library for this information. If the winning bidder is also the incumbent contractor, the Transition-out period will be minimal or may not be applicable.

Section 5

Administrative Requirements

SECTION 5 – ADMINISTRATIVE REQUIREMENTS

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5 ADMINISTRATIVE REQUIREMENTS

5.1 INTRODUCTION

Section 5, ADMINISTRATIVE REQUIREMENTS must be met to be considered responsive to the Request for Proposal (RFP), Office of Technology & Solutions Integration (OTSI) California Healthcare Eligibility, Enrollment, and Retention System (CalHEERS), System Development, Maintenance and Operations (SDMO) RFP 73040873. Bidders will provide their responses within the corresponding forms located in Appendix B, FORMS. The highest scored, responsive and responsible bidder, as a result of this solicitation, will become the new CalHEERS SDMO Contractor.

- Mandatory Administrative Requirements listed are denoted as (M) and are scored on a pass/fail basis.
- Optional Administrative Requirements are denoted as (O) and are not required to be offered by the bidder to be compliant with the solicitation requirements. Bidders may choose whether to meet Optional Administrative Requirements, such as those relating to preference points. However, if a bidder offers any of these optional requirements, the bidder must meet the minimum requirements as stated. The State's Evaluation Team will review responses to optional requirements and apply points, if applicable, per the criteria stated in RFP Section 9, EVALUATION.
- A "Fail" may result in a proposal being deemed nonresponsive and, therefore, may be disqualified.
- Failure to provide a response to each mandatory requirement, where indicated, may result in disqualification.

Bidders must indicate their willingness and ability to satisfy mandatory requirements by marking "Yes" in the "Bidder Agrees Yes/No" column on the Appendix B-6, RESPONSE TO ADMINISTRATIVE REQUIREMENTS FORM. Answering "No" to any of the mandatory administrative requirements in the bidder's proposal may result in the proposal being deemed [nonresponsive and](#) therefore disqualified.

5.2 CONFIDENTIALITY (M)

To preserve the integrity of the security and confidentiality measures integrated into the State's automated information systems, each bidder is required to sign the Confidentiality Statement attached as Appendix B-4, CONFIDENTIALITY STATEMENT FORM, and submit it by the date specified in RFP Section 1.4, KEY ACTION DATES AND TIMES.

Similarly, any Bidder providing in IT services to the State, requiring them to come into contact with confidential State information, will be required to exercise security precautions for such data that is made available, including the signing of an additional confidentiality statement. Appropriate language must be in the contract.

Table 5-1: Confidentiality Requirements

Admin Req #	Requirement
A1	The bidder shall complete and submit, via email, Appendix B-4, CONFIDENTIALITY STATEMENT FORM, and Appendix B-3, INTENT TO BID FORM, for the Bidder's firm. The forms must be submitted by the time and date specified within RFP Section 1.4, KEY ACTION DATES AND TIMES.

Admin Req #	Requirement
A2	The bidder shall, upon Contract execution, submit a signed CONFIDENTIALITY STATEMENT FORM from all employees and Subcontractor Staff assigned to the awarded Contract.

5.3 PRODUCTIVE USE REQUIREMENTS

The objective of the Productive Use Requirements is to protect the State from being an experimentalist for new equipment and software that has no record of proven performance.

5.3.1 Customer In-Use (M)

The purpose of the Customer In-Use requirement is to allow time for the Bidder to correct defects that could prevent new equipment and software from performing correctly in support of State programs.

The State requires that each equipment and software component proposed as part of an automated system must have been installed and in productive use, in substantially the configuration proposed, for a paying customer external to the bidder's organization, for at least the number of months shown in the tables below prior to the required date of installation.

Table 5-2: Critical Software Requirement

Product/Project Cost	Installation	Final Proposal Submission
Category 1 - Critical Software Critical software is software that is required to control the overall operation of a computer system or peripheral equipment. Included in this category are operating systems, data base management systems, language interpreters, assemblers and compilers, communications software, and other essential system software.		
(1) More than \$100,000	8 months	6 months
(2) \$10,000 up to \$100,000	4 months	3 months
(3) Less than \$10,000	1 month	1 month

Table 5-3: All Information Technology Equipment and Noncritical Software

Product/Project Cost	Installation	Final Proposal Submission
Category 2 – All Information Technology Equipment and Noncritical Software (Information technology equipment is defined in SAM Section 4819.2)		
(1) More than \$100,000	6 months	4 months
(2) \$10,000 up to \$100,000	4 months	3 months
(3) Less than \$10,000	1 month	1 month

Substantial design changed in required system control modules, or in components critical to the processing requirements of the State's workload are also subject to the In-Use requirement. Increases or decreases in numbers of components or minor alteration in equipment or minor modifications or updates to software to provide improvements or features, to correct errors, or to accommodate hardware changes may be exempt from the In-Use requirement by the State, if no substantial changes in logic, architecture or design are involved.

Table 5-4: All Information Technology Equipment and Noncritical Software

Admin Req #	Requirement
A3	The Bidder shall identify their compliance with the Productive Use Requirement by providing their response within Appendix B-6, RESPONSE TO ADMINISTRATIVE REQUIREMENTS FORM in its proposal.

5.3.2 Reliability Data (Not Applicable)

The State will not be utilizing the Reliability Data Requirements step for the CalHEERS SDMO Services procurement.

The purpose of the Reliability Data requirement is to allow the State, in critical applications, to determine actual performance of proposed equipment prior to its being considered for installation.

Data must be submitted which indicates the performance of each type of equipment proposed by the bidder and attests that the equipment is currently on the premises of three (3) different paying customers, none of which is owned by the bidder or owns the bidder. The data must include, but is not limited to:

1. Equipment Availability:

Equipment availability data must be based on at least ____ hours of use within a six-month period. To qualify, each of the availability figures must equal or exceed ____ percent. Availability is calculated as follows:

$$\text{Percent Availability} = \frac{\text{UT}}{\text{UT} + \text{DT}} \times 100$$

UT (Up Time) is defined as the time the machine is available to and staffed by the customer for productive work (e.g., the time the machine is processing customer programs or awaiting the processing of such programs, but excluding Preventive Maintenance and Down Time).

DT (Down Time) is defined as the time the machine could have been processing customer programs but is being repaired or is awaiting repairs, or is awaiting changes to its control program(s) (excluding any time the supplier must wait for the machine to be released by the customer for repair).

2. Mean Time Between Failure (MTBF):

These figures refer to the average time between the beginning of one failure to the beginning of the next failure for each machine installed at customer sites. To qualify, each figure must not be less than ____ hours for electronic equipment and ____ hours for mechanical or electromechanical equipment during the same period specified in (a.) above. MTBF is calculated by dividing UT by the total number of failures for that item of equipment.

3. Mean Time to Repair (MTTR):

Each figure must be for the same period specified in (a.) above and not exceed ____ hours. MTTR is calculated by dividing the total down time (DT) due to equipment failure by the total number of failures for each item of equipment. Note that equipment failure is any failure due to machine error or failure of the operating software. (See definitions in the contract).

5.3.3 Customer Reference (M, If Applicable)

The bidder must provide a list of customers who presently have the proposed Equipment installed and operating. Include at least one (1) customer meeting that requirement. However, at least one customer reference must be included for each type of machine and feature proposal that is subject to the requirements of that subsection (e.g., one customer having the specific Central Processing Unit).

The State has the option to request from the bidder supporting evidence of compliance to the Customer In-Use requirements. Supporting evidence could include, but is not necessarily limited to, one or more of the following:

- Customer Purchase Order or Contract showing installation dates for subject equipment or software.
- Acceptance Document containing verification of installation by a paying customer.
- Customer Invoice for subject equipment or software.
- Shipping Invoice or Bill of Lading.
- Dated Maintenance Records.
- Sworn Notarized Statement from an officer of the bidding firm and/or a paying customer.
- State visit to the site of a paying customer.

Table 5-5: Customer Reference Requirement

Admin Req #	Requirement
A4	The bidder shall identify their compliance with the Productive Use Requirement by providing their response within Appendix B-6, RESPONSE TO ADMINISTRATIVE REQUIREMENTS FORM in its Proposal.

5.3.4 Exceptions

The State may consider exceptions to the Productive Use Requirements for this procurement.

5.4 BIDDER RESPONSIBILITY

Prior to award of the Contract, the State must be assured that the bidder selected has all of the resources to successfully perform under the Contract. This includes, but is not limited to:

- Number of personnel with the skills required.
- Equipment of appropriate type and in sufficient quantity.
- Financial resources sufficient to complete performance under the Contract.
- Experience in similar endeavors.

If, during the evaluation process, the State is unable to assure itself of the bidder's ability to perform under the Contract, if awarded, the State has the option of requesting from the bidder any information that the State deems necessary to determine the bidder's responsibility. If such information is required, the bidder will be so notified and will be permitted five (5) State business days to submit the information requested. Examples of the type of financial responsibility information requested may include annual reports and current audited balance sheets from the bidder's firm.

5.4.1 Workers' Compensation Insurance Requirements (M)

The bidder must maintain statutory Workers' Compensation for all of its employees who will be engaged in the performance of the Contract, as described in Appendix A-4, STATEMENT OF WORK (SOW) Section 2.5.5.3, WORKERS' COMPENSATION INSURANCE.

Table 5-6: Workers' Compensation Insurance Requirement

Admin Req #	Requirement
A5	The bidder shall complete and submit Appendix B-7, WORKERS' COMPENSATION CERTIFICATION FORM, in its proposal, upon contract execution, and each time it is renewed, or at any time the State may so request.

5.4.2 Commercial General Liability Insurance (M)

The bidder must maintain Commercial General Liability Insurance with limits of not less than \$1,000,000 per occurrence and \$2,000,000 aggregate for bodily injury property damage combined. The policy shall include coverage for liabilities arising out of premises, operations, independent contractors, products, completed operations, personal and advertising injury and liabilities assumed under this Contract. The insurance shall apply separately for each insured against whom claim is made or suit is brought subject to the Bidder's limit of liability.

Table 5-7: Commercial General Liability Insurance Requirement

Admin Req #	Requirement
A6	The bidder and each of its Subcontractors shall maintain Commercial General Liability Insurance with limits of not less than \$1,000,000 per occurrence and \$2,000,000 aggregate for bodily injury and property damage combined and agree to furnish the State a certificate of insurance in its proposal and at any time upon request by the State during the term of the Contract.
A7	The bidder shall identify their compliance with the Commercial General Liability Insurance, Motor Vehicle Liability Insurance, and Professional Liability Insurance and Fidelity Bond by providing their response within Appendix B-6, RESPONSE TO ADMINISTRATIVE REQUIREMENTS FORM, in its proposal.

5.4.3 Technology Professional Liability/Errors and Omissions (M)

The Bidder shall maintain appropriate coverage to the Bidder's profession and work hereunder, on a claims-made form covering any damages caused by a negligent error, act, or omission with a limit of not less than \$5,000,000. Coverage shall be sufficiently broad to respond to the duties and obligations as is undertaken by the Bidder in this Agreement and shall include, but not be limited to, claims involving infringement of intellectual property, copyright, trademark, invasion of privacy violations, information theft, intentional and/or unintentional release of private information, extortion, and network security.

Table 5-8: Technology Professional Liability/Errors and Omissions Requirement

Admin Req #	Requirement
A8	The bidder and each of its Subcontractors shall maintain Technology Professional Liability/Errors and Omissions coverage with a limit of not less than \$5,000,000 and agree to furnish the State a certificate of insurance in its proposal and at any time upon request by the State during the term of the Contract.
A9	The bidder shall identify their compliance with the Technology Professional Liability/Errors and Omissions by providing their response within Appendix B-6, RESPONSE TO ADMINISTRATIVE REQUIREMENTS FORM, in its proposal.

5.4.4 Cyber Liability Insurance (M)

Bidder shall maintain Cyber Liability insurance with limits of not less than \$4,000,000 for each occurrence and an annual aggregate of \$8,000,000 covering claims involving privacy violations, information theft, damage or destruction of electronic information, intentional and/or unintentional release of State and or private information, alteration of electronic information, extortion and network security. The policy must name The State of California, its officers, agents, and employees as additional insured with respect to work performed under the contract. Claims involving privacy violations, information theft, damage or destruction of electronic information, intentional and/or unintentional release of State and or private information, alteration of electronic information, extortion and network security. The policy must name The State of California, its officers, agents, and employees as additional insured with respect to work performed under the contract.

Table 5-9: Cyber Liability Requirement

Admin Req #	Requirement
A10	The bidder and each of its Subcontractors shall maintain Cyber liability coverage with a limit of not less than \$8,000,000 and agree to furnish the State a certificate of insurance in its proposal and at any time upon request by the State during the term of the Contract.
A11	The bidder shall identify their compliance with the Cyber liability by providing their response within Appendix B-6, RESPONSE TO ADMINISTRATIVE REQUIREMENTS FORM, in its proposal.

5.4.5 Bonds and Other Security Documents (M, If Applicable)

ALL BIDDERS MUST SUBMIT APPLICABLE ITEMS AS DESCRIBED BELOW WITH ITS PROPOSAL RESPONSE. FINAL PROPOSAL RESPONSES SUBMITTED WITHOUT ONE OF THE FOLLOWING SHALL BE CONSIDERED NONRESPONSIVE AND THE PROPOSAL SHALL BE REJECTED. FOR THIS REQUIREMENT, THE LENGTH OF TIME FOR EACH SURETY CONSIDERATION SHALL BE FOR A PERIOD OF FIVE (5) YEARS WITH THE OPTION FOR THE STATE TO EXTEND FOR FIVE (5) ADDITIONAL PERIODS OF ONE (1) YEAR.

5.4.5.1 Letter of Bondability – Applicable

The Letter of Bondability shall be from an admitted surety insurer which states the surety unconditionally offers to guarantee to the extent of thirty percent (30%) of the bidder's proposed base Contract price, in addition to fifty percent (50%) of the Transition-In Contract Award amount to ensure the bidder's performance in all respects of, and subject to, the terms and conditions and provisions of the Contract for this phase of the Contract, and that within 21 calendar days after the effective start date of the contract, the surety will execute the Performance Bond requirement.

5.4.5.2 Letter of Certificate of Deposit – Nonapplicable

The Letter, guaranteeing issuance of a Certificate of Deposit shall be from a bank doing business in this State, and shall be insured by the Federal Deposit Insurance Corporation and shall state that if the bidder is successful, a Certificate of Deposit in the amount of {fifty percent (50%) of the contract price for service contracts, or twenty-five percent (25%) for all other

contracting as identified in the RFP, or specify \$\$\$\$ amount here} will be furnished to the State within 21 calendar days after the effective start date of the contract.

5.4.5.3 Letter of Irrevocable Letter of Credit – Nonapplicable

The Letter, guaranteeing issuance of an Irrevocable Letter of Credit shall be from a bank doing business in this State, and shall be insured by the Federal Deposit Insurance Corporation and shall state that if the bidder is successful, an Irrevocable Letter of Credit, as appropriate, in the amount of ***{fifty percent (50%) of the contract price for service contracts, or twenty-five percent (25%) for all other contracting as identified in the RFP, or specify \$\$\$\$ amount here}*** will be furnished to the State within 21 calendar days after the effective start date of the contract.

5.4.5.4 Bidders Bond – Nonapplicable

A Bidders Bond executed by an admitted surety insurer, made payable to the Office of Technology and Solutions Integration, (or specify delegated department name) State of California, guaranteeing the bidder's performance in all respects of the terms, conditions, and provisions of the contract commencing on the effective start date. The security shall be in an amount ***of {fifty percent (50%) of the contract price for service contracts, or twenty-five percent (25%) for all other contracting as identified in the RFP, or specify \$\$\$\$ amount here}***.

5.4.5.5 Certificate of Deposit – Nonapplicable

The bidder shall furnish to the Deputy Director of the Department of General Services Procurement Division, (or specify delegated department name) at no cost to the State, a Certificate of Deposit. The Certificate of Deposit shall be a Security Deposit Time Certificate of Deposit from a bank insured by the Federal Deposit Insurance Corporation, in the amount of ***{fifty percent (50%) of the contract price for service contracts, or twenty-five percent (25%) for all other contracting as identified in the RFP, or specify \$\$\$\$ amount here}***, made payable to the Department of General Services. The Certificate of Deposit shall be automatically renewable during the contract period and remain in effect until Bidder's satisfactory compliance with the terms of the contract have been completed.

5.4.5.6 Irrevocable Letter of Credit – Nonapplicable

The bidder shall furnish to the Deputy Director of the Department of General Services Procurement Division, (or specify delegated department name) at no cost to the State, an Irrevocable Letter of Credit in the amount of ***{specify {fifty percent (50%) of the contract price for service contracts, or twenty-five percent (25%) for all other contracting as identified in the RFP, or specify \$\$\$\$ amount here}***. The Letter of Credit must be insured by a bank doing business in this State and insured by the Federal Deposit Insurance Corporation. The Department of General Services, State of California, (or specify delegated department name) shall be identified as the beneficiary.

The Letter of Credit shall further provide for honor of a draft or demand for payment presented with the State's written statement (signed by the Deputy Director of the Department of General Services Procurement Division certifying that there has been loss, damage or liability resulting from the Bidder's performance or nonperformance of duties and obligations under the contract, or from the negligence or act of omission by the Bidder or its agents, servants, and employees, and that the amount of the demand or draft is, therefore, now due and payable.

Because the security represented by the Letter of Credit must remain in effect until the Bidder's

satisfactory completion of the contract requirements, the Bidder, by offering the Letter of Credit, agrees to amend, if necessary, the Letter of Credit for the purpose of extending the expiration date.

Note: Within 21 calendar days after notification of Contract execution (unless submitted with the proposal), the successful bidder(s) MUST submit the instrument satisfying the bond requirement in the form of a Bidders Bond, Certificate of Deposit, Irrevocable Letter of Credit, or Performance Bond. Failure to submit the required document within 21 calendar days may be cause for termination of the contract.

Because of the potential consequences which might result if the successful Bidder is unable to furnish any of the specified documents, bidders should take the necessary steps, prior to submittal of their proposals, to ensure that if awarded the contract (purchase order), they will be able to comply with these requirements.

5.4.6 Performance Bonds for Contract and Transition-In (M)

Per Section 12112 of the California Public Contract Code, the State shall require a performance bond for certain services being remunerated with the use of progress payments:

Contract: The awarded Bidder shall supply a performance bond in the amount of thirty percent (30%) of the bidder's proposed base Contract price. The bond shall be on a form from an admitted surety insurer and must guarantee Bidder's compliance with the terms of this Contract.

Transition-In: The awarded Bidder shall supply a performance bond in the amount of fifty percent (50%) of the Transition-In Contract execution amount to ensure the Bidder's performance in all respects of, and subject to, the terms and conditions and provisions of the Contract, for this phase of the Contract. For example, a bond amount of \$1 million shall be procured for a Transition-In phase valued at US \$2 million.

The bonds shall be delivered to the State within 21 calendar days of Contract execution. In completion of Transition-In, the bond will be returned to the Bidder upon successful completion. Failure to submit the required documents within 21 calendar days may be cause for termination of the Contract. The bond will not be returned upon cancellation due to nonperformance.

Table 5-10: Performance Bond Requirement

Admin Req #	Requirement
A12	The bidder shall complete their compliance with the Performance Bond requirement by providing their response with Appendix B-6, RESPONSE TO ADMINISTRATIVE REQUIREMENTS FORM, by submitting the required Letter of Bondability in its proposal.

5.5 INSTALLATION

5.5.1 Certification of Facility Readiness (Not Applicable)

The State will not be utilizing the Certification of Facilities of Readiness step for the CalHEERS SDMO Services procurement.

5.5.2 Equipment (M)

All Equipment offered must be new and the latest model in current production. Used, shopworn, refurbished, demonstrator, prototype, or discontinued models are not acceptable.

Table 5-11: Equipment Requirement

Admin Req #	Requirement
A13	The bidder shall identify their compliance with the Equipment requirement by providing their response within Appendix B-6, RESPONSE TO ADMINISTRATIVE REQUIREMENTS FORM in its proposal.

5.5.3 Certification of Equipment Readiness (M)

Any Equipment proposal must be installed and certified ready for acceptance testing as provided in Appendix A-4, SOW. Such certification must be in writing and presented to the individual specified in the Contract.

Table 5-12: Certification of Readiness Requirement

Admin Req #	Requirement
A14	The bidder shall identify their compliance with the Certification of Readiness requirement by providing their response within Appendix B-6, RESPONSE TO ADMINISTRATIVE REQUIREMENTS FORM in its proposal.

5.5.4 Interface to Existing Equipment (M)

If any proposal equipment must interface to existing installed equipment in order to meet the specifications contained in Appendix A-4, SOW, the bidder must agree to be responsible for making any necessary arrangements with the owner(s) of such installed equipment, for such interface. The Contract must then provide for such responsibility.

Table 5-13: Conditions to Existing Equipment Requirement

Admin Req #	Requirement
A15	The bidder shall identify their compliance with the Interface to Existing Equipment requirement by providing their response within Appendix B-6, RESPONSE TO ADMINISTRATIVE REQUIREMENTS FORM in its proposal.

5.6 CONDITIONS TO BE EXAMINED (NOT APPLICABLE)

The State will not be utilizing the Conditions to be Examined step for the CalHEERS SDMO procurement.

Visits to the physical installation site or to appropriate persons within the department may be made in accordance with RFP Section 2, RULES FOR GOVERNING COMPETITION, for the purpose of familiarization with the current system(s), environment, applications, etc. Conditions appropriate for examination include, but are not limited to any of the following:

5.7 SPECIAL SPECIFIC MAINTENANCE REQUIREMENTS (NOT APPLICABLE)

The State will not be utilizing the Special Specific Maintenance Requirements step for the CalHEERS SDMO procurement.

5.8 DISABLED VETERAN BUSINESS ENTERPRISE (DVBE) PARTICIPATION (M)

5.8.1 California DVBE Program Requirement (M)

The State has established goals for DVBE participation in State contracts. For this procurement the participation goal is three percent (3%) of the total CalHEERS SDMO Contract price. The bidder must meet or exceed the DVBE goal of three percent (3%).

PLEASE READ THIS REQUIREMENT CAREFULLY. FAILURE TO COMPLY WITH THE DVBE REQUIREMENT MAY CAUSE YOUR PROPOSAL RESPONSE TO BE DEEMED NONRESPONSIVE AND YOUR FIRM INELIGIBLE FOR AWARD OF THE PROPOSED CONTRACT(S).

Table 5-14: California DVBE Program Requirements

Admin Req #	Requirement
A16	The bidder shall complete and submit Appendix B-8, GSPD-05-105 BIDDER DECLARATION FORM, in its proposal The form and its complete instructions may be accessed at: https://www.documents.dgs.ca.gov/dgs/fmc/gspd/gspd05-105.pdf

5.8.2 DVBE Incentive (M)

In accordance with Section 999.5(a) of the California Military and Veterans Code (MVC), an incentive will be given to bidders who meets or exceeds the three percent (3%) DVBE mandatory participation. The State shall apply the incentive amount based on the amount of DVBE participation obtained above the three percent (3%) requirement. The incentive is only given to those bidders who are responsive to the DVBE Program Requirement and propose DVBE participation in the resulting Contract that meets or exceeds the mandatory three percent (3%) requirement.

Participation incentives will be awarded based on the table that follows: and is further described in and examples in RFP Section 9, EVALUATION.

Table 5-15: DVBE Incentive Point Scale Requirement

DVBE Incentive Point Scale	
Confirmed DVBE Participation	DVBE Incentive Points
5% or more	150 (3% of 5,000 points)
4% - 4.99%	100 (2% of 5,000 points)
3% - to 3.99%	50 (1% of 5,000 points)
Less than 3%	0 points

Table 5-16: DVBE Incentive Requirement

Admin Req #	Requirement
A17	If the bidder is claiming a DVBE incentive, the bidder shall complete and submit Appendix B-10, BIDDING PREFERENCES AND INCENTIVES FORM and Appendix B-8, GSPD-05-105 BIDDERS DECLARATION FORM in its proposal.

5.8.3 DVBE Declarations (M)

Bidders who have been certified by California as a DVBE (or bidders who are not certified but

are bidding rental equipment and have obtained the participation of Subcontractors certified by California as a DVBE) must complete the form Std. 843, Disabled Veteran Business Enterprise Declaration. An online version of the form is available at the Department of General Services, Procurement Division, Office of Small Business and DVBE Services (OSDS) website at: <https://www.dgs.ca.gov/PD-OSDS>. All disabled veteran owners and disabled veteran managers of the DVBE(s) must sign the form(s). The completed form(s) should be submitted with your proposal. Failure to provide the form within the time frame specified by the State may cause your bid to be rejected.

Table 5-17: STD 843 Disabled Veteran Business Declarations Requirement

Admin Req #	Requirement
A18	The bidder shall complete and submit Appendix B-9, STD 843 DISABLED VETERAN BUSINESS ENTERPRISE DECLARATIONS FORM in its proposal. https://www.documents.dgs.ca.gov/dgs/fmc/gs/pd/pd_843.pdf

5.9 DEVELOPMENT/CONVERSION (NOT APPLICABLE)

The State will not be utilizing the Development/Conversion step for the CalHEERS SDMO procurement.

5.10 CONTRACTOR'S LICENSE (NOT APPLICABLE)

The State will not be utilizing the Contractor's License for the CalHEERS SDMO procurement.

Bidders and Subcontractors performing cable and/or wiring installation work or structural modifications for the State are required to have the appropriate State Contractor's License. **THE COMPANY SUBMITTING THE BID MUST HAVE THE APPROPRIATE LICENSE AS WELL AS ANY SUBCONTRACTORS.** The License must be in the name of the company or the name of the "qualifying individual" of the company.

The bidder certifies under penalty of perjury, the accuracy of the representations made with regard to the Contractor's license number, class, and expiration date.

The Bidder shall pay the rate of wages for regular, overtime, and holiday work plus employer payments for benefits generally prevailing in the locality in which the work is performed, for all crafts, classifications or types of workmen used on State premises at the point of delivery by the Bidder for the assembly and installation of material purchased under this Contract.

A proposal that does not contain the above information, or if the information is later proven false, shall be considered nonresponsive and rejected by the State.

5.11 PUBLIC WORKS REQUIREMENTS (INSTALLATION ONLY) (NOT APPLICABLE)

The State will not be utilizing the Public Works Requirements (Applicable to Installation Only) step for the CalHEERS SDMO procurement.

1. In accordance with the provisions of Section 1773 of the California Labor Code, the Bidder shall conform and stipulates to the general prevailing rate of wages, including employer benefits as defined in Section 1773.1 of the California Labor Code, applicable to the classes of labor to be used for public works such as at the delivery site for the assembly and installation of the equipment of materials purchased under the Contract.

Pursuant to Section 1770 of the California Labor Code, the Department of Industrial

Relations has ascertained the general prevailing rate of wages in the county in which the work is to be done, to be as listed in the Department of Transportation booklet entitled General Prevailing Wage Rates. The booklet is required to be posted at the job site. Contact the Department of Industrial Relations, Prevailing Wage Unit at (415) 972-8628.

2. Prior to the commencement of performance, the Bidder must obtain and provide to the State, a payment bond, on California STD 807 Form when the Contract involves a public works expenditure (labor/installation costs) in excess of \$5,000.00. Such bond shall be in a sum not less than one-half the Contract price for the public works portion of the labor/installation costs. Forms will be made available to the Bidder.
3. Each participating bidder shall submit with their proposal a list of proposed Subcontractors or indicate that none are to be used. The State reserves the right to approve or object to the use of proposed Subcontractors on the list.
4. Each participating bidder must certify that it is aware of the provisions of Section 3700 of the California Labor Code which requires every employer to be insured against liability for workers' compensation or to undertake self-insurance in accordance with the provisions of that [Code and](#) will comply with such provisions before commencing with the performance of work of this Contract. A Workers' Compensation Certification must be completed and submitted with an original signature with the bidder's proposal.
5. Laws to be observed:

a) Labor

Pursuant to Section 1775 of the California Labor Code, the Bidder shall, as a penalty to the State or political subdivision on whose behalf the Contract is made or awarded, forfeit not more than fifty dollars (\$50) for each calendar day, or portion thereof, for each worker paid by the Bidder, or its Subcontractor, less than the prevailing wage so stipulated; and in addition, the Bidder further agrees to pay to each worker the difference between the actual amount paid for each calendar day, or portion thereof, and the stipulated prevailing wage rate for the same. This provision shall not apply to properly registered apprentices.

Pursuant to Sections 1810-1815 of the California Labor Code, inclusive, it is further agreed that the maximum hours a worker is to be employed is limited to eight hours a day and forty hours a week and the Bidder shall forfeit, as a penalty to the State, twenty-five dollars (\$25) for each worker employed in the execution of the Contract for each calendar day during which a worker is required or permitted to labor more than eight hours in any calendar day or more than forty hours in any calendar week, in violation of Sections 1810-1815 of the California Labor Code, inclusive.

b) Travel and Subsistence Payments

The Bidder shall pay the travel and subsistence of each worker needed to execute the work, as such travel and subsistence payments are defined in the applicable collective bargaining agreements filed in accordance with California Labor Code Section 1773.8.

c) Apprentices

Special attention is directed to Sections 1777.5, 1777.6, and 1777.7 of the California Labor Code and Title 8, California Code of Regulations Section 200 et seq. Each Bidder and/or Subcontractor must, prior to commencement of the public works contract, contact the Division of Apprenticeship Standards, 525 Golden Gate Avenue, San Francisco, CA, or one of its branch offices to insure compliance and complete understanding of the law regarding apprentices and specifically the required rationale thereunder. Responsibility for compliance with this Section lies with the Bidder.

d) Payroll

The Bidder shall keep an accurate payroll record showing the name, address, Social Security Account Number, work classification and straight time and overtime hours worked by each employee. A certified copy of the employee's payroll record shall be made available for inspection as specified in Section 1776 of the California Labor Code.

5.12 TARGET AREA CONTRACT PREFERENCE ACT (TACPA) (NOT APPLICABLE)

Preference will be granted to California-based Bidders in accordance with Government Code Section 4530 whenever contracts for goods and services are in excess of \$100,000 and the Bidder meets certain requirements as defined in the California Code (Title 2, Section 1896.30) regarding labor needed to produce the goods or provide the services being procured. Bidders desiring to claim Target Area Contract Preferences Act (TACPA) must complete California STD 830 Form and submit it with their proposal.

5.13 OTHER ADMINISTRATIVE REQUIREMENTS

5.13.1 Cover Letter and Executive Summary (M)

The Cover Letter and Executive Summary must be included in the bidder's proposal, and contain all of the elements listed in the following table, Cover Letter and Executive Summary Requirements.

Table 5-18: Cover Letter and Executive Summary Requirements

Admin Req #	Requirement
A19	The bidder shall submit a Cover Letter on the bidder's official business letterhead in its proposal.
A20	The bidder's Cover Letter shall include the legal name and address of the bidder's organization.
A21	The Bidder's Cover Letter shall include a statement that the bidder commits to fulfilling the requirements of the RFP.
A22	The Bidder's Cover Letter shall include a statement that the bidder's offer is good for 180 calendar days from the scheduled date to submit proposal or Best and Final Offer (BAFO).
A23	The bidder's Cover Letter shall include a statement indicating that the bidder has available Staff with the appropriate skills to complete the Contract for all services and provide all deliverables as described in this solicitation.
A24	The bidder's Cover Letter must <u>not</u> include any cost information.
A25	The bidder's Cover Letter shall have a statement identifying that the bidding firm has the financial stability to support the CalHEERS SDMO Contract.
A26	The bidder's Cover Letter shall include a statement that substantiates that the person who signs the letter is authorized to bind the bidding firm contractually. The individual's name must also be typed and include the title or position that the individual holds in the firm. A proposal with an unsigned Cover Letter may be rejected.
A27	The bidder's Cover Letter shall include the email and phone number of the person signing the letter and include the date it was signed.
A28	The bidder's Executive Summary shall condense and highlight the contents of the overall proposal in such a way as to provide a broad understanding of the entire proposal.
A29	The bidder's Executive Summary shall not exceed 20 single-sided pages or ten (10) double-sided pages, and in no smaller than Arial, <u>11-point</u> font.

5.13.2 Amendment (M)

Each contract executed as a result of this RFP must be able to be amended by mutual consent of the State and the Bidder.

Table 5-19: Amendment Requirement

Admin Req #	Requirement
A30	The bidder shall identify their compliance with the Amendment requirement by providing their response within Appendix B-6, RESPONSE TO ADMINISTRATIVE REQUIREMENTS FORM in its proposal.

5.13.3 Subcontractors (M)

Bidders must complete the Bidder's Declaration GSPD-05-105, listing all Subcontractors that will be used to provide the services required in this RFP. All proposed Subcontractors must be identified on the Appendix B-8, GSPD-05-105 BIDDER DECLARATION FORM. Nothing contained in the resulting contract shall create a relationship between the State and any Subcontractor, and no subcontracting shall relieve the bidder of its responsibilities and obligations. The CalHEERS SDMO Bidder is fully responsible to the State for the acts and omissions of its Subcontractors and of persons either directly or indirectly employed by them.

The CalHEERS SDMO Bidder shall not change Subcontractor(s) or Disabled Veteran Business Enterprise (DVBE) Subcontractor(s) if such changes conflict with the work to be performed under this Contract. For DVBE Subcontractor changes, the Bidder shall use another DVBE Subcontractor. The State recognizes that changes to Subcontractor(s) may be necessary and in the best interest of the State; however, advance notification of a contemplated change and the reasons for such change must be made to the State no less than seven (7) State business days prior to the existing Subcontractor's termination. If this should occur, the Bidder should be aware that the State contract administrator or designee must approve any changes to the Subcontractor(s) prior to the termination of the existing Subcontractor(s). This also includes any changes made between submittal of the proposal and actual start of the Contract.

An award, if made, will be awarded to a single Bidder. The selected Bidder will be responsible for the successful performance of all Subcontractors and support services offered in response to this solicitation. All State policies, guidelines, and requirements that apply to the Bidder also apply to Subcontractors, as applicable to the products and services they provide and to their role as a Subcontractor. Furthermore, the State will consider the Bidder to be the sole point of contact regarding contractual matters for the term of the resulting Contract. The bidder must not assign financial documents to a third-party without prior written approval by the State and an amendment to the resulting Contract.

The State will not compensate the CalHEERS SDMO Bidder for any of the CalHEERS SDMO Bidder's time or effort to educate or otherwise ensure the new Subcontractor(s) are ready to begin work on the Contract.

The bidder's obligation to pay its subcontracts is an independent obligation from the State's obligation to pay or to enforce the payment of any money to any Subcontractor. The Bidder is solely responsible for any payments to or claims made by Subcontractors.

Table 5-20: Subcontractors Requirement

Admin Req #	Requirement
A31	The bidder shall comply with the Subcontractors requirement by providing a completed Appendix B-8, GSPD-05-105 BIDDER DECLARATION FORM, with their response, in addition to identifying compliance within Appendix B-6, RESPONSE TO ADMINISTRATIVE REQUIREMENTS FORM in its proposal.

5.13.4 Commercially Useful Function (M)

Suppliers, whether the bidder or a Subcontractor, who have a California certification for one or more of the socio-economic programs (e.g., small business or DVBE), must perform a commercially useful function (CUF) in the resulting Contract. CUF is defined in the Military and Veterans Code Section 999(b)(5)(B) for DVBEs and in the Government Code Section 14837(d)(4)(A) for small business. Describe CUF compliance and complete Appendix B-11, COMMERCIALLY USEFUL FUNCTION (CUF) CERTIFICATION FORM.

At the State's option, bidders may be required to submit additional written clarifying information regarding CUF. Failure to submit the requested written information as specified may be grounds for proposal rejection.

Table 5-21: Commercially Useful Function Requirement

Admin Req #	Requirement
A32	The bidder shall complete and submit Appendix B-11, COMMERCIALLY USEFUL FUNCTION CERTIFICATION FORM, in its proposal.

5.13.5 Small Business Preference (O)

California Government Code Section 14835 et seq. requires that a five percent (5%) preference be given to bidders who qualify as a small business or bidders who qualify as a non-small business claiming at least twenty-five percent (25%) California-certified small business Subcontractor participation. The rules and regulations of this law, including the definition of a small business, or qualifying non-small business, are contained in Title 2, California Code of Regulations Section 1896 et seq. The definition of nonprofit veteran service agencies qualifying as a small business is contained in the California Military and Veterans Code Section 999.50 et seq.

Table 5-22: Small Business Preference Requirement

Admin Req #	Requirement
A33	If claiming the Small Business preference, the bidder shall complete and submit Appendix B-10, BIDDING PREFERENCES AND INCENTIVES FORM and Appendix B-8, GSPD-05-105 BIDDER DECLARATION FORM in its proposal.

5.13.6 Financial Stability (M)

To minimize the potential risk of default due to financial issues, the State reserves the right to request additional documentation during the RFP process and throughout the term of the awarded Contract.

Table 5-23: Financial Stability Requirement

Admin Req #	Requirement
A34	The bidder shall identify their compliance with the Financial Stability requirement by providing their response within Appendix B-6, RESPONSE TO ADMINISTRATIVE REQUIREMENTS FORM in its proposal.

5.13.7 Secretary of State Certification (M)

The bidder will submit a Certificate of Status from the California Secretary of State (SOS), showing the bidder is certified with the SOS to do business in the State of California. If the bidder does not currently have this certification, the firm must be certified before a Contract award can be made, and the bidder must provide information in its proposal to support the status of its application to be certified to do business in the State of California.

Domestic and Foreign Corporations, Limited Liability Companies, Limited Liability [Partnerships](#), and Limited Partnerships must be registered with the California SOS to be awarded the Contract. The SOS Certificate of Status must be included with the proposal. The required document(s) may be obtained through the SOS, Certification and Records Unit at (916) 657-5448 or through the following website: <http://sos.ca.gov/>.

Table 5-24: Secretary of State Certification Requirement

Admin Req #	Requirement
A35	The bidder shall include, within its proposal, a Certificate of Status (indicating the business is in good standing) from the California Secretary of State's Office. Information on how to obtain this form is provided in, Appendix B-12, SECRETARY OF STATE CERTIFICATION.

5.13.8 Seller's Permit (M)

This proposal is subject to all requirements set forth in Sections 6452, 6487, 7101 and 18510 of the California Revenue and Taxation Code, and Section 10295 of the California Public Contract Code, requiring bidders to provide a copy of their seller's permit or certification of registration, and, if applicable, the permit or certification of all participating affiliates issued by the California Department of Tax & Fee Administration (CDTFA). The seller's permit must be submitted within five (5) State business days of the State's request or at the time of proposal submission. For more information on seller's permit or certification of registration refer to the following link:

<https://cdtfa.ca.gov/formspubs/pub73.pdf>

Table 5-25: Seller's Permit Requirement

Admin Req #	Requirement
A36	The bidder shall include, within its proposal, a seller's permit or certification issued by the California Department of Tax & Fee Administration (CDTFA). Information on how to obtain this form is provided in, Appendix B-13, SELLER'S PERMIT.

5.13.9 Payee Data Record (M)

The successful bidder as a result of this RFP will be required to sign the Payee Data Record, California STD 204 Form. The Payee Data Record (STD 204) indicates the bidder is subject to

State income tax withholdings pursuant to the California Revenue and Taxation Code Section 18662. To obtain the Payee Data Record, California STD 204 Form and related instructions, please refer to the following link:

<http://www.documents.dgs.ca.gov/dgs/fmc/pdf/std204.pdf>

Table 5-26: Payee Data Record Requirement

Admin Req #	Requirement
A37	The bidder shall complete and submit Appendix B-14, PAYEE DATA RECORD FORM, in its proposal.

5.13.10 Iran Contracting Act of 2010 (M)

Division 2, Part 1, Chapter 2.7 of the California Public Contract Code (PCC) is the Iran Contracting Act of 2010 (Act). This Act requires at §2203 that no one shall submit a proposal for a contract, or enter into or renew a contract, with a public entity for goods or services valued at \$1,000,000 or more if that person (e.g., Bidder or Contractor) engages in investment activities of \$20,000,000 or more as described in PCC §2202.5 pursuant to all provisions of the Act. The Act, at §2204 requires bidders to certify at the time the proposal is submitted or the contract is renewed, that the person is not identified on a list created pursuant to subdivision (b) of PCC §2203 as a person engaging in investment activities in Iran described in subdivision (a) of PCC §2202.5, or as a person described in subdivision (b) of PCC §2202.5, as applicable.

Table 5-27: Iran Contracting Act of 2010 Requirement

Admin Req #	Requirement
A38	The bidder shall complete and submit Appendix B-15, IRAN CONTRACTING ACT OF 2010 FORM, in its proposal, and again each time their awarded Contract is renewed.

5.13.11 Federal Debarment (M)

Bidders are required to provide a Federal Debarment certification to the State. This certification is required by the Federal regulations implementing Executive Order 12549, Debarment and Suspension, 29 Code of Federal Regulations, Part 98, Section 98.510, [Participants](#), responsibilities. This certification states that neither the bidder nor its principals are presently debarred, suspended, proposed for debarment, declared ineligible, or voluntarily excluded from participation in this transaction by any federal department or agency. The regulations were published as Part VII of the May 26, [1988](#), Federal Register (pages 19160-19211).

Table 5-28: Federal Debarment Requirement

Admin Req #	Requirement
A39	The bidder shall complete and submit Appendix B-16, FEDERAL DEBARMENT, SUSPENSION, INELIGIBILITY AND VOLUNTARY EXCLUSION - CERTIFICATION FORM, in its proposal.

5.13.12 Tax Debtor List: Franchise Tax Board (FTB) and California Department of Tax & Fee Administration (CDTFA) (AB 1424) (M)

All bidders must address the requirements of the Tax Debtor List: California Franchise Tax

board (FTB) and California Department of Tax and Fee Administration (CDTFA) for the reason described in California Public Contract Code Section 10295.4. Companies are ineligible to enter [into or](#) renew any contract with the State for goods or services if the company appears on either list of the 500 largest tax delinquencies. Prior to submitting a proposal or prior to executing any State contract or renewal of goods or services, a company must certify that it is not on the list of ineligible companies prohibited from doing business with the State of California. The procurement official shall check the following website(s) to ensure bidders do not appear on the list of ineligible companies.

<https://www.ftb.ca.gov/help/business/entity-status-letter.asp>

<https://cdtfa.ca.gov/taxes-and-fees/top500.htm>

Table 5-29: Tax Debtor Lists: FTB and CDTFA Requirement

Admin Req #	Requirement
A40	The bidder shall identify their compliance with the Tax Debtor List: FTB and CDTFA requirement by providing their response within Appendix B-6, RESPONSE TO ADMINISTRATIVE REQUIREMENTS FORM, in its proposal.

5.13.13 California Civil Rights Law Certification (M)

Pursuant to California Public Contract Code Section 2010, if a bidder or proposer executes or renews a contract over \$100,000 on or after January 1, 2017, the bidder or proposer hereby certifies compliance with the following:

- CALIFORNIA CIVIL RIGHTS LAWS: For contracts over \$100,000 executed or renewed after January 1, 2017, the Contractor certifies compliance with the Unruh Civil Rights Act (Section 51 of the California Civil Code) and the Fair Employment and Housing Act (Section 12960 of the Government Code); and
- EMPLOYER DISCRIMINATORY POLICIES: For contracts over \$100,000 executed or renewed after January 1, 2017, if the Contractor has an internal policy against a sovereign nation or peoples recognized by the United States government, the Contractor certifies that such policies are not used in violation of the California Unruh Civil Rights Act (Section 51 of the California Civil Code) or the Fair Employment and Housing Act (Section 12960 of the California Government Code).

Table 5-30: California Civil Rights Law Certification Requirement

Admin Req #	Requirement
A41	The bidder shall complete and submit Appendix B-17, CALIFORNIA CIVIL RIGHTS LAW CERTIFICATION FORM, in its proposal.

5.13.14 Air or Water Pollution Violation (M)

Under the State laws, the Bidder shall not be: (1) in violation of any order or resolution not subject to review promulgated by the California State Air Resources Board or an air pollution control district; (2) subject to cease and desist order not subject to review issued pursuant to Section 13301 of the Water Code for violation of waste discharge requirements or discharge prohibitions; or (3) finally determined to be in violation of provisions of federal law relating to air or water pollution.

Table 5-31: Air or Water Pollution Violation Requirement

Admin Req #	Requirement
A42	The bidder shall identify their compliance with the Air or Water Pollution Violation requirement by providing their response within Appendix B-6, RESPONSE TO ADMINISTRATIVE REQUIREMENTS FORM, in its proposal.

5.13.15 AI Reporting and Risk Assessment Form (M)

The successful bidder, resulting from this RFP will be required to fill out and, sign and submit the CalHEERS Artificial Intelligence Risk Assessment form any time a proposed solution involves an AI component. The form enables the State to obtain critical information about the potential use of AI on CalHEERS. The CalHEERS Artificial Intelligence Risk Assessment form can be obtained from the Bidders' Library.

Table 5-32: AI Reporting and Risk Assessment Form Requirement

Admin Req #	Requirement
A43	The bidder shall complete and submit Appendix B-24, CALHEERS ARTIFICIAL INTELLIGENCE RISK ASSESSMENT FORM, in its proposal.

5.14 ADDITIONAL EQUIPMENT PURCHASES (M)

The State reserves the right, at its sole option, of ordering additional hardware and software as a result of this Contract for ten (10) years with the same ten (10) years of warranty and maintenance terms and conditions following Contract execution at the prices quoted or the manufacturer's then current list price, whichever is lower. The State is not obliged to procure any specific quantity of equipment. Applicable costs for the additional items must be shown on the appropriate cost sheet in Appendix D, COST WORKBOOK; these costs will be evaluated and considered as part of the total proposal for evaluation purposes. Items delivered must be current releases of the specific hardware and software products offered by the bidder and must continue to meet the State's productive in-use requirement and all technical requirements included in this RFP.

Table 5-33: Additional Equipment Purchases Requirement

Admin Req #	Requirement
A44	The bidder shall identify their compliance with the Additional Equipment Purchases requirement by providing their response within Appendix B-6, RESPONSE TO ADMINISTRATIVE REQUIREMENTS FORM, in its proposal.

5.15 BIDDER PERFORMANCE RESPONSIBILITY

5.15.1 Ability to Perform (M)

If, during the evaluation process, the State is unable to assure itself of the bidder's ability to perform under the Contract, if awarded, the State has the option of requesting from the Bidder any information that the State deems necessary to determine the bidder's responsibility. If such information is required, the bidder will be so notified and will be permitted five (5) State business days to submit the information requested. Examples of the type of financial responsibility

information requested may include annual reports and current audited balance sheets from the bidding company.

Table 5-34: Ability to Perform Requirement

Admin Req #	Requirement
A45	The bidder shall identify their compliance with the Ability to Perform requirement by providing their response within Appendix B-6, RESPONSE TO ADMINISTRATIVE REQUIREMENTS FORM, in its proposal.

5.15.2 Availability (M)

Replacement services must meet the original RFP requirements associated with services or Staff with no additional cost to the State. If, at any time after award of this Contract, the CalHEERS SDMO Bidder becomes unable to provide any part of its contracted services, the CalHEERS SDMO Bidder must, within ten (10) State business days, notify the State in writing to seek a potential resolution, and if appropriate, propose a replacement of those services that it can no longer provide. The replacement must be at no cost to the State, and shall be equivalent to or exceed the proposed service that was previously offered and accepted by the State in the CalHEERS SDMO Bidder's proposal or awarded Contract.

Table 5-35: Availability Requirement

Admin Req #	Requirement
A46	The bidder shall identify their compliance with the Availability requirement by providing their response within Appendix B-6, RESPONSE TO ADMINISTRATIVE REQUIREMENTS FORM, in its proposal.

5.15.3 Proposal Rejection (M)

A proposal may be rejected if it is conditional or incomplete, or if it contains any alterations of forms or other irregularities of any kind, in accordance with RFP Section 2.3.6.2, ERRORS IN THE PROPOSAL. Deviation from terms and conditions previously approved for this solicitation may be a cause for rejection of the proposal. Bidders submitting conditional proposals may be disqualified.

Table 5-36: Proposal Rejection Requirement

Admin Req #	Requirement
A47	The bidder shall identify their compliance with the proposal rejection requirement by providing their response within Appendix B-6, RESPONSE TO ADMINISTRATIVE REQUIREMENTS FORM, in its proposal.

5.16 STATEMENT OF WORK COMPLIANCE REQUIREMENTS (M)

Appendix A-4, SOW, identifies and describes the tasks and responsibilities of the Bidder and the responsibilities of the State during the Contract. The bidder shall identify their compliance with all the mandatory requirements within SOW by indicating an "X" in the Yes column. An "X" in the Yes column indicates that, the bidder confirms that they have:

- Read the individual requirements within Appendix A-4, SOW;

- Understands each individual requirement within each Section of the SOW; and
- Agrees to comply with each individual requirement within each Section of the SOW.

Table 5-37: Statement of Work Compliance Requirement

Admin Req #	Requirement
A48	The bidder shall complete and submit Appendix B-18, STATEMENT OF COMPLIANCE WITH SOW REQUIREMENTS FORM, demonstrating their willingness to fully comply with all of the requirements in Appendix A-4, SOW, in its proposal.

5.17 BIDDER (COMPANY) QUALIFICATION (M)

The State identifies that a bidder proposal may be deemed nonresponsive if the bidder does not submit the required forms, causing the bidder to be disqualified.

Table 5-38: Bidder (Company) Qualifications Administrative Requirement

Admin Req #	Requirement
A49	The bidder shall complete and submit an Appendix B-19, BIDDER (COMPANY) QUALIFICATIONS INSTRUCTIONS & FORM within its proposal.

5.18 BIDDER (COMPANY) REFERENCE FORMS (M)

The State identifies that a bidder proposal may be deemed nonresponsive if the bidder does not submit the required forms, causing the bidder to be disqualified.

Table 5-39: Bidder (Company) Reference Administrative Requirement

Admin Req #	Requirement
A50	The bidder shall complete and submit all necessary Appendix B-20, BIDDER (COMPANY) REFERENCE FORMS within its proposal.

5.19 KEY STAFF QUALIFICATIONS FORMS (M)

The State identifies that a bidder proposal may be deemed nonresponsive if the bidder does not submit the required forms, causing the bidder to be disqualified.

Table 5-40: Key Staff Qualifications Administrative Requirement

Admin Req #	Requirement
A51	The bidder shall complete and submit all necessary Appendix B-22, KEY STAFF QUALIFICATIONS FORMS within its proposal.

5.20 KEY STAFF REFERENCE FORMS (M)

The State identifies that a bidder proposal may be deemed nonresponsive if the bidder does not submit the required forms, causing the bidder to be disqualified.

Table 5-41: Key Staff References Administrative Requirement

Admin Req #	Requirement
A52	The bidder shall complete and submit all necessary Appendix B-23, STAFF REFERENCE FORMs within its proposal.

Section 6

Bidder Requirements

SECTION 6 – BIDDER REQUIREMENTS

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6 BIDDER REQUIREMENTS

6.1 INTRODUCTION

This Section contains the bidder requirements that must be responded to within the bidder's proposal, permitting the State to validate that the bidder has the qualifications and experience necessary to provide the solution and services requested in this solicitation. The requirements in this Section are broken out as follows:

- Bidder (Company) Qualifications
- Bidder (Company) References
- Bidder Key Staff Qualifications
- Bidder Key Staff References
- Understanding and Approach Requirements

The Mandatory Qualification requirements in this Section are designated as either Mandatory Pass / Fail, Mandatory Scorable or Mandatory Optional. The Desirable Qualification requirements in this Section are designated Desirable Scorable. Requirements will be evaluated by the State in accordance with the evaluation processes outlined within RFP Section 9, EVALUATION.

Please review the following RFP Sections for all the additional requirements which must be met in order for a bidder to be considered responsive:

- Section 2, RULES GOVERNING COMPETITION
- Section 5, ADMINISTRATIVE REQUIREMENTS
- Section 7, COST
- Section 8, PROPOSAL FORMAT
- Section 9, EVALUATION

Section 6.2.1, BIDDER (COMPANY) QUALIFICATION REQUIREMENTS, includes company qualifications that are specific to the evaluation process. These requirements are detailed below for bidders to provide a written response.

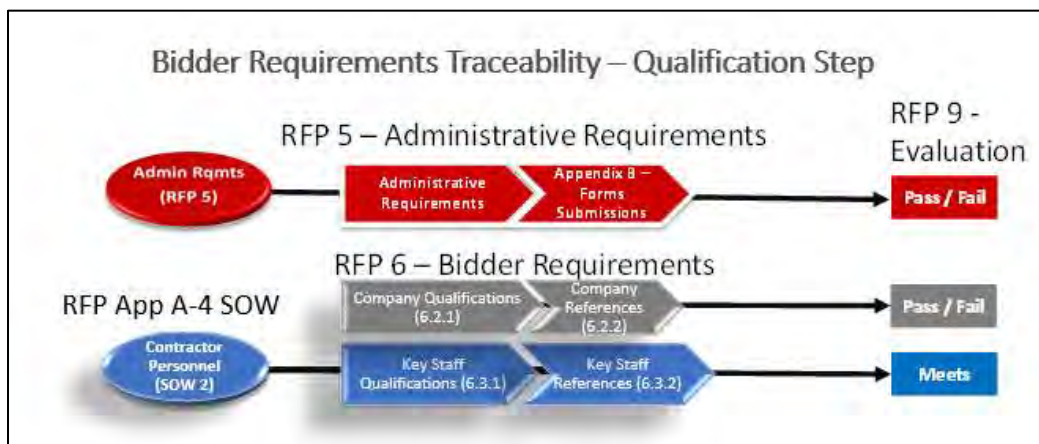
The requirements bidders are to provide a written response in this section stem from Appendix A-4, STATEMENT OF WORK (SOW) scope. These areas of interest also align with the proposed system described in RFP Section 4, PROPOSED SYSTEM, and are of particular importance to the State.

Note: Bidders must agree to satisfy all of the requirements in the Statement of Work by completing the Appendix B-18, STATEMENT OF COMPLIANCE WITH SOW REQUIREMENTS FORM. Therefore, RFP Section 6, BIDDER REQUIREMENTS, does not contain any new scope not already stated in the SOW.

6.1.1 Qualification Requirements

Bidders must qualify in order to make it to the evaluation scoring round. The figure below depicts the areas that Bidders must meet in order not to be disqualified.

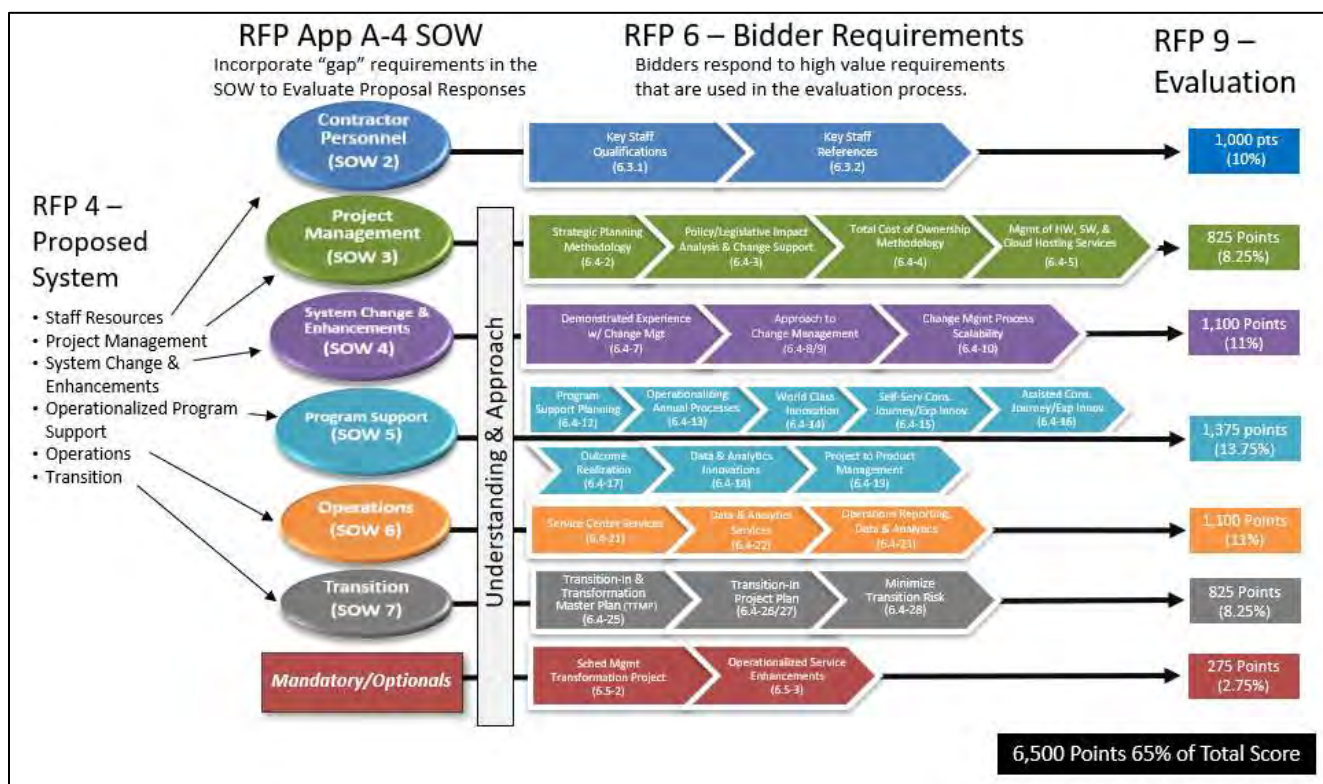
Figure 6-1: Bidder Requirements Traceability – Qualification (Pass / Fail)



6.1.2 Technical Requirements

The figure below identifies the areas where the evaluation and scoring criteria will be applied, except for cost, in the evaluation process; and the traceability between the Request for Proposal (RFP) Sections from which the evaluation areas are derived.

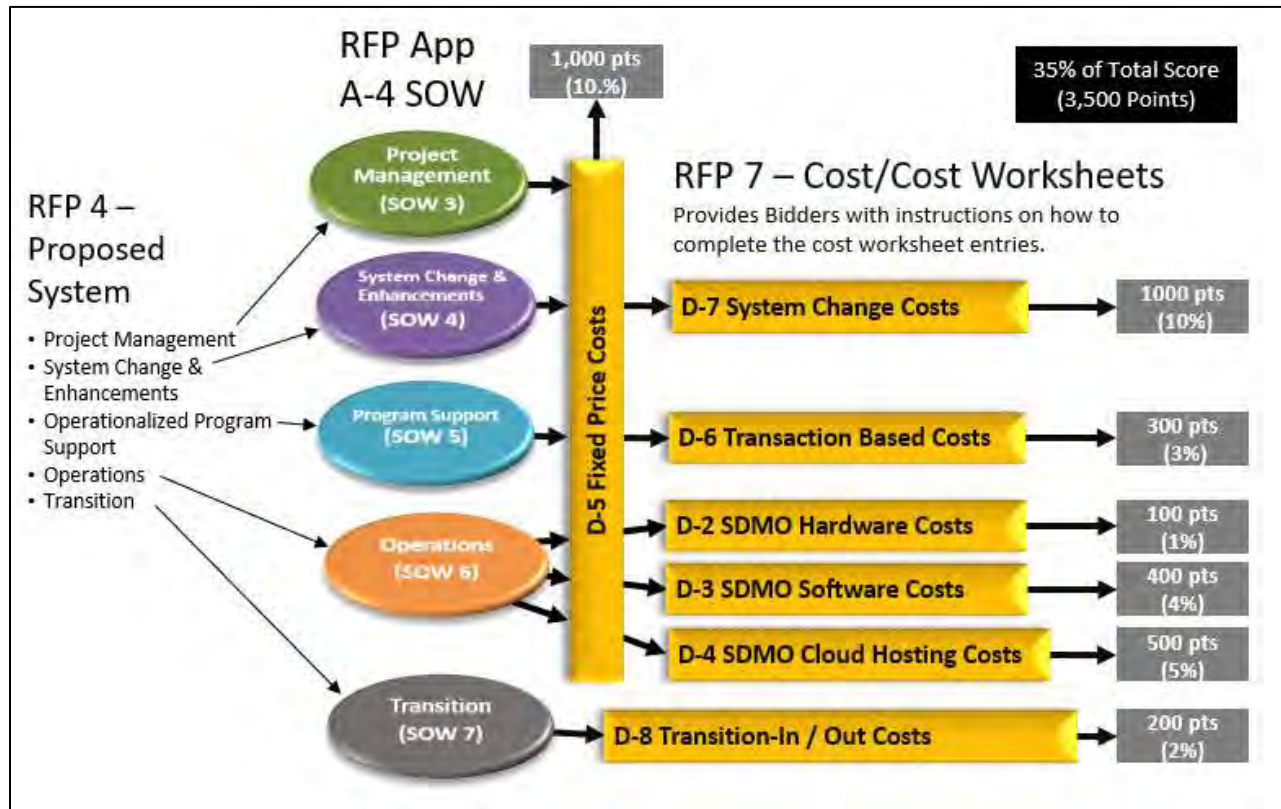
Figure 6-2: Bidder Requirements Traceability – Technical Evaluation (Scored)



6.1.3 Cost Requirements

The figure below identifies the areas where cost-specific criteria will be applied to the evaluation and their association with other applicable Sections of the RFP.

Figure 6-3: Bidder Requirements Traceability – Cost Evaluation (Scored)



6.2 BIDDER (COMPANY) QUALIFICATIONS & REFERENCES

Bidders who respond to this solicitation are expected to have a proven track record of success in the transition, as well as maintenance and operations, of Large and Complex Information Technology (IT) Systems. The Bidder that is awarded the contract resultant from this solicitation will be responsible for all aspects of the System Development, Maintenance and Operations (SDMO) Services for CalHEERS, including Contractor and Subcontractor (if applicable) project Staff.

6.2.1 Bidder (Company) Qualification Requirements

The State seeks a responsive, responsible bidder (company) that has the right experience to support the CalHEERS over the term of the contract. Therefore, it is imperative that the bidder provide enough detail in their response for the State to evaluate the bidder's ability to meet the requirements herein and perform the services as described within the Statement of Work (SOW).

The Bidder (Company) Qualification requirements are designated as Mandatory Pass / Fail. It is mandatory for bidders to respond, providing all of the required information regarding the company qualifications on the required Appendix B-19, BIDDER (COMPANY) QUALIFICATIONS INSTRUCTIONS & FORM. Bidders that either do not submit the required information or fail to satisfy any of the mandatory qualification requirements for the Company Qualifications will be considered nonresponsive.

Table 6-1: Bidder (Company) Qualifications Form Requirement

Req #	Evaluation Type	Requirement
6.2-1	Mandatory Pass / Fail	The bidder shall submit a completed Appendix B-19, BIDDER (COMPANY) QUALIFICATIONS INSTRUCTIONS & FORM to substantiate the company's experience for each of the Company MQ requirement.

Table 6-2: Bidder (Company) Qualification Step Requirement

Req #	Evaluation Type	Requirement
6.2-2	Mandatory Pass / Fail	The bidder shall submit a completed Appendix B-19, BIDDER (COMPANY) QUALIFICATIONS INSTRUCTIONS & FORM to substantiate each of the Company MQ Requirements identified in RFP Section 6.2.1, BIDDER (COMPANY) QUALIFICATIONS REQUIREMENTS.

The Bidder (Company) MQ requirements are defined in the table below. Companies that partner in order to provide the State with the best service offering should review RFP Section 2, RULES GOVERNING COMPETITION, to ensure they adhere to the guidelines therein.

Table 6-3: Bidder (Company) Mandatory Qualification Requirements

MQ #	Evaluation Type	Requirements
1	Mandatory Pass / Fail	At least two (2) years of experience as the System Integrator (SI) on a health care eligibility or health care enrollment system that meets the definition of Large and Complex IT System ¹ , or at least two (2) years of experience as the prime contractor of Maintenance and Operations (M&O) on a health care eligibility or health care enrollment system that meets the definition of Large and Complex IT System.
2	Mandatory Pass / Fail	Experience with the implementation of two (2) projects involving Large and Complex IT Systems, one (1) of the projects having been on a health care eligibility or health care enrollment system. Each of the two (2) projects must have occurred within the last ten (10) years.
3	Mandatory Pass / Fail	Experience performing maintenance and system modifications on two (2) projects involving Large and Complex IT Systems, with one (1) of the projects having been on a health care eligibility or health care enrollment system. Each of the two (2) projects must have occurred within the last ten (10) years.
4	Mandatory Pass / Fail	Experience performing operational activities including system engineering, capacity planning, performance testing, performance monitoring, batch processing, and system modifications on two (2) projects involving Large and Complex IT Systems hosted in the cloud. Each of the two (2) projects must have occurred within the last ten (10) years.
5	Mandatory Pass / Fail	Experience providing service desk activities on two (2) projects involving Large and Complex IT Systems using Information Technology Infrastructure Library (ITIL) standards and framework, one (1) of the projects having been on a health care eligibility or health care enrollment system. Each of the two (2) projects must have occurred within the last ten (10) years.
6	Mandatory Pass / Fail	Experience with the transition of one (1) project, involving a Large and Complex IT System, from one company to another. The project must have occurred within the last ten (10) years.
7	Mandatory Pass / Fail	Experience with the implementation and utilization of both Artificial Intelligence (AI) and Generative Artificial Intelligence (GenAI) on two (2) projects involving

¹ See Appendix C – Glossary for the definition of Large and Complex IT System.

MQ #	Evaluation Type	Requirements
		Large and Complex IT Systems, with one (1) of the projects having been on a health and human services system. Each of the two (2) projects must have occurred within the last five (5) years.
8	Mandatory Pass / Fail	Experience with execution of the complete implementation lifecycle for newly emerging technologies, including identification, ideation, strategizing, to implementation, on two (2) projects involving Large and Complex IT Systems using Information Technology Infrastructure Library (ITIL) standards and framework, one (1) of the projects having been on a health care eligibility or health care enrollment system.

6.2.2 Bidder (Company) Reference Requirements

The bidder (company) reference requirements within this Section are designated as Mandatory Pass / Fail. It is mandatory for bidders to respond, providing all of the required information regarding the company references on the required Appendix B-20, BIDDER (COMPANY) REFERENCE FORM INSTRUCTIONS. Bidders that either do not submit the required forms or information will be considered nonresponsive.

It is Mandatory that bidder's send a copy of Appendix B-20, BIDDER (COMPANY) REFERENCE FORM INSTRUCTIONS, to each reference identified within the Appendix B-19, BIDDER (COMPANY) QUALIFICATIONS INSTRUCTIONS & FORM.

Each reference must complete and return the Appendix B-20, BIDDER (COMPANY) REFERENCE FORM, to the bidder for submission within their proposal. Photocopies will be accepted as long as the form, response, and signature are legible. No information corrections or changes may be made on the reference form by the bidder. Proposals with forms that have alterations or changes to the entered information will be considered ~~nonresponsive~~non-responsive.

The State may contact references listed to verify the information provided by the bidder. Any conflicting information may result in the proposal being deemed ~~nonresponsive~~non-responsive.

Table 6-4: Bidder (Company) References Form Requirement

Req #	Evaluation Type	Requirement
6.2-3	Mandatory Pass / Fail	The bidder shall submit a completed Appendix B-20, BIDDER (COMPANY) REFERENCE FORM, for each project reference identified on the Appendix B-19, BIDDER (COMPANY) QUALIFICATIONS INSTRUCTIONS & FORM, to substantiate the company experience stated to meet the Company MQ Requirements, in order to be considered compliant.

Table 6-5: Bidder (Company) References Qualification Step Requirement

Req #	Evaluation Type	Requirement
6.2-4	Mandatory Pass / Fail	The bidder shall submit a completed Appendix B-20, BIDDER (COMPANY) REFERENCE FORM, as part of the proposal to substantiate each of the Company MQ Requirements identified in RFP Section 6.2.1, BIDDER (COMPANY) QUALIFICATIONS REQUIREMENTS.

6.3 BIDDER KEY STAFF QUALIFICATIONS & REFERENCES

6.3.1 Bidder Key Staff Qualification Requirements

The purpose of this Section is to provide the Key Staff Mandatory & Desirable Qualification requirements for the bidder's leadership team that will work alongside the State's leadership team for the duration of the Contract. The requirements within this Section are designated as either Mandatory (Pass / Fail) or Mandatory Scorable. In either case, bidders must respond to the requirement. Mandatory requirements will be assessed as either Pass or Fail, while Mandatory Scorable requirements will be evaluated and receive a score based on the evaluation criteria defined in RFP Section 9, EVALUATION.

Table 6-6: Key Staff Qualifications Form Requirement (Mandatory Qualifications)

Req #	Evaluation Type	Requirement
6.3-1	Mandatory Pass / Fail	The bidder shall submit a completed Appendix B-22, KEY STAFF QUALIFICATIONS FORM, for each required Key Staff, to substantiate the Key Staff experience against each of the Key Staff Mandatory Qualification requirements identified within RFP Section 6.3.1, BIDDER KEY STAFF QUALIFICATION REQUIREMENTS.

Table 6-7: Key Staff Qualification Form Requirement (Desirable Qualifications)

Req #	Evaluation Type	Requirement
6.3-2	Mandatory	The bidder shall include a completed Appendix B-22, KEY STAFF QUALIFICATIONS FORM, as part of the proposal to substantiate each of the Key Staff Desirable Qualification requirement(s) the bidder chooses to respond to, identified within RFP Section 6.3.1, BIDDER KEY STAFF QUALIFICATION REQUIREMENTS.

Please refer to Appendix B-21, KEY STAFF QUALIFICATIONS INSTRUCTIONS for directions on completing an Appendix B-22, KEY STAFF QUALIFICATIONS FORM for each proposed Key Staff position.

The cost associated with all bidder Key Staff, except for the Transition Manager, shall be captured within Appendix D-5, SDMO FIXED PRICE ONSHORE COSTS, D-5.4 SDMO FIXED PRICE OFFSHORE COSTS. The cost associated with the Transition Manager shall be captured in the activities specified within Appendix D-8, TRANSITION-IN COSTS, and Appendix D-8.2, TRANSITION-OUT COSTS.

Table 6-8: Bidder Key Staff Mandatory & Desirable Qualification Requirements

#	Key Staff	MQ #	Type	Requirements
1	Project Manager	6.3.1-1	Mandatory Scorable	The Project Manager shall have a minimum of five (5) years' experience within the past ten (10) years, supervising teams of 50 people or greater on projects that involved Large and Complex IT Systems.
		6.3.1-2	Mandatory Scorable	The Project Manager shall possess and maintain a valid Project Management Institute (PMI) Project Management Professional (PMP) certification throughout the term of this Contract.
		6.3.1-3	Mandatory Scorable	The Project Manager shall have a minimum of three (3) years of experience within the past ~~ten~~ <u>fifteen</u> ~~(10)~~ <u>(15)</u> years, on a project that implemented, or performed the

#	Key Staff	MQ #	Type	Requirements
				maintenance and operations on, a health care eligibility or health care enrollment system meeting the definition of Large and Complex IT System.
		6.3.1-4	Desirable Scorable	The Project Manager shall have a minimum of one (1) years' experience within the past ten (10) years, on an Affordable Care Act (ACA) project.
		6.3.1-5	Desirable Scorable	The Project Manager shall have a minimum of one (1) year of experience within the past ten (10) years, managing the development of, or managing the system change requests for, a Large and Complex IT System utilizing an Agile development methodology.
2	Deputy Project Manager	6.3.1-6	Mandatory Scorable	The Deputy Project Manager shall have a minimum of five (5) years' experience within the past ten (10) years, in Business or Information Technology (IT) Project Management.
		6.3.1-7	Mandatory Scorable	The Deputy Project Manager shall have a minimum of five (5) years' experience within the past ten (10) years, managing/co-managing a project, including but not limited to, experience managing Contract requirements and deliverables on large and complex IT projects; and have experience with human services systems and programs with emphasis on healthcare.
		6.3.1-8	Mandatory Scorable	The Deputy Project Manager shall possess and maintain a valid Project Management Institute (PMI) Project Management Professional (PMP) certification throughout the term of this Contract.
		6.3.1-9	Desirable Scorable	The Deputy Project Manager shall have a minimum of one (1) year of experience within the past ten (10) years, supervising teams of 10 people or greater on projects that implemented or performed the maintenance and operations on a health care eligibility or health care enrollment system meeting the definition of Large and Complex IT System.
3	Technical Manager	6.3.1-10	Mandatory Scorable	The Technical Manager shall have a minimum of five (5) years' experience within the past ten (10) years, managing a system development life cycle (SDLC), including business and system requirement specification, design, development, testing, and implementation, on projects involving Large and Complex IT Systems.
		6.3.1-11	Mandatory Scorable	The Technical Manager shall have a minimum of five (5) years' experience within the past ten (10) years, performing oversight of technical resources, resolving system defects and reporting resolutions.
		6.3.1-12	Mandatory Scorable	The Technical Manager shall have a minimum of five (5) years' experience within the past ten (10) years, managing the system development life cycle (SDLC) on maintenance and operations projects which involved Large and Complex IT Systems.
		6.3.1-13	Desirable Scorable	The Technical Manager shall have a minimum of one (1) year of experience within the past ten (10) years, on a project that implemented, or performed the maintenance and operations on, a health care eligibility or health care enrollment system meeting the definition of Large and Complex IT System.

#	Key Staff	MQ #	Type	Requirements
		6.3.1-14	Desirable Scorable	The Technical Manager shall have a minimum of one (1) year of experience within the past ten (10) years, on a Large and Complex IT System using Information Technology Infrastructure Library (ITIL) standards and framework.
4	Project Management Office (PMO) Manager	6.3.1-15	Mandatory Scorable	The PMO Manager shall have a minimum of five (5) years' project management experience within the past ten (10) years, managing and supervising PMO teams on projects involving Large and Complex IT Systems.
		6.3.1-16	Mandatory Scorable	The PMO Manager shall have a minimum of five (5) years' experience within the past ten (10) years, managing a PMO, in accordance with industry best practices, including experience managing Contract requirements and deliverables on projects involving Large and Complex IT Systems.
		6.3.1-17	Mandatory Scorable	The PMO Manager shall possess and maintain a valid Project Management Institute (PMI) Project Management Professional (PMP) certification throughout the term of this Contract.
		6.3.1-18	Desirable Scorable	The PMO Manager shall have a minimum of one (1) year of experience within the past ten (10) years, on a project that implemented, or performed the maintenance and operations on, a health care eligibility or health care enrollment system meeting the definition of Large and Complex IT System.
5	Schedule Management Lead	6.3.1-19	Mandatory Scorable	The Schedule Management Lead shall have a minimum of five (5) years' experience within the past ten (10) years, supervising schedule management teams on projects involving Large and Complex IT Systems.
		6.3.1-20	Mandatory Scorable	The Schedule Management Lead shall have a minimum of five (5) years' experience within the past ten (10) years, managing project schedules, including an integrated master schedule (multiple schedules merged into a single master schedule), on projects involving Large and Complex IT Systems.
		6.3.1-21	Mandatory Scorable	The Schedule Management Lead shall possess and maintain a valid, in good standing, Project Management Institute (PMI) Project Management Professional (PMP) certification throughout the term of this Contract.
		6.3.1-22	Desirable Scorable	The Schedule Management Lead shall have three (3) year experience within the past ten (10) years, on projects involving Large and Complex IT Systems, that implemented or migrated to effort-driven schedules.
		6.3.1-23	Desirable Scorable	The Schedule Management Lead shall have a minimum of three (3) years' scheduling experience within the past ten (10) years, managing effort driven schedules on projects involving Large and Complex IT Systems.
6	Operations Manager	6.3.1-24	Mandatory Scorable	The Operations Manager shall have a minimum of five (5) years' experience within the past ten (10) years, supervising teams of 20 people or greater on maintenance and operations projects involving Large and Complex IT Systems.
		6.3.1-25	Mandatory Scorable	The Operations Manager shall have a minimum of five (5) years' experience within the past ten (10) years, ensuring the continuity of IT operations services,

#	Key Staff	MQ #	Type	Requirements
				including both local and wide area networks and cloud based services on projects involving Large and Complex IT Systems.
		6.3.1-26	Mandatory Scorable	The Operations Manager shall have a minimum of three (3) years' experience within the past ten (10) years, on maintenance and operations projects involving Large and Complex IT Systems which were hosted at in the cloud.
		6.3.1-27	Desirable Scorable	The Operations Manager shall have a minimum of one (1) year of experience within the past ten (10) years, on a project that implemented, or performed the maintenance and operations on, a health care eligibility or health care enrollment system meeting the definition of Large and Complex IT System.
		6.3.1-28	Desirable Scorable	The Operations Manager shall have a minimum of one (1) year of experience within the past ten (10) years, on a Large and Complex IT System using Information Technology Infrastructure Library (ITIL) standards and framework.
		6.3.1-29	Desirable Scorable	The Operations Manager shall have a minimum of one (1) year of experience within the past ten (10) years, working within a data warehouse environment, with a demonstrated understanding of data structures, ETLs, and reporting tools on a Large and Complex IT System.
7	Applications Maintenance Manager	6.3.1-30	Mandatory Scorable	The Applications Maintenance Manager shall have a minimum of five (5) years' experience within the past ten (10) years, as the application manager or lead on projects involving Large and Complex IT Systems.
		6.3.1-31	Mandatory Scorable	The Applications Maintenance Manager shall have a minimum of four (4) years' experience within the past ten (10) years, on projects involving Large and Complex IT Systems that integrated one (1) or more COTS applications.
		6.3.1-32	Mandatory Scorable	The Applications Maintenance Manager shall have a minimum of five (5) years' experience, within the past ten (10) years, managing application maintenance resources, scope, and prioritizing applications maintenance activities within the project work plan.
		6.3.1-33	Desirable Scorable	The Applications Maintenance Manager shall have a minimum of one (1) year of experience within the past ten (10) years, on a project that implemented, or performed the maintenance and operations on, a health care eligibility or health care enrollment system meeting the definition of Large and Complex IT System.
		6.3.1-34	Desirable Scorable	The Applications Maintenance Manager shall have a minimum of one (1) year of experience within the past ten (10) years, working within the data warehouse environment requiring a solid understanding of data structures, ETLs, and reporting tools on a Large and Complex IT System.
		6.3.1-35	Desirable Scorable	The Applications Maintenance Manager shall have a minimum of one (1) year of experience within the past ten (10) years, on a Large and Complex IT System using Information Technology Infrastructure Library (ITIL) standards and framework.

#	Key Staff	MQ #	Type	Requirements
8	Enterprise Architect	6.3.1-36	Mandatory Scorable	The Enterprise Architect shall have a minimum of five (5) years' experience within the past ten (10) years as an Enterprise Architect on projects involving Large and Complex IT Systems.
		6.3.1-37	Mandatory Scorable	The Enterprise Architect shall have a minimum of five (5) years' experience within the past ten (10) years in architecting and building high performance internet scale distributed systems and/or in architecting and building enterprise scale distributed systems, on projects involving Large and Complex IT Systems; and have experience with human services systems and programs with emphasis on healthcare.
		6.3.1-38	Mandatory Scorable	The Enterprise Architect shall have a minimum of five (5) years' experience within the past ten (10) years, of advanced technical expertise in at least one (1) of the following core areas: • Service Oriented Architecture (SOA) • Data Architecture and Data Warehousing • Security/Identity Management • Cloud Computing • Infrastructure Architecture
		6.3.1-39	Desirable Scorable	The Enterprise Architect shall have a minimum of one (1) year of experience within the past five (5) years, executing technology modernization on a health care eligibility or health care enrollment system meeting the definition of Large and Complex IT System.
9	Release Manager	6.3.1-40	Mandatory Scorable	The Release Manager shall have a minimum of five (5) years' experience within the past ten (10) years as the release manager or lead on projects involving Large and Complex IT Systems.
		6.3.1-41	Mandatory Scorable	The Release Manager shall have a minimum of five (5) years' experience within the past ten (10) years, on projects involving Large and Complex IT Systems, that manage, plan, schedule and control software build through different stages and environments; including testing and deploying software releases.
		6.3.1-42	Mandatory Scorable	The Release Manager shall have a minimum of five (5) years' experience within the past ten (10) years, working with project management principles and best practices in an information systems operations environment, within systems analysis or in the system development life cycle (SDLC).
		6.3.1-43	Desirable Scorable	The Release Manager shall have a minimum of one (1) year of experience within the past ten (10) years, on a project that implemented, or performed the maintenance and operations on, a health care eligibility or health care enrollment system meeting the definition of Large and Complex IT System.
10	Transition Manager	6.3.1-44	Mandatory Scorable	The Transition Manager shall have a minimum of three (3) years' experience within the past ten (10) years, performing operational transition and the related organization change management activities on projects involving Large and Complex IT Systems.

#	Key Staff	MQ #	Type	Requirements
		6.3.1-45	Mandatory Scorable	The Transition Manager shall have a minimum of two (2) years' experience within the past ten (10) years, managing the successful transition of Large and Complex IT Systems from one (1) company to another on at least two (2) separate projects. The Transition Manager's experience shall have been for a minimum duration of three (3) months for each project.
		6.3.1-46	Mandatory Scorable	The Transition Manager shall have a minimum of five (5) years' experience within the past ten (10) years building and maintaining strong working relationships with clients, key internal and external stakeholders; Conveying relevant information to an executive-level audience, ensuring client (internal management or customer) is aware of assignment progress/service status; and building credibility and fostering business-partnering relationships.
		6.3.1-47	Desirable Scorable	The Transition Manager shall have a minimum of one (1) year of experience within the past ten (10) years, on a project that implemented, or performed the maintenance and operations on, a health care eligibility or health care enrollment system meeting the definition of Large and Complex IT System.
11	Quality Assurance Manager	6.3.1-48	Mandatory Scorable	The Quality Assurance Manager shall have a minimum of five (5) years of lead experience within the past ten (10) years, applying quality assurance principles, methods, and techniques to processes on projects involving Large and Complex IT Systems.
		6.3.1-49	Mandatory Scorable	The Quality Assurance Manager shall have at least five (5) years of lead experience within the past ten (10) years, applying quality assurance principles, methods, and techniques to the development of project deliverables on projects involving Large and Complex IT Systems.
		6.3.1-50	Mandatory Scorable	The Quality Assurance Manager shall have a minimum of five (5) years' experience within the past ten (10) years, supervising QA staff on projects that involved Large and Complex IT Systems.
		6.3.1-51	Desirable Scorable	The Quality Assurance Manager shall have a minimum of one (1) year of experience within the past ten (10) years, on a project that implemented, or performed the maintenance and operations on, a health care eligibility or health care enrollment system meeting the definition of Large and Complex IT System.
		6.3.1-52	Desirable Scorable	The Quality Assurance Manager shall have a minimum of one (1) year of experience within the past ten (10) years, on a Large and Complex IT System using Information Technology Infrastructure Library (ITIL) standards and framework.
12	Agile Manager	6.3.1-53	Mandatory Scorable	The Agile Manager shall have a minimum of five (5) years' lead experience within the past ten (10) years, applying agile principles, methods, and techniques to processes on projects involving Large and Complex IT Systems.
		6.3.1-54	Mandatory Scorable	The Agile Manager shall have a minimum of two (2) years' experience within the past five (5) years assisting

#	Key Staff	MQ #	Type	Requirements
				IT projects with the transition from Waterfall to Agile methodology.
		~~6.3.1-55~~ ~~6.3.1-56~~ 56	Desirable Scorable	The Agile Manager shall have a minimum of one (1) year of experience within the past ten (10) years, on a project that implemented, or performed the maintenance and operations on a federal or state health and human services eligibility and/or enrollment system meeting the definition of Large and Complex IT System.
		~~6.3.1-56~~ ~~6.3.1-57~~ 57	Mandatory Scorable	The Data Scientist must have a minimum of 5 years' experience within the past ten (10) years of leading teams of programmers that develop machine learning algorithms or design predictive modeling processes.
		~~6.3.1-57~~ ~~6.3.1-58~~ 58	Mandatory Scorable	The Data Scientist must have a minimum of 10 years' experience within the past fifteen (15) years in sorting, analyzing, and managing large amounts of data (commonly referred to as "big data").
		~~6.3.1-58~~ ~~6.3.1-59~~ 59	Mandatory Scorable	The Data Scientist must have a minimum of 10 years' experience within the past fifteen (15) years writing high-quality machine learning models and algorithms required to support statistics and probability. The ability to collect, interpret, organize, and present data, and an advanced degree in applied statistics, economics, epidemiology, biostatistics, or a related field, with at least a concentration in quantitative methods relevant to work described for CalHEERS.
13	Data Scientist	~~6.3.1-59~~ ~~6.3.1-60~~ 60	Mandatory Scorable	The Data Scientist must have a minimum of 10 years' experience within the past fifteen (15) years writing providing services in support of data wrangling including cleaning and organizing complex data sets to make them easier to access and analyze. Manipulating the data to categorize it by patterns and trends to assist in making data-driven decisions. A solid understanding of database management, with proven experience extracting data from different sources and transforming it into a suitable format for query and analysis, and then load it into a data warehouse system is required.
		~~6.3.1-60~~ ~~6.3.1-64~~ 64	Desirable Scorable	The Data Scientist shall have a minimum of three (3) years of experience within the past ten (10) years, on a project that implemented, or performed the maintenance and operations on a federal or state health and human services eligibility and/or CA Health and Human Services Agency system meeting the definition of Large and Complex IT System.
		~~6.3.1-61~~ ~~6.3.1-62~~ 62	Mandatory Scorable	The Data Analytics Expert shall have a minimum of ten (10) years' lead experience within the past fifteen (15) years, developing, implementing, and improving data analytics strategies and solutions on projects involving Large and Complex IT Systems.
14	Data Analytics Expert	~~6.3.1-62~~ ~~6.3.1-63~~ 63	Mandatory Scorable	The Data Analytics Expert shall have a minimum of five (5) years' experience within the past ten (10) years leading a team of data architects, data scientists, report developers, or related analytics staff resources on projects involving Large and Complex IT Systems.

#	Key Staff	MQ #	Type	Requirements
		~~6.3.1-636.3.1-64~~	Mandatory Scorable	The Data Analytics Expert shall have a minimum of three (3) years' experience/knowledge within the past seven (7) years in business processes including research and data analysis, application of statistical research techniques, report or application development.
		~~6.3.1-646.3.1-65~~	Desirable Scorable	The Data Analytics Expert shall have a minimum of one (1) year of experience within the past ten (10) years, on a project that implemented, or performed the maintenance and operations on, a health care eligibility or health care enrollment system meeting the definition of Large and Complex IT System.
		~~6.3.1-656.3.1-66~~	Desirable Scorable	The Data Analytics Expert shall have a minimum of one (1) year of experience within the past ten (10) years, working within the data warehouse environment requiring a solid understanding of data structures, ETLs, and reporting tools on a Large and Complex IT System.
15	Security Officer	~~6.3.1-666.3.1-67~~	Mandatory Scorable	The Security Officer shall have a minimum of ten (10) years' lead experience within the past fifteen (15) years', developing, implementing, improving and monitoring industry standard Security strategies, solutions, and processes on projects involving Large and Complex IT Systems.
		~~6.3.1-676.3.1-68~~	Mandatory Scorable	The Security Officer shall have a minimum of five (5) years' experience within the past ten (10) years' applying Information Security principles, methods, and techniques in the development of project security deliverables on projects involving Large and Complex IT Systems.
		~~6.3.1-686.3.1-69~~	Mandatory Scorable	The Security Officer shall have a (ISC) ² ® Certified Information Systems Security Professional (CISSP) certification, or equivalent, including experience in Healthcare, Business Administration and Information Technology.
		~~6.3.1-696.3.1-70~~	Desirable Scorable	The Security Officer shall have a minimum of one (1) year of experience within the past ten (10) years, on a project that implemented, or performed the maintenance and operations on, a federal or state health and human services eligibility and/or enrollment system meeting the definition of Large and Complex IT System.
16	Organizational Change Manager (OCM)	~~6.3.1-706.3.1-71~~	Mandatory Scorable	The OCM Manager shall have a minimum of ten (10) years' lead experience within the past fifteen (15) years', developing, implementing, and improving change management, gap analysis strategies and solution implementation on projects involving Large and Complex IT Systems.
		~~6.3.1-716.3.1-72~~	Mandatory Scorable	The OCM Manager shall have a minimum of five (5) years' experience within the past ten (10) years' leading a team of change management agents on projects involving Large and Complex IT Systems.
		~~6.3.1-726.3.1-73~~	Mandatory Scorable	The OCM Manager shall have a minimum of five (5) years' experience within the past ten (10) years' working with human services systems and programs with an emphasis on healthcare; experience building and maintaining strong working relationships with clients, key internal and external stakeholders; communicating

#	Key Staff	MQ #	Type	Requirements
				relevant information to an executive-level audience, ensuring the client (internal management or customer) is aware of the impact of impending changes.
		~~6.3.1-73~~ ~~6.3.1-74~~	Desirable Scorable	The OCM Manager shall have a minimum of one (1) year of experience within the past ten (10) years, on a project that implemented, or performed the maintenance and operations on, a health care eligibility or health care enrollment system meeting the definition of Large and Complex IT System.
		~~6.3.1-74~~ ~~6.3.1-75~~	Desirable Scorable	The OCM Manager shall have a minimum of one (1) year of experience within the past ten (10) years, managing change on a Large and Complex IT System that utilizes an Agile development methodology.
17	Consumer Experience Lead	~~6.3.1-75~~ ~~6.3.1-76~~	Mandatory Scorable	The Consumer Experience Lead shall have a minimum of seven (7) years' experience within the past ten (10) years, in marketing analytics, customer experience/customer insights and/or customer strategy; and have experience with human services systems and programs with emphasis on healthcare.
		~~6.3.1-76~~ ~~6.3.1-77~~	Mandatory Scorable	The Consumer Experience Lead shall have a minimum of five (5) years' experience within the past ten (10) years, gathering consumer and user business data, analyzing of the data, to quantify and inform User Experience (UX) strategies.
		~~6.3.1-77~~ ~~6.3.1-78~~	Mandatory Scorable	The Consumer Experience Lead shall have a minimum of five (5) years' experience within the past ten (10) years, applying UX Design, implementing UX methodologies and best practices, and designing wireframes or prototypes for research validation.
		~~6.3.1-78~~ ~~6.3.1-79~~	Desirable Scorable	The Consumer Experience Lead shall have a minimum of one (1) year of experience within the past ten (10) years, on a project that implemented, or performed the maintenance and operations on, a health care eligibility or health care enrollment system meeting the definition of Large and Complex IT System.

6.3.2 Bidder Key Staff Reference Requirements

The purpose of the Staff reference requirements is to provide the State with the ability to assess Key Staff experience in providing similar or relevant services to those identified in this solicitation. The requirements within this Section are designated as either Mandatory (Pass / Fail) or Mandatory Scorable. In either case, bidders must respond to the requirement. Mandatory requirements will be assessed as either pass or fail, while Mandatory Scorable requirements will be evaluated and receive a score based on the evaluation criteria defined in RFP Section 9, EVALUATION.

It is Mandatory that bidder's send a copy of Appendix B-23, STAFF REFERENCE FORM, to each reference identified within each Key Staff's Appendix B-22, KEY STAFF QUALIFICATIONS FORM.

Each reference must complete and return the Appendix B-23, STAFF REFERENCE FORM, to the bidder for submission within their proposal. Photocopies will be accepted as long as the form, response, and signature are legible. No information corrections or changes may be made on the reference form by the bidder. Proposals with forms that have alterations or changes to the entered information will be considered nonresponsive.

If the Key Staff Reference is not allowed either legally or by company/organization policy to sign the Appendix B-23, STAFF REFERENCE FORM, the Key Staff Reference must type in their full name with a brief statement on the form outlining the reason they are not permitted to sign the State's Key Staff reference form.

The State may contact references listed to verify the information provided by the bidder. Any conflicting information may result in the proposal being deemed nonresponsive.

Table 6-9: Key Staff Reference Requirements

Req #	Type	Requirement
6.3-3	Mandatory Pass / Fail	The bidder shall only submit Key Staff references from individuals external to the bidder's organization and corporate structure. The individual providing the reference must have performed in a managerial or supervisory role on the project referenced on Appendix B-22, KEY STAFF QUALIFICATIONS FORM.
6.3-4	Mandatory Pass / Fail	The bidder shall validate that each Key Staff Reference returned the Appendix B-23, STAFF REFERENCE FORM, to the bidder, properly filled out, signed and dated, for inclusion within the bidder's proposal. All reference forms associated with Key Staff Mandatory or Desirable Qualification requirements must be submitted within the proposal in order to be considered compliant.

Table 6-10: Key Staff References Form Requirement

Req #	Type	Requirement
6.3-5	Mandatory Pass / Fail	The bidder shall submit a completed Appendix B-23, STAFF REFERENCE FORM, for each project reference identified on the Appendix B-22, KEY STAFF QUALIFICATIONS FORM, to substantiate the Key Staff experience stated to meet the Key Staff Mandatory Qualification Requirements, in order to be considered compliant.
6.3-6	Mandatory	The bidder shall submit a completed Appendix B-23, STAFF REFERENCE FORM, for each project reference identified on the Appendix B-22, KEY STAFF QUALIFICATIONS FORM, to substantiate the Key Staff experience stated to meet any of the Key Staff Desirable Qualification Requirements, in order for the state to evaluate whether or not the experience meets the requirement.

Table 6-11: Key Staff Reference Qualification Step Requirement

Req #	Type	Requirement
6.3-7	Mandatory Pass / Fail	The bidder shall include completed Appendix B-23, STAFF REFERENCE FORMS, as part of the proposal to substantiate each of the Key Staff MQ Requirements identified in RFP Section 6.3.1, BIDDER KEY STAFF QUALIFICATION REQUIREMENTS.

6.4 UNDERSTANDING AND APPROACH REQUIREMENTS

The bidder must provide a narrative response to each of the Understanding and Approach requirements located within this Section, in fulfillment of the requirements identified in Appendix A-4, STATEMENT OF WORK (SOW), and in consideration of the M&O service improvements identified in RFP Section 4, PROPOSED SYSTEM. The bidder shall provide their response to these requirements in accordance with the instructions provided in this Section and within RFP Section 8, PROPOSAL FORMAT.

6.4.1 Understanding and Approach to Project Management Requirements

The State has chosen Project Management related topics identified in RFP Section 4, PROPOSED SYSTEM for which the bidder is required to respond. These topics also correlate with the requirements the Bidder will perform in SOW Section 3, PROJECT MANAGEMENT

REQUIREMENTS upon contract award.

Mandatory Scorable (MS) requirements herein will apply to the Understanding and Approach Sections. It is mandatory for the bidders to provide their Understanding and Approach to each of the topics identified. The responses will then be scored by the State in accordance with the evaluation process outlined in RFP Section 9, EVALUATION.

Table 6-12: Page Count Limit for Project Management Requirements Response

Req #	Type	Requirement
6.4-1	Mandatory Pass / Fail	The bidder shall submit their response to the Understanding and Approach to Project Management Requirements within this Section. The bidder's narrative response shall not exceed 50 single-sided pages or 25 double-sided pages, with a minimum of 11 pt. font size. If the requirement specifically calls for the submission of an alternate product (e.g., Figure or Diagram) they will not be counted against the narrative response page count for the Section.

6.4.1.1 Approach to Strategic Planning

Table 6-13: Strategic Planning Methodology

Req #	Type	Requirement
6.4-2	Mandatory Scorable	Describe the bidder's proposed methodology for strategic planning on CalHEERS. Considering the requirements within SOW Section 3.15, STRATEGIC PLANNING AND MANAGEMENT, as well as SOW Section 5 PROGRAM SUPPORT REQUIREMENTS, Sections 5.15 – 5.20 pertaining to innovation for context, provide the State with an outline for and description of how the bidder's Strategic Planning will address the following areas: 1. Analysis of CalHEERS Program SDMO needs (e.g., testing automation). 2. Methods to collect, facilitate, collaborate, lead, and maintain a strong sense of buy-in with all stakeholder groups, including but not limited to: a. DHCS b. Covered California c. OTSI d. CWDA e. CalSAWS f. Counties g. CalHEERS State Team h. Health insurance carriers and insurance agents 3. Activity prioritization and scheduling based on stakeholder guidance, CalHEERS program needs, desired innovation, SDMO needs, and resource availability. 4. Processes and procedures used specifically to perform and maintain strategic plan activities, goals, and objectives. 5. Methodology for identifying and implementing technology innovation. 6. Approach to addressing User Experience considerations to ensure a consistently positive user and consumer experience (e.g., performing usability testing within the SDLC to understand how users will interact with the solution). 7. Methods to incorporate short-term and long-term planning objectives.

6.4.1.2 Approach to Policy and Legislative Impact Analysis and Change Support

Table 6-14: Policy and Legislative Impact Analysis and Change Support

Req #	Type	Requirement
6.4-3	Mandatory Scorable	The bidder shall, considering SOW Section 3.16, POLICY AND LEGISLATIVE IMPACT ANALYSIS AND CHANGE SUPPORT, describe their approach to identifying, analyzing, and addressing the impacts to CalHEERS caused by Policy and/or legislative changes, and address the following: 1. Identify the major considerations associated with legislative and/or policy changes (e.g., contract impact, system impact, organizational impact, end user impact, readiness impact, capacity planning, and implementation of services). 2. Identify the activities, major milestones and success criteria associated with conducting this in-depth analysis. 3. Describe how the bidder will communicate system and project constraints to project stakeholders. 4. Identify the risks and challenges these changes can pose to the 24-month Road Map and release schedule. 5. Describe how the bidder will help mitigate those risks and challenges and prevent release delays.

6.4.1.3 Total Cost of Ownership (TCO) Methodology

Total Cost of Ownership (TCO) is closely related to the outcome realization desires of the State (See also Section 6.4.3.5 Approach to Outcome Realization) to ensure that changes and innovation improvements to CalHEERS are a good decision and are justified for the money spent for implementation.

Table 6-15: Total Cost of Ownership (TCO) Methodology

Req #	Type	Requirement
6.4-4	Mandatory Scorable	The bidder shall describe their approach for implementing a Total Cost of Ownership (TCO) methodology on CalHEERS, and ~~its~~ <u>its</u> inclusion with outcome realization by describing how the methodology will: 1. Provide a comprehensive consolidation of total project costs beyond just one-time implementation cost considerations. 2. Incorporate outcome realization expectations through a comparison of product/project proposed business value versus actual business value. 3. Provide data for informed project decision-making regarding what product/project to invest in and not to invest in. 4. Identify and track key performance indicators (KPI) throughout implementation 5. Result in the best value products and projects for the State

6.4.1.4 Approach to Management of Hardware, Software & Cloud Hosting Services

Table 6-16: Management of Hardware, Software & Cloud Hosting Services

Req #	Type	Requirement
6.4-5	Mandatory Scorable	The bidder shall describe their approach to providing and managing Hardware, Software and Cloud Hosting Services on CalHEERS, considering SOW Section 3.3 COST/COST ESTIMATING MANAGEMENT. In addition to the approach above, bidders shall describe how the proposed process will reduce the State's management overhead, while at the same time providing the lowest cost. Finally, the bidder shall identify how their proposed process will provide complete cost transparency to the State.

6.4.2 Understanding and Approach to System Change & Enhancements

The State has chosen topics from the System Change & Enhancements challenges identified in RFP Section 4, PROPOSED SYSTEM for which the bidder is required to respond. These topics also correlate with the requirements the Bidder will perform in SOW Section 4, SYSTEM CHANGE & ENHANCEMENTS REQUIREMENTS upon contract award.

Mandatory Scorable (MS) requirements herein will apply to the Understanding and Approach Sections. It is mandatory for the bidders to provide their Understanding and Approach to each of the areas identified. The responses will then be scored by the State in accordance with the evaluation process outlined in RFP Section 9, EVALUATION.

Table 6-17: Page Count Limit for System Change & Enhancements Response

Req #	Type	Requirement
6.4-6	Mandatory Pass / Fail	The bidder shall submit their response to the Understanding and Approach to System Changes & Enhancements requirements within this Section. The bidder's narrative response shall not exceed 50 single-sided pages or 25 double-sided pages, with a minimum of 11 pt. font size. If the requirement specifically calls for the submission of an alternate product (e.g., Figure or Diagram) they will not be counted against the narrative response page count for the Section.

6.4.2.1 Approach to Timely System Changes/Enhancements

Table 6-18: Demonstrated Experience with Change Management

Req #	Type	Requirement
6.4-7	Mandatory Scorable	The bidder shall describe their experience implementing complex system changes, while maintaining system stability, on a previous project similar to CalHEERS and discuss the following: 1. Describe the similarities between the previous project and CalHEERS. 2. Describe the methods bidder used on the previous project to lead, facilitate, elicit, and document detailed requirements with agreement and buy-in from all stakeholder groups. 3. Describe the bidder's activities conducted on the previous project to ensure system changes didn't impact system stability and provided the best value solution. 4. Describe the bidder's activities conducted on the previous project to ensure system changes/enhancements carried on unimpacted by bidder innovation initiatives. 5. Describe the bidder's activities used on the previous project to

Req #	Type	Requirement
		conduct and incorporate user and consumer feedback prior and post change implementation. 6. Provide the top five (5) challenges or risks to implementing the system/service changes. 7. Describe how the bidder mitigated those challenges or risks. 8. Describe how the bidder organized change requests/enhancements within scheduled releases, moved between releases, outcomes and how the bidder measured their success on a previous project.

Table 6-19: Approach to Change Management

Req #	Type	Requirement
6.4-8	Mandatory Scorable	The bidder shall review the ~~CD-4.23~~ -1 - Change Request Process deliverable, located in the Bidders' Library, and provide their proposed approach to implementing complex system changes and enhancements for CalHEERS, provide any proposed process improvements, as well as address the following: 1. Describe the methods that will be utilized to lead, facilitate, elicit, and document detailed requirements with agreement and buy-in from all stakeholder groups (e.g., DHCS, Covered California, and CalHEERS State Team). 2. Identify how the bidder will implement fast track changes, outside of the normal change request process, required due to regulatory requirements. 3. Identify the major milestones and activities associated with the bidder's execution of major system changes / enhancements, and the related success criteria. 4. Identify how the bidder will integrate user or consumer journey and experience feedback into the bidders' approach to system changes and enhancements. 5. Provide the top five (5) challenges the bidder foresees in implementing system changes/enhancements into CalHEERS today. 6. Describe how the bidder will mitigate those challenges or risks. 7. Describe the bidder's approach to researching alternative analysis for change requests and address the following: a. Describe the bidder's process that will be utilized to identify solution options available for each change request (CR). b. Describe the bidder's process that will be utilized to calculate and communicate the analysis around alternatives considered for CR solutions or that communicate the recommended approach to ensure the State has transparency into the factors that support best value decision making.
6.4-9	Mandatory Scorable	The bidder shall review the ~~CD-4.23~~ -1 - Change Request Process, the ~~4.23.2-26~~ - Basis of Estimate (BOE) DELIVERABLE, and the ~~CD-3.3-1~~ - Cost Management Plan deliverables, provided in the Bidders' Library, and describe their approach to transparent change request planning and cost estimation, addressing the following: 1. Identify the bidder's process for estimating/calculating the full SDLC effort of a change request and how that data will be shared transparently with the State. 2. Identify your process for determining the breakout of a CR's effort between onshore and offshore resources, and how that data will be shared transparently with the State.

Table 6-20: Change Management Process Scalability

Req #	Type	Requirement
6.4-10	Mandatory Scorable	The bidder shall consider the role the State plays in Change Management today and the process the bidder proposed in Req. 6.4-6 (above) and address the following: 1. How the bidder's proposed process and staffing approach will be scalable to compensate for fluctuation in State change request demands. 2. How the bidder's proposed process is scalable to compensate for potential staffing fluctuations on the State's side of the process.

6.4.3 Understanding and Approach to Program Support Requirements

The State has chosen a subset of topics from the Program Support challenges identified in RFP Section 4, PROPOSED SYSTEM for which the bidder is required to respond. These topics also correlate with the requirements the Bidder will perform in SOW Section 5, PROGRAM SUPPORT REQUIREMENTS upon contract award. When responding to the requirements within this Section, a bidder shall consider that the State is seeking solution options and efficient processes that provide the ability to determine best value.

Additionally, the State has chosen a subset of topics on innovation for which the bidder is required to respond. These topics also correlate with the requirements the Bidder will perform in SOW Section 5, PROGRAM SUPPORT REQUIREMENTS upon contract award. When responding to the requirements within this Section, a bidder shall consider that the State is seeking services, solutions, and efficient processes that provide the ability to determine best value.

Table 6-21: Page Count Limit for Program Support Response

Req #	Type	Requirement
6.4-11	Mandatory Pass / Fail	The bidder shall submit their response to the Understanding and Approach to Program Support requirements within this Section. The bidder's narrative response shall not exceed 80 single-sided pages or 40 double-sided pages, with a minimum of 11 pt. font size. If the requirement specifically calls for the submission of an alternate product (e.g., Figure or Diagram) the alternate product will not be counted against the narrative response page count for the Section.

6.4.3.1 Approach to Program Support Planning

Table 6-22: Program Support Planning

Req #	Type	Requirement
6.4-12	Mandatory Scorable	Describe the bidder's approach to operationalizing the program support services on CalHEERS, addressing the following: 1. The proposed strategy to be utilized to identify, document, and improve the program support services. 2. The approach to establish and maintain the organizational infrastructure for the program support activities. 3. The methods to collect, facilitate, collaborate, lead, and maintain a strong sense of buy-in with CalHEERS staff and managers. 4. The development of processes, procedures, and project documentation used to perform and maintain Program Support Service activities, goals, and objectives. 5. The approach to maintain high quality program support services. 6. The approach to executing the initiation and maintenance and operations support of the innovations identified in SOW Section 5.15 - 5.20.

6.4.3.2 Approach to Operationalizing Annual Processes

Table 6-23: Operationalizing Annual Processes

Req #	Type	Requirement
6.4-13	Mandatory Scorable	The bidder shall describe their proposed methodology and approach to operationalizing the annual process identified within SOW Section 5.3, REASONABLE OPPORTUNITY PERIOD (ROP) BATCH SERVICES, providing their understanding and knowledge of requirements in SOW Section 5.3.1, ROP BATCH SERVICES, as context, describe the following: 1. Conduct forecasting of future needs and provider greater efficiency for annual changes through the use of technology and automated processes. 2. Describe how the bidder will reduce processing timeframes through the utilization of industry best practices, innovation, or enhancement while maintaining quality assurance. 3. Describe how the bidder will operationalize the annual process to reduce annual costs over time.

6.4.3.3 Approach to General Innovations

Table 6-24: World Class Innovation

Req #	Type	Requirement
6.4-14	Mandatory Scorable	The bidder shall define Innovation, their approach to applying innovation, describe how they would bring their approach to CalHEERS, including a culture of continuous improvement and applied innovation, providing examples of where the bidder successfully implemented innovations, using a similar approach to that described for CalHEERS, on previous public or private projects, including Large and Complex IT Systems.

6.4.3.4 Approach to Consumer Journey & Experience Innovations

Table 6-25: Self-Service Consumer Journey & Experience Innovations

Req #	Type	Requirement
6.4-15	Mandatory Scorable	The bidder shall identify how they will measure consumer satisfaction and optimize the consumer journeys and improve experiences, addressing the following: 1. Approach to analyze consumer journey to identify and track “top Tasks” that consumers are attempting to accomplish. 2. Approach to continually monitor the consumer experience and improve the consumer’s experience for each top task, ensuring that consumer needs are met. 3. How consumer journey will integrate with data management and AI innovations. And additionally demonstrate how the bidder successfully used a similar approach to improve the consumer journey and experience on a previous project, involving a Large and Complex IT System, specifying the specialized skillsets or experience utilized, the approach they employed, and the outcomes obtained.

Table 6-26: Assisted Consumer Journey & Experience Innovations

Req #	Type	Requirement
6.4-16	Mandatory Scorable	The bidder shall identify how they will measure and optimize our assister (an individual who assists a consumer with a Medi-Cal or Covered California application, examples include call center representatives, community health navigators, community non-profit organizations, authorized representatives, licensed insurance agents) journey and improve our assister’s experience, addressing the following: 1. Approach to analyze the assisted consumer journey to identify and track “top Tasks” that consumers are attempting to accomplish. 2. Approach to continually monitor the assister’s experience and improve their experience for each top task, ensuring that assister needs are met. 3. How consumer journey will integrate with data management and AI innovations. And additionally demonstrate how the bidder conducted similar Assister Experience activities on a previous project, involving a Large and Complex IT System, specifying the specialized skillsets or experience utilized, the approach they employed, and the outcomes obtained.

6.4.3.5 Approach to Outcome Realization

Table 6-27: Outcome Realization

Req #	Type	Requirement
6.4-17	Mandatory Scorable	The bidder shall describe their approach to incorporating Outcome Realization mechanisms into the enhancements of CalHEERS, achieved through SOW Section 4.2.1, CHANGE REQUEST PROCESS. It is expected that the bidder shall address the following: 1. The bidder's mindset, staffing approach, and culture for delivering products and services with Outcome Realization that brings the best value to the State for the cost incurred to achieve it. 2. The approach for analyzing the CalHEERS ecosystem utilizing such things as data analytics/metrics information to qualitatively evaluate against the desired outcomes of the State, including such techniques as: a. Insight (Learning from existing data/reporting) b. Hindsight (Identifying factors impacting outcomes) c. Foresight (using Data Analysis to understand/anticipate the future) 3. The strategy for identifying and utilizing such things as key performance indicators (KPI), incorporating Total Cost of Ownership (TCO), and incorporating return on investment (ROI), to the Outcome Realization picture in order to achieve beneficial and worthy outcomes. 4. The approach to establish and maintain outcome realization activities, that will: a. Provide data for improved decision making as early as possible in the SDLC. b. Improve processing efficiency c. Increase data accuracy d. Utilize seamless data exchange e. Improve user experience f. Integrate with areas on the project such as, but not limited to, Usability Research Services, Strategic Planning & Management, 24 Month Roadmap, Change Request Processes, Defect and Warranty Management. 5. Demonstrated experience where the Outcome Realization mindset was incorporated on a previous project, involving a Large and Complex IT System (e.g., health systems), specifying any specialized staffing skillsets they utilized, the approach employed, and the outcomes obtained.

Table 6-28: Data & Analytics Innovations

Req #	Type	Requirement
6.4-18	Mandatory Scorable	The bidder shall provide their approach to supporting the CalHEERS Data & Analytics Innovations, as discussed in SOW Section 5.16 – DATA USAGE & ANALYTICS INNOVATIONS, leading project innovation efforts to turn data into knowledge and action. Please address the following items within your approach: 1. Data and analytics program 1. Data platform 2. Data & Analytics development 3. Advanced analytics & data science

Req #	Type	Requirement
		The Bidders shall provide examples of successful implementations of similar data & analytics innovations, which drove decision making that lead to positive outcomes on either public or private projects, addressing the following: 1. Data strategy and outcome realization 2. Data integration and governance 3. Data products teams and operating models 4. Curating both structured and unstructured data for use with Artificial Intelligence (AI) /Machine learning (ML) solutions to provide insights

6.4.3.6 Approach to Organizational Innovations

Table 6-29: Project to Product Management

Req #	Type	Requirement
6.4-19	Mandatory Scorable	The Bidder shall define their approach to implementing a shift from a Project to Product orientation on CalHEERS. The Bidder shall address how they will transition the State to a product focus to produce improved products that better serve future consumers. Bidders should address the following: 1. The strategy for transitioning CalHEERS from project to product management 2. Identification and tracking of key product metrics 3. Proposed product strategies that align with business goals 4. Proposed CalHEERS development methodology improvements 5. Proposed CalHEERS organization structure improvements 6. Proposed improvements to CalHEERS product vision 7. Process for streamlining project documentation 8. How the project will meet State regulatory requirements 9. How sponsor Product Owners will be integrated into the product management process Additionally, the bidder shall demonstrate how they facilitated similar OCM changes, including multiple State and Federal requirements, on a previous project, involving a Large and Complex IT System, specifying any specialized staffing skillsets or experience they utilized, the approach employed, and outcomes obtained.

6.4.4 Understanding and Approach to Operations Requirements

As described in RFP Section 4, PROPOSED SYSTEM, the State seeks a Bidder that has knowledgeable and skilled Staff who can improve upon current processes and services at CalHEERS by leveraging tools, technologies, and best practices. The State is looking for improvements in services such as system maintenance, service desk, technical change management, and system usability (including consumers). When responding to the requirements within this Section, bidders shall consider that the State is seeking solution options and efficient processes that provide the ability to determine best value.

Table 6-30: Understanding and Approach to Operations Requirement

Req #	Type	Requirement
6.4-20	Mandatory Pass / Fail	The bidder shall submit their response to the Understanding and Approach to Operations requirements within this Section. The bidder's narrative response shall not exceed 30 single-sided pages or 15 double-sided pages, with a minimum of 11 pt. font size. If the requirement specifically calls for the submission of an alternate product (e.g., Figure or Diagram) they will not be counted against the narrative response page count for the Section.

6.4.4.1 Approach to Improving Service Center Services

Table 6-31: Service Center Services

Req #	Type	Requirement
6.4-21	Mandatory Scorable	The bidder shall provide their approach to providing CalHEERS with a cost-effective Service Center, as defined within SOW Section 6.19, SERVICE CENTER SERVICES, which conforms to ITIL Service Desk function best practices and address the following: 1. How the bidder's approach will increase the level of support currently provided by leveraging available technology solutions (e.g., self-services, AI, mobile applications). 2. How the bidder's service center approach will provide the best value to the State, support the ITIL Service Desk function, and will improve responsiveness to CalHEERS end users, consumers, and business/interface partners. 3. Approach to addressing the seasonal peaks and valleys of service center needs. 4. Identify a previous project, preferably an M&O project, where the bidder provided service center services with a similar approach, describing the solutions used and how customer satisfaction was improved while reducing operational costs.

6.4.4.2 Approach to Data & Analytics Services

Table 6-32: Data & Analytics Support Services

Req #	Type	Requirement
6.4-22	Mandatory Scorable	The bidder shall provide their approach to supporting the CalHEERS Data & Analytics, as discussed in SOW Section 5.13 – DATA & ANALYTICS SUPPORT SERVICES, providing support throughout the data and analytics development lifecycle. Please address the following within your approach: 1. Data and analytics program 2. Data platform 3. Data & Analytics development 4. Advanced analytics & data science The bidder shall demonstrate how they successfully implemented a similar approach, including data management strategies and techniques, to drive decisions that led to positive outcomes on either public or private projects, addressing: 1. Outcome realization 2. Data integration and governance 3. Data products teams and operating models

6.4.4.3 Approach to Operations Reporting, Data & Analytics

Table 6-33: Operations Reporting, Data & Analytics

Req #	Type	Requirement
6.4-23	Mandatory Scorable	The bidder shall provide their approach to providing CalHEERS with operations reporting, data & analytics, as defined within SOW Section 6.3 – OPERATIONS REPORTING, DATA, AND ANALYTICS, addressing the following: 1. How the bidder's approach will improve the functionality and reliability of the current CalHEERS data and analytics solution. 2. How the bidder's approach will provide the best value to the State. The bidder shall demonstrate how they successfully implemented a similar approach on previous projects where the bidder provided operations data and analytics, preferably an M&O project, describing the solutions used and how customer satisfaction was improved while reducing operational costs.

6.4.5 Understanding and Approach to Transition-In Requirements

As described in RFP Section 4, PROPOSED SYSTEM, the State is seeking a bidder that can execute, and successfully take over the maintenance and operations of CalHEERS from the current CalHEERS M&O service provider.

The Bidder must provide a Transition-In Master Plan (TIMP) and Transition Work Plan that demonstrate that the Bidder has a general understanding of the current state, identifies clear vision of their post transition operational baseline, and describes a realistic and achievable approach to transition from the current state to the Bidder's proposed post transition operational baseline. Upon contract execution, the selected Bidder is required to update the TIMP. The State approved TIMP will be the governing document for Transition In.

The bidder approach to Transition-In must describe how the bidder will collaborate with the incumbent contractor to plan for and carry out transition activities. After Contract execution and upon receipt of the updated Contractor TIMP, the incumbent contractor is required to update (within 30 calendar days) their Project Closeout Plan to conform to the Contractor's TIMP. The bidder should anticipate a planning period during which the Contractor and incumbent contractor collaborate to adjust and align their two plans. Transition planning must consider the approach to transition the CalHEERS application including CalHEERS component subsystems and all other services and functions contained within the SOW.

The bidder must submit their response to the Understanding and Approach requirements for Transition In within this Section, which correlates with SOW Section 7, TRANSITION REQUIREMENTS. When responding to the requirements within this Section, Bidders shall consider that the State is seeking solution options and efficient processes that provide the ability to determine best value.

Table 6-34: Understanding & Approach to Transition-In Requirements

Req #	Type	Requirement
6.4-24	Mandatory Pass / Fail	The bidder shall submit their response to the Understanding and Approach to Transition-In requirements within this Section. The bidder's narrative response shall not exceed 50 single-sided pages or twenty 25 double-sided pages, with a minimum of 11 pt. font size. If the requirement specifically calls for the submission of an alternate product (e.g., Figure or Diagram, Master Plan, or Work Plan) they will not be counted against the narrative response page count for the Section.

6.4.5.1 Approach to the Transition-In Master Plan (TIMP)

Table 6-35: Transition-In Master Plan (TIMP) Requirements

Req #	Type	Requirement
6.4-25	Mandatory Scorable	The bidder shall submit with their response a Transition-In Master Plan (TIMP). Considering SOW Section 7, TRANSITION REQUIREMENTS, requirements 7.1.1-01 through 7.1.1-33 for context, the bidder shall define within the TIMP the bidder's approach to transitioning all CalHEERS components and SDMO responsibilities, as defined within this RFP, and the documents in the Bidders' Library. The bidder's approach shall contain the following: 1. Description of the overall transition approach and process the bidder will use to transition all components identified in the four (4) Transition Areas detailed within RFP SOW Sections 3, 4, 5 and 6. The transition approach shall include the bidder activities to plan, execute, verify, cutover, implement initial operations and conduct the final review (refer to SOW Section 7.1.9, TIP1 SERVICE AND FUNCTION MIGRATION), along with assumptions and constraints that are inherent with the proposed approach. 2. Description of the bidder's rationale for selecting this approach. 3. The bidder's planned transition activities and tasks that include the planning, implementing, executing, tracking, and reporting for the overall transition effort as well as for each transition component. 4. Roles and responsibilities for implementing transition activities to include those for the State and incumbent contractor. For context in developing a response, 20 State subject matter experts from the DHCS and Covered California Program and State Project Office are available for fifteen percent (15%) of their working time for issue resolution and coordination of state and county activities required to support the transition. 5. Description of how the bidder will collaborate with the incumbent contractor to plan for and carry out transition activities as well as what the bidder requires of the incumbent contractor regarding knowledge transfer, data/information, and support for mitigating risk. 6. Identification of the steps and activities the bidder will take to confirm their Key Staff are ready for assumption of Operations. 7. The bidder's approach to transition training and knowledge transfer to include: a. What knowledge transfer activities the Contractor requires to obtain knowledge from the incumbent Contractor; and b. What training the Contractor will provide State staff and CalHEERS users related to transition activities/tools and any changes to how services and functionality will be delivered. 8. The bidder's approach to conduct transition component readiness reviews to obtain approval for cutover that includes stakeholder involvement.

6.4.5.2 Approach to the Transition-In Schedule

Table 6-36: Transition-In Microsoft Project (MS Project) Plan Requirements

Req #	Type	Requirement
6.4-26	Mandatory Scorable	The bidder shall develop and submit with their response a Microsoft Project

Req #	Type	Requirement
		2019 or later “.mpp” file containing an intermediate transition work plan, showing schedule activity durations, dependencies and milestones for the transition-in and transformation period. The work plan shall be in accordance with SOW Section 7.1.7, TIP1 WORK PLAN (SCHEDULE), and SOW Section 7.2.4, TIP2 PROJECT WORK PLAN UPDATES, and consist of the following: 1. A CalHEERS SDMO Contract Execution software milestone task with a finish date equal to the “Contract Execution” date specified in RFP SECTION 1.4, KEY ACTION DATES AND TIMES. 2. A CalHEERS SDMO Migration Completed software milestone task with a finish date defined that will support bidder approach to transition. 3. A subproject summary task (WBS Outline Structure level 1) for each SOW Section 3, 4, 5, 6, 7 and 8. 4. Milestone summary tasks (WBS Outline Structure level 2) corresponding to the components of SOW Sections 3.1 – 3.17 and placed subordinate to the SOW Section 3 subproject summary task. 5. Milestone summary tasks (WBS Outline Structure level 2) corresponding to the components of SOW Sections 4.1 – 4.9 and placed subordinate to the SOW Section 4 subproject summary task. 6. Milestone summary tasks (WBS Outline Structure level 2) corresponding to the components of SOW Sections 5.1 – 5.20 and placed subordinate to the SOW Section 5 subproject summary task. 7. Milestone summary tasks (WBS Outline Structure level 2) corresponding to the components of SOW Sections 6.1 – 6.20 and placed subordinate to the SOW Section 6 subproject summary task. 8. Milestone summary task (WBS Outline Structure level 2) corresponding to the component of SOW Section 7.1 – 7.4 and placed subordinate to the SOW Section 7 subproject summary task. 9. Milestone summary tasks (WBS Outline Structure level 2) corresponding to the deliverable groupings identified in SOW Sections: 8.7, 8.8, 8.9, 8.10, 8.11, and 8.13 and placed subordinate to the SOW Section 8 subproject summary task. 10. Deliverable summary tasks (WBS Outline Structure level 3) for each SOW Section 3, 4, 5, 6, 7.1 and 7.2 milestone summary task representing the planning, execution, assessment, cutover, initial operations and final review required to migrate the component services, functions and maintenance and operations responsibilities to the Contractor, followed by transformation. 11. Deliverable summary tasks (WBS Outline Structure level 3) for each deliverable grouping milestone summary task, representing each deliverable listed in SOW Sections: 8.7, 8.8, 8.9, 8.10, 8.11, and 8.13. 12. Activity (WBS Outline Structure level 4) summary tasks for all deliverable summary tasks. 13. Tasks (WBS Outline Structure level 5) for all activity summary tasks, representing the Contractor, state, and incumbent contractor work required to complete the activity. 14. Task durations (in whole Days or percentage of a Day),

Req #	Type	Requirement
		dependencies (finish-to-start, start-to-start or finish-to-finish) and resource assignments (Contractor, state, and incumbent Contractor resources) for all tasks. 15. Milestones, deliverables, activities and tasks with start and finish dates that are consistent with high-level milestones included in the Transition-In Master Plan (TIMP). 16. Project critical path comprising all tasks with total slack of three (3) Business days or less including tasks from component migration planning, execution, assessment, cutover, initial operations and final review and the CALHEERS SDMO Migration Completed software milestone task. 17. Summary task names that are unique and descriptive. 18. Task names that are unique and descriptive and begin with the abbreviation of the organization primarily responsible for completing the task.
6.4-27	Mandatory Scorable	The bidder shall provide supporting narrative in relation to the intermediate transition-in work plan that describes the following: 1. Why the proposed schedule is realistic and achievable. 2. How the schedule minimizes transition risk (e.g., number of dependencies between transition components, phased transition, minimal bottlenecks as measured by State resources demands, use of checkpoints, handling delays). 3. How the schedule plans out transformation.

6.4.5.3 Approach to Minimizing Transition-In Risks

Table 6-37: Approach to Minimize Transition-In Risks

Req #	Type	Requirement
6.4-28	Mandatory Scorable	The bidder shall describe their approach to minimizing the transition-in risks associated with the following Statement of Work (SOW) sections: 1. SOW Section 3 – Project Management Requirements 2. SOW Section 4 – System Change & Enhancements Requirements 3. SOW Section 5 –Program Support Requirements 4. SOW Section 6 – Operations Requirements For each of the SOW sections above, the bidder shall: • Identify the associated risks, the mitigation approaches with rationale for their selection to ensure no disruption to CalHEERS services • Identify what the bidder requires of the incumbent contractor regarding knowledge transfer, data/information support and staff. • Identify what steps the bidder will take to ensure key staff are ready to assume operational control at the end of the Transition-In period.

6.5 MANDATORY/OPTIONAL REQUIREMENTS

The bidder's narrative response to the requirements within this section shall not exceed thirty-two (32) single-sided pages or sixteen (16) double-sided pages, with a minimum of 11 pt. font size. If the requirement specifically calls for the submission of an alternate product (e.g., Resource Staffing Chart or organizational chart) they will not be counted against the narrative response page count for the section.

The requirements within this section are designated as Mandatory Optional (M/O), which means that it is “mandatory” for the bidder to respond to the requirement and the response will receive a score based on the scoring criteria defined in RFP Section 9, EVALUATION, however, it is “optional” whether the State will implement the proposed solution.

Table 6-38: Understanding & Approach Mandatory/Optional Requirements

Req #	Type	Requirement
6.5-1	Mandatory Pass / Fail	The bidder's narrative response to the Mandatory/Optional Requirements within this section shall not exceed 32 single-sided pages or 16 double-sided pages, with a minimum of 11 pt. font size. If the requirement specifically calls for the submission of an alternate product (e.g., Resource Staffing Chart or organizational chart) they will not be counted against the narrative response page count for the section.

6.5.1 Effort Driven Schedule Management

Table 6-39: Schedule Management Transformation Project (Mandatory/Optional)

Req #	Type	Requirement
6.5-2	Mandatory/ Optional	The bidder shall develop and provide the State with an analysis and cost estimate associated with implementing an effort-driven scheduling solution on CalHEERS. Bidders shall provide, within their response to each identified section, the following: 1. A detailed description of the proposed solution and the benefits it will provide to CalHEERS, such as resource balancing, more accurate schedules, etc. 1. A staffing plan for the effort 2. A schedule for solution development/implementation 3. The set of pre and post solution implementation metrics utilized to track the improved efficiency 4. A detailed cost estimate for each solution proposed including ongoing maintenance of the solution The State will consider the Bidder's proposed solutions and associated costs for inclusion in the Contract.

6.5.2 Operationalized Service Enhancements

Table 6-40: Operationalized Service Enhancements (Mandatory/Optional)

Req #	Type	Requirement
6.5-3	Mandatory/ Optional	The bidder shall develop and provide the State with an analysis and cost estimate associated with the implementing solution enhancements, where applicable, for each of the Operationalized Services identified in SOW 5 – PROGRAM SUPPORT REQUIREMENTS, Sections 5.1 through 5.14. Bidders shall provide, within their response to each identified section, the following: 1. A detailed description of the proposed solution and how it will make the service more efficient 2. A staffing plan for the effort 3. A schedule for solution development/implementation 4. The set of pre and post solution implementation metrics utilized to track the improved efficiency 5. A detailed cost estimate for each solution proposed including ongoing maintenance

Req #	Type	Requirement
		The State will consider the Bidder's proposed solutions and associated costs for inclusion in the Contract.

6.6 COST REQUIREMENTS

Table 6-41: Cost Requirements

Req #	Type	Requirement
6.6-1	Mandatory Pass / Fail	Bidders shall develop and submit Appendix D, COST WORKBOOK, in accordance with the instructions provided within RFP Section 7, COST, as well as, within Appendix D, COST WORKBOOK, and in the format and packaging defined within RFP Section 8, PROPOSAL FORMAT.

Section 7

Cost

SECTION 7 – COST
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7 COST

7.1 INTRODUCTION

Cost, from an evaluation perspective, is weighted at 35% of the total points for this solicitation. The evaluation of cost will be conducted based on the methodology and processes identified within RFP Section 9, EVALUATION.

The bidder must fill out the Appendix D, COST WORKBOOK, entering in all project costs, in accordance with the instructions provided within the RFP and cost workbook, to and subsequently determine the total proposal amount and the total proposed Contract amount. The bidder must not change any formulas in Appendix D, COST WORKBOOK. Proposed costs for all line items are all inclusive, thereby including the cost of any and all services required in this solicitation.

The Office of Technology and Solutions Integration (OTSI) requires that each bidder's cost be in the format outlined in this section. Bidders are advised that failure to comply with the instructions listed in this section, such as submission of incomplete proposals or use of alternative pricing structures or different formats than the one requested, may result in the proposal being deemed nonresponsive, leading to the bidder being disqualified.

7.2 COST WORKSHEETS

The cost worksheets list all cost items required to maintain and operate the proposed services. Cells highlighted in Yellow, indicate the cells which the bidder may enter information.

The bidder is required to complete all of the cost worksheets, even if there are no costs for the item indicated on the worksheets. In these instances the bidder must indicate the cost as a zero (\$0.00). In addition, if any character other than a numeral is used (e.g., a dash), the State will assume the cost of the item to be zero (\$0.00). All other fields must not be modified. If a cost worksheet is modified or the State determines that the bidder has not provided all the required cost data, the State may deem the proposal nonresponsive and disqualify the bidder.

The State has populated some of the cost workbook cells with formulas, however it is the responsibility of the bidder to ensure the worksheets accurately convey the bidders cost data. If the bidder questions whether a formula or calculation is working properly within the cost workbook, the bidder may request clarification by submitting questions via our SharePoint site. At the sole discretion of the State, questions submitted beyond the last day to submit questions may not be answered.

The State will not assume responsibility for any cost figures that do not calculate properly.

Below is a list of the individual cost worksheets:

- Appendix D-1 TOTAL COST SUMMARY
- Appendix D-2 SDMO HARDWARE COSTS
- Appendix D-3 SDMO SOFTWARE COSTS AND SERVICE CENTER SOFTWARE COSTS
- Appendix D-4 CLOUD HOSTING DATA CENTER SERVICES COSTS AND SERVICE CENTER CLOUD HOSTING DATA CENTER SERVICES COSTS
- Appendix D-5 SDMO FIXED PRICE ONSHORE COSTS
- Appendix D-5.1 SDMO FIXED PRICE ONSHORE COSTS (YEAR 1)
- Appendix D-5.2 SDMO FIXED PRICE ONSHORE-PROJECT SUPPORT SERVICES COSTS
- Appendix D-5.3 SDMO FIXED PRICE ONSHORE-PROJECT SUPPORT SERVICES COSTS (YEAR 1)
- Appendix D-5.4 SDMO FIXED PRICE OFFSHORE COSTS
- Appendix D-5.5 SDMO FIXED PRICE OFFSHORE COSTS (YEAR 1)
- Appendix D-5.6 SDMO FIXED PRICE OFFSHORE-PROJECT SUPPORT SERVICES COSTS
- Appendix D-5.7 SDMO FIXED PRICE OFFSHORE-PROJECT SUPPORT SERVICES COSTS (YEAR 1)
- Appendix D-6 TRANSACTION-BASED COSTS
- Appendix D-7 ONSHORE SYSTEM CHANGE COSTS
- Appendix D-7.1 ONSHORE SYSTEM CHANGE COSTS RATES
- Appendix D-7.2 OFFSHORE SYSTEM CHANGE COSTS
- Appendix D-7.3 OFFSHORE SYSTEM CHANGE COSTS RATES
- Appendix D-8. TRANSITION-IN COSTS
- Appendix D-8.1 TRANSITION-IN PAYMENT
- Appendix D-8.2 TRANSITION-OUT COSTS
- Appendix D-8.3 TRANSITION-OUT PAYMENT

7.3 ~~APPENDIX D-8.3 TRANSITION-OUT PAYMENT~~ COST DETAIL FORMAT AND REQUIREMENTS

The bidder must complete Appendix D, COST WORKBOOK, and submit with the bidder's Proposal in accordance with the format and instructions identified in RFP Section 8, PROPOSAL FORMAT.

7.4 COST OPENING

No public cost opening is planned for this solicitation.

7.5 COST EVALUATION

Cost proposals will be evaluated and scored in accordance with the process set forth in RFP Section 9, EVALUATION.

Section 8 Proposal Format

SECTION 8 – PROPOSAL FORMAT

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8 PROPOSAL FORMAT

This section of the Request for Proposal (RFP) presents information on the format the bidder's response needs to adhere to. Refer to RFP Section 2.3.4, SUBMISSION OF PROPOSALS, for additional information. Refer to RFP Section 6.4, UNDERSTANDING AND APPROACH REQUIREMENTS, for specific page count limits.

8.1 INTRODUCTION

These instructions prescribe the mandatory format of the proposal and approach for the development and presentation of proposal data. Format instructions must be adhered to, all requirements and questions in the RFP must be responded to, and all requested data must be supplied.

8.2 PROPOSAL CONTENT

The complete Proposal must be submitted in the number of copies indicated and include the items identified in the subsections below. Please submit the volumes for the Proposal as follows:

Volume Title
Volume I – Response to Administrative and Bidder Requirements
Volume II – Completed Contract
Volume III – Cost Data

For each volume, the bidder must submit one (1) hard copy in a three-ring binder and one (1) electronic copy in PDF format via email (see RFP Section 2.3.4, SUBMISSION OF PROPOSALS for the email address). Pertaining to the binder, the one (1) copy must be marked as "Master".

8.3 VOLUME I – RESPONSE TO ADMINISTRATIVE AND BIDDER REQUIREMENTS

The bidder must ensure that Volume I includes the following:

- Volume I must contain all responses to the RFP Section 5, ADMINISTRATIVE REQUIREMENTS
- Volume I must contain all responses to the RFP Section 6, BIDDER REQUIREMENTS.
- Volume I must include all completed Appendix B forms and questionnaires, as identified within Appendix B-2, PROPOSAL SUBMISSION CHECKLIST.
- Volume I shall be organized in accordance with the structure below and include the contents defined within the PROPOSAL SUBMISSION CHECKLIST FORM found in Appendix B.
- No cost data shall be submitted within Volume I.

8.3.1 Table of Contents

Volume I must contain a Table of Contents identifying information to the fourth outline or heading level to include page numbers. All tables, exhibits, and forms must also be listed in a Table of Tables and/or Table of Figures.

8.3.2 Section 1 – Cover Letter and Executive Summary

The Cover Letter and Executive Summary section must contain the following:

- Section 1.1 – Cover Letter (original signed)

- **Section 1.2 – Executive Summary**

The Cover Letter and Executive Summary must be developed in accordance with the requirements presented in RFP Section 5.13.1, COVER LETTER AND EXECUTIVE SUMMARY.

No cost data shall be included in the Cover Letter or Executive Summary.

The primary objective of the Executive Summary is to provide an overview of the key points in the proposal for the State. The Executive Summary must include salient and significant points and minimize the use of highly technical terms.

8.3.3 Section 2 – Administrative Response

This section of the bidder's proposal must include the following forms (in the order shown below), which are found in Appendix B, as well as the required Letter of Bondability.

- Section 2.1 - Appendix B-6, RESPONSE TO ADMINISTRATIVE REQUIREMENTS FORM
- Section 2.2 - Appendix B-7, WORKERS' COMPENSATION CERTIFICATION FORM
- Section 2.3 - Appendix B-8, GSPD-05-105 BIDDER DECLARATION FORM
- Section 2.4 - Appendix B-9, STD 843 DISABLED VETERAN BUSINESS ENTERPRISE (DVBE) DECLARATIONS FORM
- Section 2.5 - Appendix B-10, BIDDING PREFERENCES AND INCENTIVES FORM
- Section 2.6 - Appendix B-11, COMMERCIALLY USEFUL FUNCTION (CUF) CERTIFICATION FORM
- Section 2.7 - Appendix B-12, SECRETARY OF STATE CERTIFICATION
- Section 2.8 - Appendix B-13, SELLER'S PERMIT
- Section 2.9 - Appendix B-14, PAYEE DATA RECORD
- Section 2.10 - Appendix B-15, IRAN CONTRACTING ACT OF 2010
- Section 2.11 - Appendix B-16, FEDERAL DEBARMENT, SUSPENSION, INELIGIBILITY AND VOLUNTARY EXCLUSION – CERTIFICATION FORM
- Section 2.12 - Appendix B-17, CALIFORNIA CIVIL RIGHTS LAWS CERTIFICATION
- Section 2.13 – LETTER OF BONDABILITY
- Section 2.14 – Appendix B-24, CALHEERS ARTIFICIAL INTELLIGENCE RISK ASSESSMENT FORM

8.3.4 Section 3 – Bidder Response

This section of the bidder's proposal must contain the bidder's completed Appendix B-18, STATEMENT OF COMPLIANCE WITH SOW REQUIREMENTS, and the bidders' mandatory responses to RFP Section 6, BIDDER REQUIREMENTS. The bidder must, where applicable, reference the requirement by number, to which it is responding and then provide its response.

- Section 3.1 – Appendix B-18, STATEMENT OF COMPLIANCE WITH SOW REQUIREMENTS FORM
- Section 3.2 – Appendix B-19, BIDDER (COMPANY) QUALIFICATIONS INSTRUCTIONS & FORM(s)
 - o Section 3.2.1 – Appendix B-20, BIDDER (COMPANY) REFERENCE FORMs
- Section 3.3 – Appendix B-22, KEY STAFF QUALIFICATIONS FORM(s), including required certifications.
 - o Section 3.3.1 – Appendix B-23, STAFF REFERENCE FORM(s)

- Section 3.4 – RESPONSE TO UNDERSTANDING AND APPROACH TO PROJECT MANAGEMENT REQUIREMENTS
 - o Section 3.4.1 – RESPONSE TO APPROACH TO STRATEGIC PLANNING
 - Section 3.4.1.1 – Requirement 6.4-2
 - o Section 3.4.2 – RESPONSE TO APPROACH TO POLICY AND LEGISLATIVE IMPACT ANALYSIS AND CHANGE SUPPORT
 - Section 3.4.2.1 – Requirement 6.4-3
 - o Section 3.4.3 – RESPONSE TO TOTAL COST OF OWNERSHIP (TCO) METHODOLOGY
 - Section 3.4.3.1 – Requirement 6.4-4
 - o Section 3.4.4 – RESPONSE TO MANAGEMENT OF HARDWARE, SOFTWARE & CLOUD HOSTING SERVICES
 - Section 3.4.4.1 – Requirement 6.4-5
- Section 3.5 – RESPONSE TO UNDERSTANDING AND APPROACH TO SYSTEM CHANGE & ENHANCEMENTS REQUIREMENTS
 - o Section 3.5.1 – RESPONSE TO APPROACH TO TIMELY SYSTEM CHANGES & ENHANCEMENTS
 - Section 3.5.1.1 – Requirement 6.4-7
 - Section 3.5.1.2 – Requirement 6.4-8
 - Section 3.5.1.3 – Requirement 6.4-9
 - Section 3.5.1.4 – Requirement 6.4-10
- Section 3.6 – RESPONSE TO UNDERSTANDING AND APPROACH TO OPERATIONALIZED PROGRAM SUPPORT REQUIREMENTS
 - o Section 3.6.1 – RESPONSE TO APPROACH TO PROGRAM SUPPORT PLANNING
 - Section 3.6.1.1 – Requirement 6.4-12
 - o Section 3.6.2 – RESPONSE TO APPROACH TO OPERATIONALIZING ANNUAL PROCESSES
 - Section 3.6.2.1 – Requirement 6.4-13
 - o Section 3.6.3 – RESPONSE TO APPROACH TO GENERAL INNOVATIONS
 - Section 3.6.3.1 – Requirement 6.4-14
 - o Section 3.6.4 – RESPONSE TO APPROACH TO CONSUMER JOURNEY & EXPERIENCE INNOVATIONS
 - Section 3.6.4.1 – Requirement 6.4-15
 - Section 3.6.4.2 – Requirement 6.4-16
 - o Section 3.6.5 – RESPONSE TO APPROACH TO OUTCOME REALIZATION
 - Section 3.6.5.1 – Requirement 6.4-17
 - Section 3.6.5.2 – Requirement 6.4-18
 - o Section 3.6.6 – RESPONSE TO APPROACH TO ORGANIZATIONAL INNOVATIONS
 - Section 3.6.6.1 – Requirement 6.4-19
- Section 3.7 – RESPONSE TO APPROACH TO UNDERSTANDING AND APPROACH TO OPERATIONS REQUIREMENTS
 - o Section 3.7.1 – RESPONSE TO APPROACH TO IMPROVING SERVICE CENTER SERVICES
 - Section 3.7.1.1 – Requirement 6.4-21
 - o Section 3.7.2 – RESPONSE TO APPROACH TO DATA & ANALYTICS SERVICES
 - Section 3.7.2.1 – Requirement 6.4-22

- o Section 3.7.3 – RESPONSE TO APPROACH TO OPERATIONS REPORTING, DATA & ANALYTICS
 - Section 3.7.3.1 – Requirement 6.4-23
- Section 3.8 – RESPONSE TO UNDERSTANDING AND APPROACH TO TRANSITION-IN REQUIREMENTS
 - o Section 3.8.1 – RESPONSE TO APPROACH TO THE TRANSITION-IN MASTER PLAN (TIMP)
 - Section 3.8.1.1 – Requirement 6.4-25
 - o Section 3.8.2 – RESPONSE TO APPROACH TO THE TRANSITION-IN SCHEDULE
 - Section 3.8.2.1 – Requirement 6.4-26
 - Section 3.8.2.2 – Requirement 6.4-27
 - o Section 3.8.3 – RESPONSE TO APPROACH TO MINIMIZING TRANSITION-IN RISKS
 - Section 3.8.3.1 – Requirement 6.4-28
- Section 3.9 – RESPONSE TO UNDERSTANDING AND APPROACH TO MANADATORY/OPTIONAL REQUIREMENTS
 - o Section 3.9.1 – RESPONSE TO APPROACH TO EFFORT DRIVEN SCHEDULE MANAGEMENT
 - Section 3.9.1.1 – Requirement 6.5-2
 - o Section 3.9.2 – RESPONSE TO APPROACH TO OPERATIONALIZED SERVICE ENHANCEMENTS
 - Section 3.9.2.1 – Requirement 6.5-3

8.4 VOLUME II – COMPLETED CONTRACT

Volume II must be composed in the following order:

- Section 1 – Appendix A, STD 213 IT STANDARD AGREEMENT
- Section 2 – Appendix A-1, GENERAL PROVISIONS – INFORMATION TECHNOLOGY
- Section 3 – Appendix A-2, SPECIAL PROVISIONS FOR CALHEERS SDMO CONTRACT #73040873
- Section 4 – Appendix A-3, SDMO ADDITIONAL FEDERAL PROVISIONS
- Section 5 – Appendix A-4, STATEMENT OF WORK

8.5 VOLUME III – COST DATA

The Cost Data component of the bidder's proposal must be submitted in Volume III, containing both a completed Appendix D, COST WORKBOOK and any necessary Additional Cost Data documentation.

Volume III must be composed in the following order:

- Section 1 – Completed Appendix D, COST WORKBOOK.
- Section 2 – Additional Cost Data
 - o [Subsection 2.1 – Cost Details related to the Cost Workbook](#)
 - o [Subsection 2.2 – Cost Details related to U&A Requirements 6.5-2 & 6.5-3](#)

8.6 ADDITIONAL FORMAT AND SUBMISSION INSTRUCTIONS

It is the bidder's responsibility to ensure its proposal is submitted in a manner that enables the Evaluation Team to easily locate all response descriptions and exhibits for each requirement of this RFP.

8.6.1 Documentation Formatting Standards

The following general format guidelines apply to bidder's physical and electronic proposal:

- Ensure the Proposal is marked with "CalHEERS System Development, Maintenance and Operations (OTSI CalHEERS SDMO RFP # 73040873)."
- Include the bidder's name on and in the proposal.
- Page number and total number of pages.
- Page numbering should be located in the same page position, listed by Proposal section, and include reference to the total number of pages for that section (e.g., Section 1, Page 1 of 10).
- Bidders shall use of Arial, eleven (11) point font for response body text and Arial, ten (10) point font for table text.
- Figure and exhibit font size shall be eight (8) point or larger.
- Margins shall be one (1) inch on the top, bottom, left, and right.
- Pages, other than foldouts, shall not exceed 8 ½ by 11 inches.
- Foldouts shall be limited to a size no larger than 11 by 17 inches.
- If presenting demographic data as examples, generic names and addresses must be used (e.g., 123 Standard Avenue, Any town, USA).
- Figures, tables, and charts shall be assigned index numbers, be referenced by these numbers in the content, and in the Table of Figures and Table of Tables. Figures, tables, and charts should be placed as close to text references as possible.

8.6.2 Physical Proposal Binding and Tabs

All proposals must be submitted using three-ring binders to protect the document.

Each Volume must be delivered in its own binder with tabs clearly marking the delineation between Volume sections.

For Volume I, Section 3, BIDDER RESPONSE, bidders should provide tabs down to the subsection level (e.g., 3.1– Appendix B-18).

8.6.3 Electronic Proposal Format and Searchability

All electronic proposals must be submitted as [detailed below](#):

- [Volume I – Response to Administrative and Bidder Requirements](#)
 - o [Searchable PDFs with bookmarks for each delineating each Volume section and each Table of Contents \(TOC\) item. "Image-only" PDFs will not be accepted.](#)
 - o [MS Word file](#)
- [Volume II – Completed Contract](#)
 - o [Searchable PDF with bookmarks delineating each section and each TOC item. "Image-only" PDFs will not be accepted.](#)
 - o [MS Word file](#)
- [Volume III – Cost Data](#)
 - o [Searchable PDF with bookmarks delineating each section and each TOC item. "Image-only" PDFs will not be accepted.](#)
 - o [MS Word file of the Section 2 – Additional Cost Data](#)

- o ~~“Image-only” PDFs will not be accepted.~~ MS Excel file of the complete Appendix D, Cost Workbook

8.6.4 Master Copy

The bidder must provide one (1) printed master hardcopy of each of its volumes, clearly labeled “Master”.

The Master must include original signatures on any included cover letters and forms.

The bidder must ensure that no cost information of any type is included in Volume I and II. The inclusion of cost in any fashion or format in any place other than Volume III, Cost Data, may result in the proposal being deemed nonresponsive.

In the event that there are any discrepancies between the “Master” or any “Copy” of the same document or between a printed copy and the electronic copy, the printed “Master” will be used as the authoritative version to resolve such discrepancies.

8.6.5 Confidential or Proprietary Information

Per RFP Section 2.3.3, CONFIDENTIALITY, the bidder’s proposal must not include information marked as confidential or proprietary in order to assure it is not excluded from consideration.

Any documentation or other artifacts provided in its proposal shall be subject to the California Public Records Act (Government Code § 7920, et seq.).

8.6.6 Packaging and Labeling

All documents for a proposal must be submitted at the same time: the hard copy must be submitted as one package and the electronic copy must be submitted as one email or a series of emails (see RFP Section 2.3.4.6, DELIVERY OF PROPOSALS EMAIL SUBMISSIONS for further information)

Bidders must provide their proposal documents within the same package (box or boxes).

The overall package shall be sealed, labeled, and properly identified as follows:

- Office of Technology & Solutions Integration (OTSI) Procurement Official Name
- OTSI Address
- The bidder’s company name and address
- The RFP number “OTSI CalHEERS SDMO RFP # 73040873”
- Box “# of #”, if the submission includes more than one (1) box.

Each copy of the proposal binder must be plainly marked with:

- The bidder’s company name
- The RFP number “OTSI CalHEERS RFP # 73040873”
- The Volume number and title as appropriate:
 - o Volume I – Response to Administrative and Bidder Requirements
 - o Volume II – Completed Contract
 - o Volume III – Cost Data
- Identification of the “Master” copy

8.6.7 Date, Time and Address of Submittals

The bidders must mail or deliver proposals to the Procurement Official listed in RFP Section 1.5, PROCUREMENT OFFICIAL AND CONTACT INFORMATION.

If bidders choose to mail their Proposals, it is suggested that bidders use certified or registered mail and request a return receipt, as delivery via mail is at the bidder's risk of untimely delivery or lost mail and is burdened by the bidder.

Proposals, both electronic and physical, must be postmarked or received no later than the date and time specified in RFP Section 1.4, KEY ACTION DATES AND TIMES, regardless of submission method.

A Proposal not received by the date and time specified in RFP Section 1.4, KEY ACTION DATES AND TIMES shall be rejected.

Section 9 Evaluation

SECTION 9 – EVALUATION

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9.2 QUALIFICATION STEP (PASS / FAIL)

All of the following elements in the Qualification Step are pass/fail.

9.2.1 Administrative Compliance

9.2.1.1 Receipt of Proposals

All proposals received by the date and time specified in RFP Section 1.4, KEY ACTION DATES AND TIMES, will be acknowledged as having been received on time. Each proposal will be date and time marked as it is received and verified that it was submitted under an appropriate cover, sealed, properly identified, and is in conformance with the submittal requirements of RFP Section 8.6.6, PACKAGING AND LABELING. Any unsealed proposals will be rejected, causing the bidder to be disqualified.

9.2.1.2 Compliance Check

The State will check each proposal to determine its compliance to the RFP Section 8, PROPOSAL FORMAT, and RFP Section 2, RULES GOVERNING COMPETITION. If a proposal fails to meet a RFP requirement, the State will determine if the deviation is material as defined in RFP Section 2, RULES GOVERNING COMPETITION. A material deviation may be cause for rejection of the proposal, and disqualification of the bidder. A deviation deemed immaterial will be examined to determine if the deviation will be accepted. If accepted, the proposal will be processed as if no deviation had occurred.

9.2.1.3 Evaluation of Bidder Responses to Administrative Requirements

The State will evaluate all proposals against the administrative requirements, to ensure that the bidders responded to all the administrative requirements specified in RFP Section 5, ADMINISTRATIVE REQUIREMENTS. Please note that any points related to preferences or incentives will be applied in Section 9.5, APPLICATION OF PREFERENCES & INCENTIVES AND FINAL SCORE DETERMINATION. The requirements that are reviewed within the administrative evaluation are categorized as follows:

- Mandatory (M) – The bidder must indicate its willingness and ability to satisfy the mandatory requirement, or the proposal will be deemed nonresponsive, and the bidder disqualified. These requirements are Pass / Fail and will not be scored.
- Optional (O) – The bidder may optionally respond (if applicable) to any administrative requirements that are labeled Optional (O) in RFP Section 5, ADMINISTRATIVE REQUIREMENTS.

The State will review bidder responses to Appendix B-6, RESPONSE TO ADMINISTRATIVE REQUIREMENTS FORM. The bidder must indicate its willingness and ability to satisfy all of the administrative requirements A1 through A52, as specified in RFP Section 5, ADMINISTRATIVE REQUIREMENTS, by responding with “Yes” in the “Yes/No” column of the form.

- Indicating “Yes” the bidder affirms its understanding of the requirement and agree to comply with it.
- Indicating “No” to any of the mandatory administrative requirements in the bidder’s proposal may result in the proposal being deemed nonresponsive and lead to the disqualification of the bidder.

The State will designate each administrative requirement with either a Pass or a Fail.

9.2.2 Evaluation of Bidder Responses to Bidder (Company) Qualification Requirements

The Evaluation Team will review the Appendix B-19, BIDDER (COMPANY) QUALIFICATIONS INSTRUCTIONS & FORM, submitted with the bidder's proposal, and determine if the bidder has specified the experience necessary to meet each Company Mandatory Qualification (MQ) Requirements as specified within RFP Section 6.2.1, BIDDER (COMPANY) QUALIFICATION REQUIREMENTS.

The State will designate each Company MQ Requirement with either a Pass or a Fail. If the bidder is designated a Fail for any of the Company MQ Requirements, the proposal will be deemed to have failed the Qualification Step and the bidder will be disqualified.

9.2.3 Evaluation of Bidder (Company) Reference Forms

The Evaluation Team will review all of the Appendix B-20, BIDDER (COMPANY) REFERENCE FORMs, submitted within the bidder's proposal, as well as conduct references checks in order to determine if the information submitted on the bidder's Appendix B-19, BIDDER (COMPANY) QUALIFICATIONS INSTRUCTIONS & FORM, is accurate, as well as identify if the bidder performed poorly on any of the referenced projects.

The State may contact references listed on the Appendix B-19, BIDDER (COMPANY) QUALIFICATIONS INSTRUCTIONS & FORM, to verify the information provided by the bidder. The Procurement Official will make two (2) attempts via e-mail to validate the experience using the information provided in the submitted forms. If no response is received after the second attempt, the Procurement Official may contact the bidder and request the bidder to assist in having the reference respond. If the bidder is not able to provide a reference response, the State will determine if the deviation is material. If a deviation is determined to be material, the proposal will be considered nonresponsive, and the bidder will be disqualified.

Appendix B-20, BIDDER (COMPANY) REFERENCE FORMs will be evaluated using the ratings provided from the references. The evaluation criteria is shown below:

Table 9-1: Bidder (Company) Reference Evaluation Criteria

Bidder Reference Response	Description	Evaluation Criteria
Excellent	The company's performance was above average during this engagement.	Pass
Good	The company's performance was average during this engagement.	Pass
Poor	The company's performance was below average during this engagement.	Fail
No Value	The company's performance was unsatisfactory during this engagement.	Fail

Using the above criteria, the State will designate each bidder (company) reference with either a Pass or a Fail. A bidder who does not return all required reference forms, is found to have conflicting information in Appendix B-19, BIDDER (COMPANY) QUALIFICATIONS INSTRUCTIONS & FORM, or obtained a reference score of Poor or No Value, will have its proposal deemed to Fail the Qualification Step and will be disqualified.

9.2.4 Evaluation of Bidder Key Staff Requirements

The Evaluation Team will review the submitted Appendix B-22, KEY STAFF QUALIFICATIONS FORM to ensure that all proposed Key Staff received, at a minimum, a "meets" designation related to each of the Key Staff Mandatory Qualification requirements identified within RFP Section 6.3.1,

BIDDER KEY STAFF QUALIFICATION REQUIREMENTS.

The State will designate each Key Staff Mandatory Qualification requirement with either a Pass or a Fail. If the bidder is designated a Fail for any of the Key Staff Mandatory Qualification requirements, the proposal will be deemed to have failed the Qualification Step and the bidder will be disqualified.

9.2.5 Evaluation of Bidder Key Staff Reference Requirement

The Evaluation Team will review all of the Appendix B-23, STAFF REFERENCE FORMs, submitted within the bidder's proposal, as well as conduct references checks in order to determine if the information submitted on the bidder's Appendix B-22, KEY STAFF QUALIFICATIONS FORM, is accurate. The Evaluation Team will also look to identify if bidder Key Staff performed poorly on any of the referenced projects.

The State may contact references listed on the Appendix B-22, KEY STAFF QUALIFICATIONS FORM, to verify the information provided by the bidder. The Procurement Official will make two (2) attempts via e-mail to validate the experience using the information provided in the submitted forms. If no response is received after the second attempt, the Procurement Official may contact the bidder and request the bidder's assistance in having the reference respond. If the bidder is not able to provide or prompt a reference response, the State will determine if the deviation is material. If a deviation is determined to be material, the proposal will be considered nonresponsive, and the bidder will be disqualified.

The Appendix B-23, STAFF REFERENCE FORMs will be evaluated using the ratings provided from the references. The evaluation criterion is shown below:

Table 9-2: Key Staff Reference Evaluation Criteria

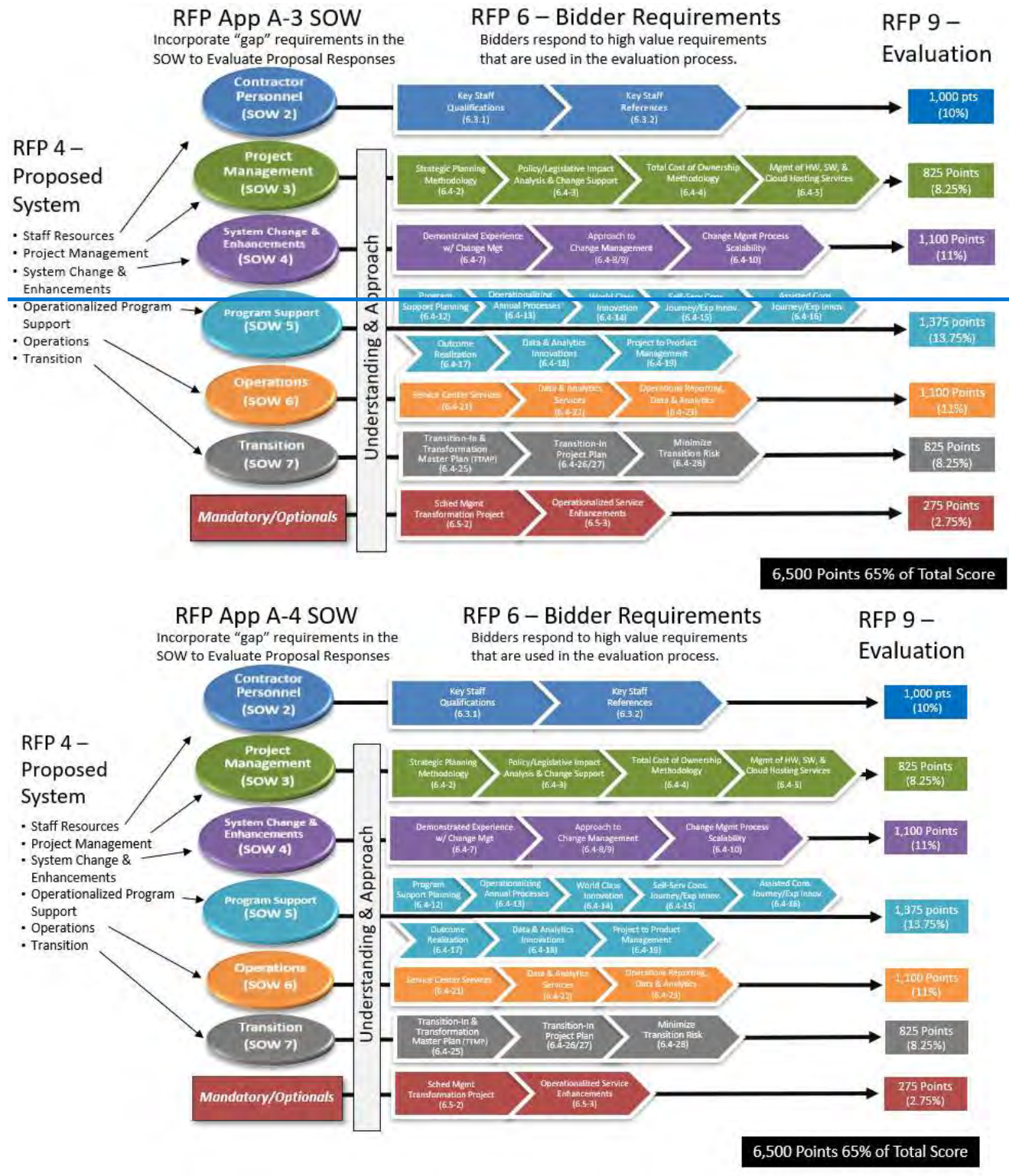
Reference Responses	Description	Evaluation Criteria
Excellent	The performance and abilities of the Staff was above average during this engagement.	Pass
Good	The performance and abilities of the Staff was average during this engagement.	Pass
Poor	The performance and abilities of the Staff was below average during this engagement.	Fail
No Value	The performance and abilities of the Staff was unsatisfactory during this engagement.	Fail

Using the above criterion, the State will designate each Key Staff reference with either a Pass or a Fail. A bidder who does not return all required reference forms, is found to have conflicting information in Appendix B-19, BIDDER (COMPANY) QUALIFICATIONS INSTRUCTIONS & FORM, or obtained a reference score of Poor, or No Value, will have its proposal deemed to Fail the Qualification Step and will be disqualified.

9.3 TECHNICAL EVALUATION & SCORING (6,500 POINTS)

The requirements herein are categorized as Mandatory Scorable and must provide a response to each requirement in accordance with RFP Section 6.1.2, TECHNICAL REQUIREMENTS, and as shown in the figure below.

Figure 9-2: Bidder Requirements Traceability – Technical Evaluation (Scored)



The Evaluation Team will review the responses to the requirements and apply points. Not providing a response to any of the Mandatory Scorable requirements within the bidder's proposal will result in the proposal being deemed nonresponsive, and lead to the bidder being disqualified based on the criteria identified within this Section 9.3, TECHNICAL EVALUATION & SCORING (6,500 POINTS).

The table below identifies the breakout of the potential Six Thousand Five Hundred (6,500) points that will be awarded via the evaluation criteria described in the following paragraphs.

Table 9-3: Technical Evaluation Areas

RFP Reference	Technical Evaluation Area	Maximum Points
Key Staff Qualifications and References (1,000 points)		
Section 6.3.1	Bidder Key Staff Qualifications	800 points
Section 6.3.2	Bidder Key Staff References	200 points
Understanding and Approach Evaluation Scoring Criteria (5,500 points)		
Understanding and Approach to Project Management Requirements Scoring Criteria (825 points)		
Section 6.4.1.1	Approach to Strategic Planning	175 points
Section 6.4.1.2	Approach to Policy and Legislative Impact Analysis and Change Support	175 points
Section 6.4.1.3	Total Cost of Ownership (TCO) Methodology	250 points
Section 6.4.1.4	Approach to Management of Hardware, Software, and Cloud Hosting Services	225 points
Understanding and Approach to System Change & Enhancements Requirements Scoring Criteria (1,100 points)		
Section 6.4.2.1	Approach to Timely System Changes/Enhancements	1,100 points
Understanding and Approach to Program Support Requirements Scoring Criteria (1,375 points)		
Section 6.4.3.1	Approach to Program Support Planning	100 points
Section 6.4.3.2	Approach to Operationalizing Annual Processes	100 points
Section 6.4.3.3	Approach to General Innovations	100 points
Section 6.4.3.4	Approach to Consumer Journey & Experience Innovations	400 points
Section 6.4.3.5	Approach to Outcome Realization	450 points
Section 6.4.3.6	Approach to Organizational Innovations	225 points
Understanding and Approach to Operations Requirements Scoring Criteria (1,100 points)		
Section 6.4.4.1	Approach to Improving Service Center Services	375 points
Section 6.4.4.2	Approach to Data & Analytics Services	375 points
Section 6.4.4.3	Approach to Operations Reporting, Data & Analytics	350 points
Understanding and Approach to Transition-In Scoring Criteria (825 points)		
Section 6.4.5.1	Approach to the Transition-In Master Plan (TIMP)	325 points
Section 6.4.5.2	Approach to the Transition-In Schedule	300 points
Section 6.4.5.3	Approach to Minimizing Transition-In Risks	200 points
Understanding and Approach to Mandatory/Optional Requirements (275 points)		
Section 6.5.1	Effort Driven Schedule Management	150 points
Section 6.5.2	Operationalized Service Enhancements	125 points
	Subtotal	6,500 points

9.3.1 Key Staff Qualification Requirements (800 Points)

The Evaluation Team will review each proposal to determine compliance the Key Staff Mandatory or Desirable Qualification requirements identified within Section 6.3.1, BIDDER KEY STAFF QUALIFICATION REQUIREMENTS, using a consensus basis to evaluate and score the requirements.

A proposal that does not contain all of the required B-22, KEY STAFF QUALIFICATIONS FORMs, will be deemed nonresponsive, causing the bidder to be disqualified.

The State will evaluate bidder responses to the Key Staff Mandatory Qualification requirements and apply points only to Key Staff who are found to exceed the Key Staff Mandatory Qualification requirements. The Evaluation Team will review each bidder submitted Appendix B-22, KEY STAFF QUALIFICATIONS FORM, and determine if the experience provided exceeds each associated Key Staff Mandatory Qualification requirement. The State will award one (1) point for each additional year of experience, if applicable, above and beyond the duration required within each Key Staff

Mandatory Qualification, up to a maximum of five (5) points per Key Staff Mandatory Qualification requirement.

The State will also evaluate bidder responses to the Key Staff Desirable Qualification requirements and apply points to Key Staff who are found to meet or exceed these requirements. The Evaluation Team will review each bidder submitted Appendix B-22, KEY STAFF QUALIFICATIONS FORM, and award fifty percent (50%) of the available points, associated with the Desirable Qualification requirement, if the bidder is determined to have met the requirement. The Evaluation Team will award the other 50% of the available points, associated with the Desirable Qualification requirement, if the bidder is determined to have an additional year of the required experience, or more, above and beyond the duration required within each Key Staff Desirable Qualification requirement.

Table 9-4, Bidder Key Staff Mandatory & Desirable Qualification Requirement Scoring, identifies the scoring point values associated with each Mandatory and Desirable Qualification requirement.

Table 9-4: Bidder Key Staff Mandatory & Desirable Qualification Requirement Scoring

#	Key Staff	MQ#1 (Max)	MQ#2 (Max)	MQ#3 (Max)	MQ#4 (Max)	DQ#1 (Max)	DQ#2 (Max)	DQ#3 (Max)	Total Score Possible (TSP)	Adj. Scoring Conversion (Score/TSP) x Max	Max Score
1	Project Manager	(0 to 5)	(0 or 5)	5	n/a	(0 to 2)	2	n/a	19	(19/19) x 20 (Max)	20
2	Deputy Project Manager	5	5	(0 or 5)	n/a	(0, 2 or 4)	n/a	n/a	19	(19/19) x 20 (Max)	20
3	Technical Manager	5	5	5	n/a	2	2	n/a	19	(19/19) x 20 (Max)	20
4	Project Management Office (PMO) Manager	5	5	(0 or 5)	n/a	4	n/a	n/a	19	(19/19) x 20 (Max)	20
5	Schedule Management Lead	5	5	(0 or 5)	n/a	4	n/a	n/a	19	(19/19) x 20 (Max)	20
6	Operations Manager	5	5	5	n/a	2	2	2	21	(21/21) x 20 (Max)	20
7	Applications Maintenance Manager	5	5	5	n/a	2	2	2	21	(21/21) x 20 (Max)	20
8	Enterprise Architect	5	5	5	n/a	4	n/a	n/a	19	(19/19) x 20 (Max)	20
9	Release Manager	5	5	5	n/a	4	n/a	n/a	19	(19/19) x 20 (Max)	20
10	Transition Manager	5	5	5	n/a	4	n/a	n/a	19	(19/19) x 20 (Max)	20
11	Quality Assurance Manager	5	5	5	n/a	2	2	n/a	19	(19/19) x 20 (Max)	20
12	Agile Manager	5	5	n/a ⁵	n/a	4	n/a	n/a	~~19~~ 14	~~(19/19)~~ (14/14) x 20 (Max)	20
13	Data Scientist	5	5	5	5	4	n/a	n/a	24	(24/24) x 20 (Max)	20
14	Data Analytics Expert	5	5	5	n/a	2	2	n/a	19	(19/19) x 20 (Max)	20
15	Security Officer	5	5	(0 or 5)	n/a	4	n/a	n/a	19	(19/19) x 20 (Max)	20
16	Organizational Change Manager (OCM)	5	5	5	n/a	2	2	n/a	19	(19/19) x 20 (Max)	20
17	Consumer Experience Lead	5	5	5	n/a	4	n/a	n/a	19	(19/19) x 20 (Max)	20
Max Total:											340

Next, the Evaluation Team will sum the points across all Mandatory and Desirable Qualification requirements earned by the bidder's Key Staff, dividing the bidder's Key Staff score by the Key Staff score of the highest scoring bidder. The result will be a percentage, which is then multiplied by the total evaluation points associated with this area of the proposal, eight hundred (800) points, to obtain the number of evaluation points awarded to the bidder.

An example of the scoring methodology used within this area is provided within Table 9-5, Example of Bidder Key Staff Qualifications Scoring. Once the Evaluation Team has identified the scores of each of Bidder #3's proposed Key Staff, the team will sum up all of Bidder #3's proposed Key Staff score, which equals (319.94). The Evaluation team will then divide Bidder #3's score by the score of the highest scoring bidder, which in the example below is Bidder #2 (340 pts), which results in zero (.941). The result is then multiplied by the evaluation point value associated with this Section 9.3.1 of the RFP (800 pts) to obtain Bidder #3's awarded evaluation points (752.8 pts). As seen in the table below, Bidder #2 obtained (800 pts), the maximum number of points possible.

Table 9-5: Example Bidder Key Staff Qualifications Scoring

	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	Total Score	D
Company Name	Project Manager	Deputy Project Director	Technical Manager	Project Management Office Manager	Schedule Management Lead	Operations Manager	Applications Maintenance Manager	Enterprise Architect	Release Manager	Transition Manager	Quality Assurance Manager	Agile Manager	Data Scientist	Data Analytics Expert	Security Officer	Organizational Change Manager	Consumer Experience Lead		Total Score – All Proposed Key Staff Up to 800 Points (Sum bidder Key Staff #1 - #17 scores) = Bidder score (Bidder score)/(Highest bidder score) x 800 = Column D
Bidder #1	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	[(0)/(340)] x 800 = 0 pts
Bidder #2	20	20	20	20	20	20	20	20	20	20	20	20	20	20	20	20	20	340	[(340)/(340)] x 800 = 800 pts
Bidder #3	15.79	17.89	20	15.79	16.19	16.19	18.09	20	20	20	20	20	20	20	20	20	20	319.94	[(319.94)/(340)] x 800 = 752.8 pts

9.3.2 Bidder Key Staff References (200 Points)

The evaluation team will use the submitted Appendix B-23, STAFF REFERENCE FORMs, to evaluate and score bidder Key Staff references.

The bidder must submit a separate Appendix B-23, STAFF REFERENCE FORM for each project cited to meet the Mandatory Qualification requirement or Desirable Qualification requirement on the associated Key Staff's Appendix B-22, KEY STAFF QUALIFICATIONS FORM. Each staff reference form must be signed by a client reference contact that performed either a managerial or supervisory role on the referenced project. If the client reference is not allowed either legally or by company policy to sign the reference form, the client reference must type in its full name with a brief statement on the form outlining the reason they are not permitted to sign the State's reference form.

Bidders who do not return an Appendix B-23, STAFF REFERENCE FORM, for each project cited to meet the Key Staff Mandatory Qualification requirements, will result in the proposal being deemed nonresponsive, causing the bidder to be disqualified. Additionally, if bidders do not return an Appendix B-23, STAFF REFERENCE FORM, associated with a Desirable Qualification requirement, for which the bidder submitted an Appendix B-22, KEY STAFF QUALIFICATIONS FORM, the State will not be able to evaluate and score the associated Desirable Qualification requirement.

The Procurement Official may contact the Key Staff References listed on the reference forms to verify the information submitted on the Appendix B-22, KEY STAFF QUALIFICATIONS FORM, as well as the ratings the Key Staff received from the Key Staff Reference. The Procurement Official will make two (2) attempts via e-mail to validate the experience using the information provided in the submitted forms. If no response is received after the second attempt, the Procurement Official will contact the bidder and request the bidder to assist in having the reference respond. If the bidder is not able to solicit a reference response, the State will determine if the deviation is material. If determined to be material, the proposal will be deemed nonresponsive, causing the bidder to be disqualified.

Any information found to be in conflict with the information provided by the Key Staff Reference and contains material deviations will result in the proposal being deemed nonresponsive and will lead to bidder disqualification.

Table 9-6: Key Staff Reference Evaluation Criteria

Evaluation Criteria	Description
Excellent = 2 points	The performance and abilities of the bidder's Staff were above average during this engagement.
Good = 1 point	The performance and abilities of the bidder's Staff were average during this engagement.
Poor , N/A or No Value = 0 points	The performance and abilities of the bidder's Staff were unsatisfactory during this engagement.

A proposal submitted with an Appendix B-23, STAFF REFERENCE FORM, associated with a Mandatory Qualification requirement, that received a Poor, No value, or N/A response to any of the reference questions may be deemed nonresponsive, causing the bidder to be disqualified.

Once the Evaluation Team reviews all of a bidder's submitted Appendix B-23, STAFF REFERENCE FORMs, and completed reference checks, the Evaluation Team will calculate the bidder's average score by totaling together the points from each bidder Staff reference form and dividing the total number of points by the number of Staff reference forms submitted by the bidder. Next, the bidder's average score will be divided by the average score of the highest scoring bidder. The resulting value will then be multiplied by the total available points for the area, two hundred (200) points, to determine the number of points each bidder will be awarded as a score.

For example, if three (3) Staff references are submitted by Bidder #1, each with a score of five (5), those numbers would be summed together to equal fifteen (15). That sum would then be divided by the number of references submitted, three (3), to get the bidder's average score of five (5). The result will then be divided by the highest average score, which for the example below would be ten ($10+10+10/3 = 10$), acquired by Bidder #2, resulting in 0.5 or a percentage of 50%. Finally, the Evaluation Team will take the result of 0.5 and multiply it by the two-hundred (200) maximum available points for the area to determine Bidder #1's score, ($0.5 \times 200 = 100$ points).

Table 9-7: Example of Key Staff Reference Evaluation

Company Name	A	B	C	D
	Key Staff Ref. # 1	Key Staff Ref. # 2	Key Staff Ref. # 3	Total Score - All Key Staff References (1-3) Up to 200 Points (Bidder average score)/(Highest average score) x 200 = Column D
Bidder # 1	5	5	5	$[(5+5+5/3 = 5)/(10+10+10/3 = 10)] \times 200 = 100$ pts
Bidder # 2	10	10	10	$[(10+10+10/3 = 10)/(10+10+10/3 = 10)] \times 200 = 200$ pts

9.3.3 Understanding and Approach Evaluation Scoring Criteria (5,500 points)

The following table provides the evaluation criteria that the State will use in its evaluation of bidder's responses to the Understanding and Approach Requirements, as identified within RFP Section 6.4, UNDERSTANDING AND APPROACH REQUIREMENTS, and RFP Section 6.5, MANDATORY/OPTIONAL REQUIREMENTS. The evaluation scoring criteria for each requirement are provided here, giving insight into how the bidders should develop its responses on the areas that are of the most interest to the State.

The bidder must provide a narrative response to the Understanding and Approach requirements.

The Evaluation Team will use a consensus basis to evaluate the bidder's response to the understanding and approach requirements.

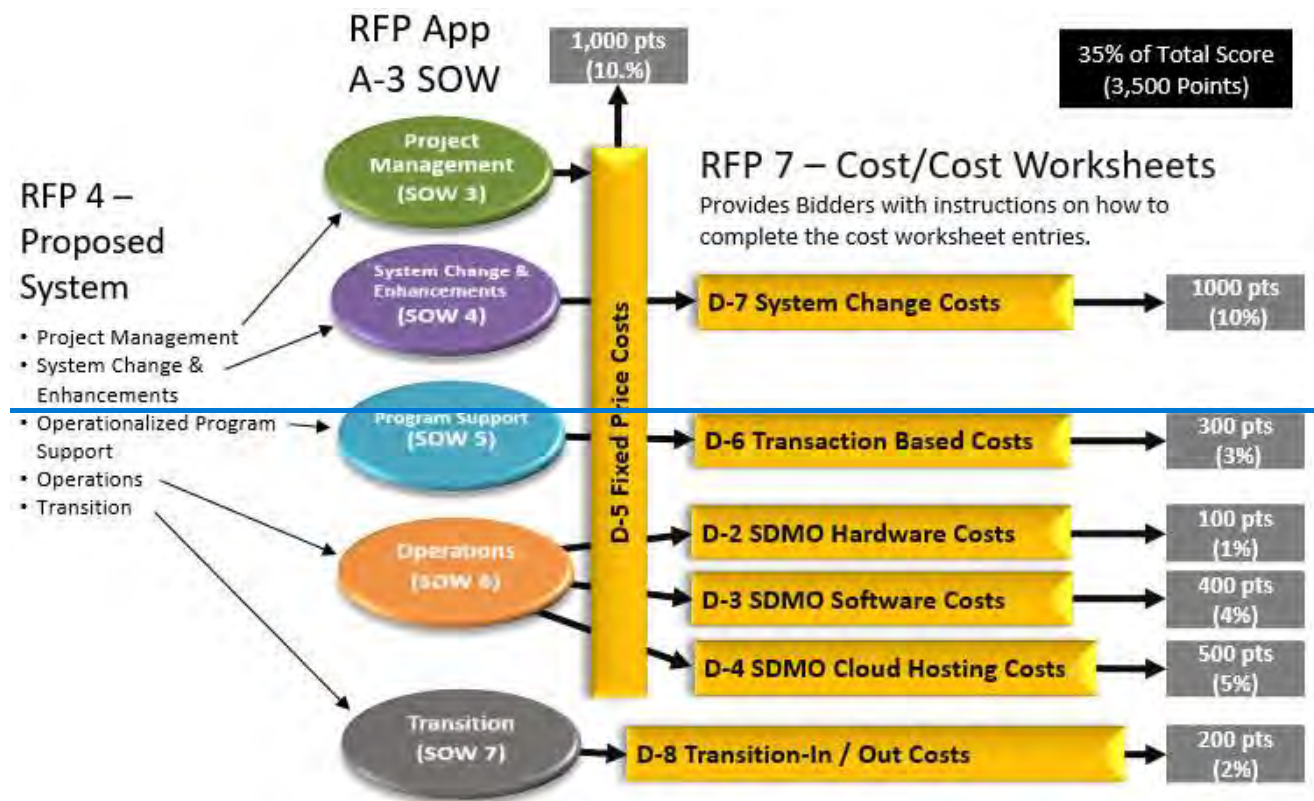
Table 9-8: Understanding and Approach Criteria

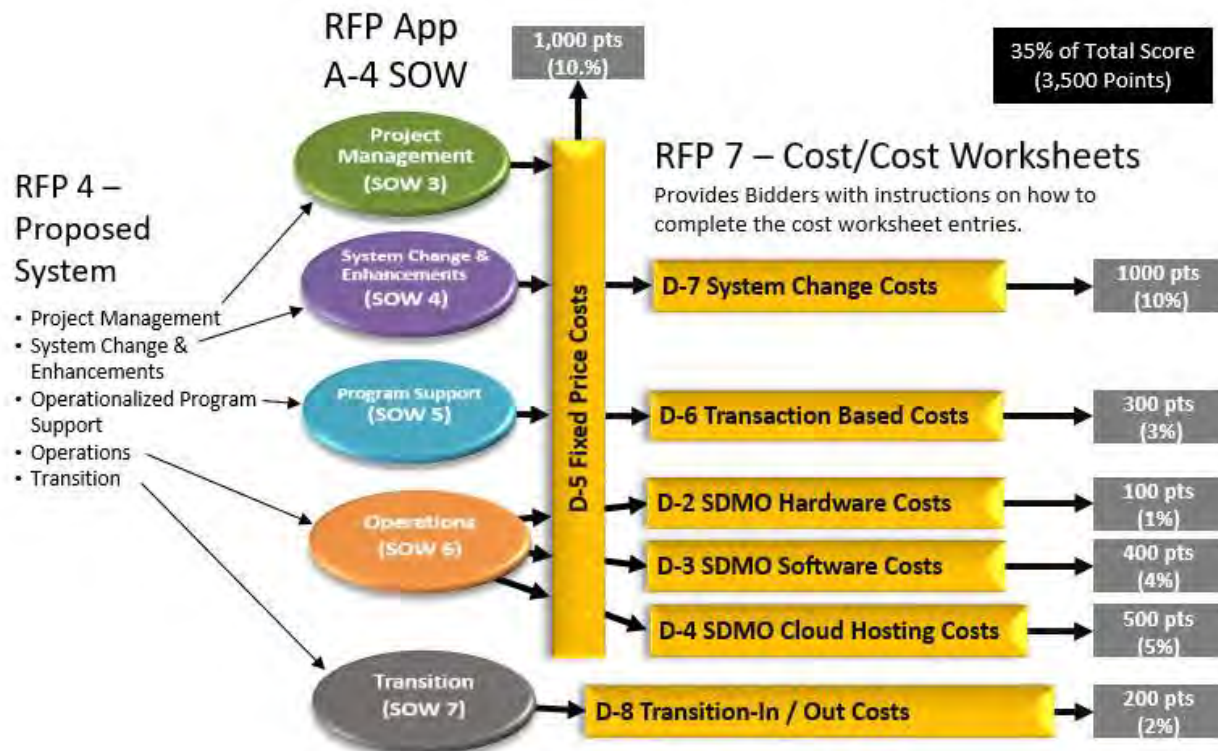
Scoring Criteria	Points
All considerations of the component are addressed with the highest degree of confidence in the bidder's response.	100% of Max Points
The response addresses most of the component, with an above average degree of confidence.	75% of Max Points
The response somewhat addresses the component, with an average or nominal degree of confidence.	50% of Max Points
The response minimally addresses the component, with a below average or nominal degree of confidence.	25% of Max Points
The response fails to address the component, with a minimal degree of confidence.	No Points

9.4 COST EVALUATION & SCORING (3,500 POINTS)

This section covers the evaluation and scoring of the Cost Requirements that are defined in RFP Section 7, COST, and the Appendix D, COST WORKBOOK. The figure below identifies the traceability and scoring methodology applied to the cost requirements of this solicitation.

Figure 9-3: Cost Evaluation Approach





The table below identifies the allocation of potential points for each different cost component of the CalHEERS SDMO Services Contract, as specified within RFP Appendix D, COST WORKBOOK.

Table 9-9: Cost Evaluation

Evaluation Area	RFP Reference	Points
Bid Amount A		
SDMO Hardware Costs	Appendix D-2	100
SDMO Software Costs	Appendix D-3	400
Cloud Hosting Costs	Appendix D-4	500
SDMO Fixed Price Costs	Appendix D-5, D-5.4	1,000
Bid Amount B		
Transaction-Based Costs	Appendix D-6	300
Bid Amount C		
System Changes Costs	Appendix D-7, D-7.2	1,000
Bid Amount D		
Transition-In (TIP1 & TIP2) Costs	Appendix D-8	100
Transition-Out Costs	Appendix D-8.2	100
Cost Total		3,500

9.4.1 Cost Assessment

The State will review the bidder's response to RFP Section 7, COST, and the Appendix D, COST WORKBOOK, for mathematical accuracy. Errors and inconsistencies will be dealt with according to procedures contained in RFP Section 2.3.6.2, ERRORS IN THE PROPOSAL. Adjustments may be made for the purpose of evaluation in accordance with procedures described in RFP Section 2.3.6.2, ERRORS IN THE PROPOSAL.

After the Evaluation Team identifies the proposals that successfully pass the Qualification Step evaluation phase, the State will open the cost component of the bidder's proposal. The State will open each of the bidder's costs and validate that the cost worksheets were properly completed and are free of mathematical errors. If appropriate, the State may correct errors in accordance with RFP Section 2.3.6.2, ERRORS IN THE PROPOSAL.

The Evaluation Team will then evaluate the bidder's Cost Scores for each of the cost evaluation items identified within RFP Appendix D, Tab D-1, TOTAL COST SUMMARY, utilizing one of the evaluation approaches identified in the below examples.

The Evaluation Team will use the SDMO Hardware Cost Evaluation example approach (below) to calculate the bidder's Cost Scores for each of the following cost evaluation items:

- Appendix D-2, SDMO HARDWARE COSTS*
- Appendix D-3, SDMO SOFTWARE COSTS*
- Appendix D-4, CLOUD HOSTING DATA CENTER SERVICES COSTS
- Appendix D-7, SYSTEM CHANGE COSTS

*Note – For Hardware and Software Cost Evaluation, points will only be awarded within those categories if bidder's proposed total hardware or total software costs fall under the respective State Projected Budget values.

Table 9-10: SDMO Hardware Cost Evaluation Example

Bidder Name	Bid Amount A	D
	SDMO Hardware	Score – SDMO Hardware Up to 100 Points (Lowest Bidder Cost)/(Bidder #n Cost) x 100 = Column D
Bidder # 1	\$220	$[(\$205)/(\$220)] \times 100 = 93.18 \text{ pts}$
Bidder # 2 (Lowest Cost)	\$205	$[(\$205)/(\$205)] \times 100 = 100 \text{ pts}$
State Projected Hardware Budget	\$225	
Bidder # 3	\$230	No points awarded

The Evaluation Team will use the Fixed Price Costs & Transaction Based Costs Evaluation example approach (below) to calculate the bidder's Cost Scores for the cost evaluation items listed below. Please note that for evaluation purposes, the State will only be considering the costs between Year 2 and Year 10 for each of these cost evaluation items:

- Appendix D-5, SDMO FIXED PRICE COSTS
- Appendix D-6, TRANSACTION-BASED COSTS

Table 9-11: SDMO Fixed Price Costs & Transaction Based Costs Evaluation Example

Bidder Name	Bid Amount A	D
	SDMO Fixed-Price Costs (Year 2 – Year 10)	Score – SDMO Fixed Price Costs Up to 1,000 Points (Lowest Bidder Cost)/(Bidder #n Cost) x 1,000 = Column D
Bidder # 1	\$220	$[(\$205)/(\$220)] \times 1,000 = 932 \text{ pts}$
Bidder # 2 (Lowest Cost)	\$205	$[(\$205)/(\$205)] \times 1,000 = 1,000 \text{ pts}$

The Evaluation Team will use the Transition-In Cost Evaluation Example approach (below) to calculate the bidder's Cost Scores for each of the following cost evaluation items:

- Appendix D-8, TRANSITION-IN COSTS
- Appendix D-8.2, TRANSITION-OUT COSTS

Table 9-12: Transition-In Cost Evaluation Example

Bidder Name	Bid Amount D	A
	Transition-In	Score – Bid Amount D, Transition-In Up to 100 Points (2nd Lowest Bidder Cost)/(Bidder #n Cost) x 100 = Column A
Bidder # 1	\$300	$[(\$200)/(\$300)] \times 100 = 67 \text{ pts}$
Bidder # 2 (2 nd Lowest Bidder Cost)	\$200	$[(\$200)/(\$200)] \times 100 = 100 \text{ pts}$
Bidder # 3	\$500	$[(\$200)/(\$500)] \times 100 = 40 \text{ pts}$
Bidder # 4	\$400	$[(\$200)/(\$400)] \times 100 = 50 \text{ pts}$
Bidder # 5	\$10	$[(\$200)/(\$10)] \times 100 = 100 \text{ pts (maximum available points)}$

Once the Evaluation Team has calculated the scores associated with each cost evaluation item within Bid Amounts A through D for each bidder, the team will sum up each bidder's total cost score.

9.5 APPLICATION OF PREFERENCES & INCENTIVES AND FINAL SCORE DETERMINATION

The Technical Score and Cost Score will be calculated and added together for each proposal, then the State will calculate and apply the preference and incentive points for Small Business (SB) and DVBE preferences and incentives.

The Evaluation Team will evaluate to determine whether the bidder qualifies for the Mandatory or Optional preference or incentive points. If the Evaluation Team determines that the submitted information is insufficient, or that required documents do not otherwise validate the eligibility for the preference or incentive, the State will not calculate or apply the related points.

If the Evaluation Team is able to validate the bidder's claim for the preference or incentive, the related points will be applied to the bidder's final overall proposal score.

9.5.1 Small Business (SB)

In accordance with California Government Code Section 14835 et seq., a five percent (5%) preference will be given to bidders who qualify as a small business or non-small business claiming at least twenty-five percent (25%) California-certified small business Subcontractor participation. The State shall use the following approach in applying this preference.

Table 9-13: Small Business Preference Point Application Example

Bidder	Points Subtotal	SB Preference	SB Point Calculation	Proposal Score (Points Total)
A	9,200	0%	$9,200 \times 0 = 0$	9,200
B	9,100	5%	$9,100 \times .05 = 455$	9,555

9.5.2 Disabled Veterans Business Enterprise

In accordance with Section 999.5(a) of the Military and Veterans Code, an incentive will be given to bidders who provide DVBE documentation. For Contract award evaluation purposes only, the State shall apply an incentive to proposals that include California certified DVBE participation. The maximum incentive for this procurement is three percent (3%) of the total available points. Incentive points will be awarded based on the amount of DVBE participation obtained, as identified in the following DVBE Incentive Point Calculation Example.

The following incentive points shall apply to this solicitation:

Table 9-14: DVBE Incentive Point Calculation Example

Confirmed DVBE Participation	Preference	Maximum Incentive Points
5% or more	3%	10,000 points x .03 = 300
4% - 4.99%	2%	10,000 points x .02 = 200
3% - 3.99%	1%	10,000 points x .01 = 100
Less than 3%	0%	0 points

The DVBE Incentive percentage is applied to total points available to the bidders. Table 9-15, DVBE Incentive Point Application Example, illustrates the incentive points available based on the total score.

Table 9-15: DVBE Incentive Point Application Example

Bidder	Points Subtotal:	DVBE Participation	DVBE Points	Proposal Score (Points Total)
A	9,200	4%	10,000 x .02 = 200	9,400
B	8,800	5%	10,000 x .03 = 300	9,100

9.6 NEGOTIATIONS

The State of California reserves the right to negotiate. The State will conduct negotiations under Government Code 100505 and the Negotiation Process.

The State will conduct Negotiations with up to the top three (3) bidders that score the highest number of points.

The purpose of the Negotiation Process is to maximize the State's ability to obtain best value, based on the requirements and the evaluation factors set forth in the RFP. Negotiations allow the State and bidder an opportunity to discuss items that could, in the State's opinion enhance the bidder's proposal and potential for award.

Negotiations are not intended to allow a bidder to completely rewrite its proposal.

The negotiations are exchanges between the State and the bidder, which are undertaken with the intent of allowing the bidder to revise its proposal only in areas determined by the State during the Negotiation Process.

The Negotiation Process will be conducted either orally and/or in writing, and may include bargaining, such as persuasion, alteration of assumptions and positions, and give and take.

The State may discuss any aspect of the bidder's proposal that could, in the opinion of the State, be altered or explained to materially enhance the proposal's potential for award. However, the State is not required to discuss every area where the bidder's proposal could be improved. The scope and extent of negotiation exchanges are the matter of the State's judgment.

All aspects of the bidder's proposal are confidential until after the issuance of the Notification of Award.

9.6.1 Proceeding with Negotiations

At the discretion of the State, the State will invite bidders to participate in the Negotiation Process. The State will invite and proceed with concurrent negotiations with up to the three (3) highest scoring compliant bidders. This bidder Negotiation Process will continue until the State completes negotiations and awards a Contract.

9.6.2 Negotiation Invitation

At the discretion of the State, the bidders will be notified in writing that the State is initiating

negotiations; and be provided with: (1) the general purpose and scope of the negotiations; (2) the anticipated schedule for the negotiations; and (3) the procedures to be followed for negotiations.

Confirmation of Attendance: bidder(s) who have been invited to participate in negotiations must confirm attendance, in accordance with the invitation instructions, within two (2) State business days of invitation.

9.6.3 Key Staff Interviews and Oral Presentations

Key Staff identified within RFP Section 6.3, BIDDER KEY STAFF QUALIFICATIONS & REFERENCES, may be required to participate in interviews during the negotiation process. The interview, if conducted, will cover relevant background, experience and situational business questions, pointed at validating that the Key Staff are qualified for its proposed roles. Oral presentations may be conducted in conjunction with the Key Staff interviews. The oral presentations will focus on a standard set of questions that will be provided to all invited bidders.

9.6.4 Best And Final Offer (BAFO) Submission & Evaluation

At the conclusion of negotiations, the State may request that bidders develop and submit a Best And Final Offer (BAFO). The intent of the BAFO is to clarify and document understandings reached during negotiations. The State will establish a date and time for receipt of BAFOs based on when bidder negotiations occur. A bidder's BAFO is an irrevocable offer for 180 calendar days following the scheduled date for BAFO submission. A bidder may extend the offer in the event of a delay in Contract award.

If the State requests BAFOs, the supplemental proposal must be submitted to the location identified in RFP Section 1.5, PROCUREMENT OFFICIAL AND CONTACT INFORMATION, by the specific date and time that will be communicated to each bidder individually in writing.

The BAFO submission must address the following:

- A supplemental proposal containing every negotiated/revised section(s) of the bidder's original proposal, any other revised area specifically required by the State to be included in the BAFO, and revisions made necessary in accordance therewith.
- The supplemental proposal must include all changes made to negotiated section(s) of the bidder's original proposal in tracked changes. Changes to the bidder's original proposal that are not tracked in the BAFO or otherwise identified, may result in the bidder's BAFO submission being rejected, and the bidder disqualified.
- An Executive Summary must accompany the supplemental proposal, identifying a list of all changes (other than non-substantive changes to formatting, punctuation and grammar) that have been made to the bidder's original proposal. The bidder must include and attest to the following statement within the Executive Summary:

"This Best and Final Offer (BAFO) is in response to RFP # 73040873 and the changes identified in this Executive Summary identifies all changes made to [bidder's name] original proposal, previously submitted to the State. Any substantive change not included in this list is nonoperative, nonbinding and will not be considered a part of the [bidder's name] supplemental proposal."

9.6.5 Evaluation of BAFO Submission

The State will evaluate BAFO submissions, based on topics negotiated. The State will document the evaluation process in accordance with the evaluation selection criteria outlined in the negotiation Invitation Letter.

9.6.6 Selection

Upon completing the evaluation of the BAFOs, final selection will be determined on the responsive

and responsible bidder submitting the highest scoring (after preferences and incentives are considered) supplemental proposal. The State reserves the right at any time to reject any or all proposals.

9.6.7 Calculating the Winning Bidder

The Evaluation Team will determine which bidder's BAFO has the highest score by calculating the sum of the bidder's scores for all evaluation areas plus the awarded incentives and preferences.

9.6.8 Selecting the Proposed Awardee

The State will award the Contract, based on the best value to the State of California, to a responsible bidder whose proposal complies with all of the requirements of the solicitation and any addenda thereto, except for such immaterial defects as may be accepted by the State, and whose proposal achieves the highest number of total points for qualifications, references, requirements, cost, and any preferences and/or incentives applied. The State reserves the right at any time to reject any or all supplemental proposals.

In the event of a tie score among the highest scoring responsive bidders, the State will award the Contract to the bidder with the highest total Key Staff reference score. In the event the highest scoring responsive bidders tie for highest total Key Staff reference score, the State will award the Contract to the responsive bidder with the highest score for Section 6.4.5, UNDERSTANDING AND APPROACH TO TRANSITION-IN REQUIREMENTS. In the event of a further tie at this point, the State will award the Contract via coin toss.

9.7 NOTIFICATION OF AWARD

Upon selection of proposed awardee, the State will send a Notification of Award.

Appendix A - STD 213 Standard Agreement

INTRODUCTION

This appendix contains the STD 213, Special Provisions, and Statement of Work (SOW) for CalHEERS RFP # 73040873.

APPENDIX A: STD 213 STANDARD AGREEMENT

The STD 213 must be signed, post-negotiations, by a party authorized to bind the firm contractually.

The Bidder shall only complete the CONTRACTOR NAME in block 1, and all of the information required for the "CONTRACTOR" block in the lower part of the form. DO NOT INCLUDE ANY DOLLAR FIGURES.

All forms are available in the Bidder's Library for download.

SCO ID:

STATE OF CALIFORNIA - DEPARTMENT OF GENERAL SERVICES
STANDARD AGREEMENT
STD 213 (Rev. 04/2020)

AGREEMENT NUMBER

PURCHASING AUTHORITY NUMBER (If Applicable)

1. This Agreement is entered into between the Contracting Agency and the Contractor named below:

CONTRACTING AGENCY NAME

CONTRACTOR NAME

2. The term of this Agreement is:

START DATE

THROUGH END DATE

3. The maximum amount of this Agreement is:

4. The parties agree to comply with the terms and conditions of the following exhibits, which are by this reference made a part of the Agreement.

Exhibits	Title	Pages
Exhibit A	Scope of Work	
Exhibit B	Budget Detail and Payment Provisions	
Exhibit C *	General Terms and Conditions	

Items shown with an asterisk (), are hereby incorporated by reference and made part of this agreement as if attached hereto.*

These documents can be viewed at <https://www.dgs.ca.gov/OLS/Resources>

IN WITNESS WHEREOF, THIS AGREEMENT HAS BEEN EXECUTED BY THE PARTIES HERETO.

CONTRACTOR

CONTRACTOR NAME (if other than an individual, state whether a corporation, partnership, etc.)

CONTRACTOR BUSINESS ADDRESS

CITY

STATE

ZIP

PRINTED NAME OF PERSON SIGNING

TITLE

CONTRACTOR AUTHORIZED SIGNATURE

DATE SIGNED

STATE OF CALIFORNIA

CONTRACTING AGENCY NAME

CONTRACTING AGENCY ADDRESS

CITY

STATE

ZIP

PRINTED NAME OF PERSON SIGNING

TITLE

CONTRACTING AGENCY AUTHORIZED SIGNATURE

DATE SIGNED

CALIFORNIA DEPARTMENT OF GENERAL SERVICES APPROVAL

EXEMPTION (If Applicable)

APPENDIX A-1 GENERAL PROVISIONS INFORMATION TECHNOLOGY

GENERAL PROVISIONS – INFORMATION TECHNOLOGY

1. **DEFINITIONS:** Unless otherwise specified in the Statement of Work, the following terms shall be given the meaning shown, unless context requires otherwise.

- a) **"Acceptance Tests"** means those tests performed during the Performance Period which are intended to determine compliance of Cloud Services, Equipment, and Software with the specifications and all other Attachments incorporated herein by reference and to determine the reliability of the Cloud Services, Equipment, or Software.
- b) **"Attachment"** means a mechanical, electrical, or electronic interconnection to the Contractor supplied Machine or System of Equipment, manufactured by other than the original Equipment manufacturer that is not connected by the Contractor.
- c) **"Business Entity"** means any individual, business, partnership, joint venture, corporation, S-corporation, limited liability company, sole proprietorship, joint stock company, consortium, or other private legal entity recognized by statute.
- d) **"Buyer"** means the State's authorized contracting official.
- e) **"Cloud Services"** means services provided in a cloud environment, including: Software as a Service (SaaS), Infrastructure as a Service (IaaS), Platform as a Service (PaaS), and any other vendor-managed or hosted services, provided to the State pursuant to the Contract.
- f) **"Commercial Hardware"** means Hardware developed or regularly used that: (i) has been sold, leased, or licensed to the general public; (ii) has been offered for sale, lease, or license to the general public; (iii) has not been offered, sold, leased, or licensed to the public but will be available for commercial sale, lease, or license in time to satisfy the delivery requirements of this Contract; or (iv) satisfies a criterion expressed in (i), (ii), or (iii) above and would require only minor modifications to meet the requirements of this Contract.
- g) **"Contract"** means this Contract or agreement (including but not limited to purchase orders or change requests), by whatever name known or in whatever format used.
- h) **"Custom Software"** means Software developed (including without limitation Interfaces) or produced by the Contractor or Subcontractors for CalHEERS under the Contract including any Software that is developed under an executed Change Request by the Contractor for CalHEERS but excluding Third Party Software, Contractor Technology, and Contractor proprietary information.
- i) **"Contractor"** means the Business Entity with whom the State enters into this Contract. Contractor shall be synonymous with "supplier", "vendor" or other similar term.
- j) **"Deliverables"** means Goods, Software, Cloud Services, Information Technology, telecommunications technology, Hardware, and other items (e.g. reports, documentation) to be delivered pursuant to this Contract, including any such items furnished incident to the provision of services.
- k) **"Documentation"** means all documents identified as Deliverables, Work Products provided by the Contractor to explain the use of the System, e.g., supplemental documents for the System designs and the online knowledge base tool and all commercially available, operations, technical and other manuals used in conjunction with the System, in whole and in part, including without limitation manuals provided by licensors of Third-

Party Software and by Equipment manufacturers.

- l) **"Equipment"** is an all-inclusive term which refers to physical assets related to computer or information technology, including peripheral components, communication devices, and related items.
- m) **"Facility Readiness Date"** means the date specified in the Statement of Work by which the State must have the site prepared and available for Equipment delivery and installation.
- n) **"Goods"** means all types of tangible personal property, including but not limited to materials, supplies, and Equipment (including computer and telecommunications Equipment).
- o) **"Hardware"** usually refers to computer Equipment and is contrasted with Software. See also Equipment.
- p) **"Information Technology"** includes, but is not limited to, all electronic technology systems and services, automated information handling, System design and analysis, conversion of data, computer programming, information storage and retrieval, telecommunications which include voice, video, and data communications, requisite System controls, simulation, electronic commerce, and all related interactions between people and Machines.
- q) **"Machine"** means an individual unit, physical or virtual, of a System or Cloud Services, separately identified by a type and/or model number, comprised of but not limited to mechanical, electro-mechanical, and electronic parts, microcode, and special features installed thereon and including any necessary Software, e.g., central processing unit, memory module, tape unit, card reader, etc.
- r) **"Manufacturing Materials"** means parts, tools, dies, jigs, fixtures, plans, drawings, and information produced or acquired, or rights acquired, specifically to fulfill obligations set forth herein.
- s) **"Mean Time to Repair (MTTR)"** means the average expected or observed time required to repair a System or component and return it to normal operation.
- t) **"Open Source Software"** means software that can be used freely, changed, and shared (in modified or unmodified form) by anyone. Open Source Software is distributed under Open Source Initiative-approved licenses that comply with an open source framework that allows for free redistribution, provision of the source code, allowance for modifications and derived works, free and open distribution of licenses without restrictions and licenses that are technology-neutral.
- u) **"Operating Software"** means those routines, whether or not identified as separate products or proprietary to the Contractor, that reside in the Equipment and Cloud Services and are required for the Equipment or Cloud Services to perform their intended function(s), and which interface the operator, other Contractor-supplied programs, and user programs to the Equipment and Cloud Services.
- v) **"Sensitive Information"** means information that has a degree of confidentiality such that its loss, misuse, unauthorized access, or modification could compromise the element of confidentiality and thereby adversely affect CalHEERS users, the conduct of the CalHEERS Program and/or the privacy of individuals entitled under the Privacy Act of 1974 or the Health Insurance Portability and Accountability Act of 1996 (HIPAA) or System security. Examples of sensitive information include but are not limited to: Personally Identifiable Information (PII), Protected Health Information (PHI), Personally Identifiable Financial Information (PIFI), CalHEERS Production data, and System login or access and internet protocol (IP) addresses.
- w) **"Software"** The software for the System, as described in the Contract; including Custom Software, the configuration, all Enhancements thereto,

Third-Party Software. Software includes all prior, current, and future versions of the Software and all Deficiency corrections.

- x) **"Software Failure"** means a malfunction in the Contractor-supplied Software, other than Operating Software, which prevents the accomplishment of work, even though the Equipment or Cloud Services (including its Operating Software) may still be capable of operating properly.
- y) **"State"** means the government of the State of California, its employees and authorized representatives, including without limitation any department, agency, or other unit of the government of the State of California.
- z) **"System"** means the complete collection of Hardware, Software, and Services, including all associated Cloud Services as described in this Contract.
- aa) **"Third-Party Software"** means Software which is: (a) developed by third parties, including without limitation Subcontractors; (b) generally distributed or available for commercial or government use; (c) not specifically designed or developed for CalHEERS/Covered California but often requiring customizations, including without limitation operating system software, tools, utilities, open source software, and commercial-off-the-shelf software; and (d) supplied by Contractor for use with the System and Cloud Services pursuant to this Contract.
- bb) **"U.S. Intellectual Property Rights"** means intellectual property rights enforceable in the United States of America, including without limitation rights in trade secrets, copyrights, and U.S. patents.

2. **CONTRACT FORMATION:**

- a) If this Contract results from a sealed bid offered in response to a solicitation conducted pursuant to Chapters 2 (commencing with Section 10290), 3 (commencing with Section 12100), and 3.6 (commencing with Section 12125) of Part 2 of Division 2 of the Public Contract

Code (PCC), then Contractor's bid is a firm offer to the State which is accepted by the issuance of this Contract and no further action is required by either party.

- b) If this Contract results from a solicitation other than described in paragraph a), above, the Contractor's quotation or proposal is deemed a firm offer and this Contract document is the State's acceptance of that offer.
 - c) If this Contract resulted from a joint bid, it shall be deemed one indivisible Contract. Each such joint Contractor will be jointly and severally liable for the performance of the entire Contract. The State assumes no responsibility or obligation for the division of orders or purchases among joint Contractors.
- 3. **COMPLETE INTEGRATION:** This Contract, including any documents incorporated herein by express reference, is intended to be a complete integration and there are no prior or contemporaneous different or additional agreements pertaining to the subject matter of the Contract.
 - 4. **SEVERABILITY:** The Contractor and the State agree that if any provision of this Contract is found to be illegal or unenforceable, such term or provision shall be deemed stricken, without the need for a formal amendment and the remainder of the Contract shall remain in full force and effect. Either party having knowledge of such term or provision shall promptly inform the other of the presumed non-applicability of such provision.
 - 5. **INDEPENDENT CONTRACTOR:** Contractor and the agents and employees of the Contractor, in the performance of this Contract, shall act in an independent capacity and not as officers or employees or agents of the State.
 - 6. **APPLICABLE LAW:** This Contract shall be governed by and shall be interpreted in accordance with the laws of the State of California; venue of any action brought with regard to this Contract shall be in Sacramento County, Sacramento, California. The United Nations Convention on Contracts for the International Sale of Goods shall not apply to this Contract.

7. COMPLIANCE WITH STATUTES AND REGULATIONS:

- a) The State and the Contractor warrants and certifies that in the performance of this Contract, it will comply with all applicable laws, statutes, rules, regulations and orders of the United States and the State of California. The Contractor agrees to indemnify the State against any loss, cost, damage or liability by reason of the Contractor's violation of this provision.
- b) The State will notify the Contractor of any such claim in writing and tender the defense thereof within a reasonable time; and
- c) The Contractor will have sole control of the defense of any action on such claim and all negotiations for its settlement or compromise; provided that (i) when substantial principles of government or public law are involved, when litigation might create precedent affecting future State operations or liability, or when involvement of the State is otherwise mandated by law, the State may participate in such action at its own expense with respect to attorneys' fees and costs (but not liability); (ii) where a settlement would impose liability on the State, affect principles of California government or public law, or impact the authority of the State, the State will have the right to approve or disapprove any settlement or compromise, which approval will not unreasonably be withheld or delayed; and (iii) the State will reasonably cooperate in the defense and in any related settlement negotiations.
- d) If this Contract is in excess of \$554,000, it is subject to the requirements of the World Trade Organization (WTO) Government Procurement Agreement (GPA).
- e) To the extent that this Contract falls within the scope of Government Code Section 11135, the Contractor hereby agrees to respond to and resolve any complaint brought to its attention,

regarding accessibility of its products or services.

8. CONTRACTOR'S POWER AND

AUTHORITY: The Contractor warrants that it has full power and authority to grant the rights herein granted and will hold the State harmless from and against any loss, cost, liability, and expense (including reasonable attorney fees) arising out of any breach of this warranty. Further, the Contractor avers that it will not enter into any arrangement with any third party which might abridge any rights of the State under this Contract.

- a) The State will notify the Contractor of any such claim in writing and tender the defense thereof within a reasonable time; and
- b) The Contractor will have sole control of the defense of any action on such claim and all negotiations for its settlement or compromise; provided that (i) when substantial principles of government or public law are involved, when litigation might create precedent affecting future State operations or liability, or when involvement of the State is otherwise mandated by law, the State may participate in such action at its own expense with respect to attorneys' fees and costs (but not liability); (ii) where a settlement would impose liability on the State, affect principles of California government or public law, or impact the authority of the State, the State will have the right to approve or disapprove any settlement or compromise, which approval will not unreasonably be withheld or delayed; and (iii) the State will reasonably cooperate in the defense and in any related settlement negotiations.
- c) To the extent Contractor is a reseller, Contractor warrants that (a) the service provider has reviewed the Contract; (b) in Contractor's agreement with the service provider, the service provider has agreed to accept the responsibilities, obligations, and liabilities (such as license grant, inspection, Acceptance, rejection, warranties, confidentiality,

indemnification, data protection provisions) under this Contract that naturally reside with the service provider with respect to the provision of Deliverables; and (c) Contractor can provide the Deliverables in accordance with the Contract.

- d) Nothing contained in the Contract, or otherwise, shall create any contractual relation between the State and any Subcontractors, and no subcontract shall relieve Contractor of Contractor's responsibilities and obligations hereunder. Contractor agrees to be as fully responsible to the State for the acts and omissions of its Subcontractors and of persons either directly or indirectly employed by any of them as it is for the acts and omissions of persons directly employed by Contractor. Contractor's obligation to pay its Subcontractors is an independent obligation from the State's obligation to make payments to Contractor. As a result, the State shall have no obligation to pay any moneys to any Subcontractor.

9. **ASSIGNMENT:** This Contract shall not be assignable by the Contractor in whole or in part without the written consent of the State. The State's consent shall not be unreasonably withheld or delayed. For the purpose of this paragraph, the State will not unreasonably prohibit the Contractor from freely assigning its right to payment, provided that the Contractor remains responsible for its obligations hereunder.

10. **WAIVER OF RIGHTS:** Any action or inaction by the State or the failure of the State on any occasion, to enforce any right or provision of the Contract, shall not be construed to be a waiver by the State of its rights hereunder and shall not prevent the State from enforcing such provision or right on any future occasion. The rights and remedies of the State herein are cumulative and are in addition to any other rights or remedies that the State may have at law or in equity.

11. **ORDER OF PRECEDENCE:** In the event of any inconsistency between the articles, attachments, specifications or provisions

which constitute this Contract, the following order of precedence shall apply:

- a) These General Provisions – Information Technology (In the instances provided herein where the paragraph begins: "Unless otherwise specified in the Statement of Work" provisions specified in the Statement of Work replacing these paragraphs shall take precedence over the paragraph referenced in these General Provisions);
- b) Contract form, i.e., Purchase Order STD 65, Standard Agreement STD 213, etc., and any amendments thereto;
- c) Other Special Provisions;
- d) Statement of Work, including any specifications incorporated by reference herein;
- e) Cost worksheets; and
- f) All other attachments incorporated in the Contract by reference.

12. **PACKING AND SHIPMENT:**

- a) All Goods are to be packed in suitable containers for protection in shipment and storage, and in accordance with applicable specifications. Each container of a multiple container shipment shall be identified to:
 - (i) show the number of the container and the total number of containers in the shipment; and
 - (ii) the number of the container in which the packing sheet has been enclosed.
- b) All shipments by the Contractor or its Subcontractors must include packing sheets identifying: the State's Contract number; item number; quantity and unit of measure; part number and description of the Goods shipped; and appropriate evidence of inspection, if required. Goods for different Contracts shall be listed on separate packing sheets.
- c) Shipments must be made as specified in this Contract, as it may be amended, or otherwise directed in writing by the State's Transportation Management Unit within the State.

13. **TRANSPORTATION COSTS AND OTHER FEES OR EXPENSES:** No charge for delivery, drayage, express, parcel post, packing, cartage, insurance, license fees,

permits, cost of bonds, or for any other purpose will be paid by the State unless expressly included and itemized in the Contract.

- a) The Contractor must strictly follow Contract requirements regarding Free on Board (F.O.B.), freight terms and routing instructions. The State may permit use of an alternate carrier at no additional cost to the State with advance written authorization of the Buyer.
- b) If "prepay and add" is selected, supporting freight bills are required when over \$50, unless an exact freight charge is approved by the Transportation Management Unit within the State and a waiver is granted.
- c) On "F.O.B. Shipping Point" transactions, should any shipments under the Contract be received by the State in a damaged condition and any related freight loss and damage claims filed against the carrier or carriers be wholly or partially declined by the carrier or carriers with the inference that damage was the result of the act of the shipper such as inadequate packaging or loading or some inherent defect in the Equipment and/or material, the Contractor, on request of the State, shall at Contractor's own expense assist the State in establishing carrier liability by supplying evidence that the Equipment and/or material was properly constructed, manufactured, packaged, and secured to withstand normal transportation conditions.

14. **DELIVERY:** The Contractor shall strictly adhere to the delivery and completion schedules specified in this Contract. Time, if stated as a number of days, shall mean calendar days unless otherwise specified. The quantities specified herein are the only quantities required. If the Contractor delivers in excess of the quantities specified herein, the State shall not be required to make any payment for the excess Deliverables, and may return them to Contractor at the Contractor's expense or utilize any other rights available to the State at law or in equity.

15. **SUBSTITUTIONS:** Substitution of Deliverables may not be tendered without advance written consent of the Buyer. The Contractor shall not use any specification in lieu of those contained in the Contract without written consent of the Buyer.

16. **INSPECTION, ACCEPTANCE AND REJECTION:** Unless otherwise specified in the Statement of Work:

- a) When acquiring Cloud Services, Commercial Hardware, or Third-Party Software, the State shall rely on Contractor's existing quality assurance system as a substitute for State inspection and testing. For all other acquisitions, Contractor and its Subcontractors will provide and maintain a quality assurance system acceptable to the State covering Deliverables and all Services under this Contract and will tender to the State only those Deliverables and Services that have been inspected and found to conform to this Contract's requirements. The Contractor will keep records evidencing inspections and their result, and will make these records available to the State during Contract performance and for three years after final payment. The Contractor shall permit the State to review procedures, practices, processes, and related documents to determine the acceptability of the Contractor's quality assurance system or other similar business practices related to performance of the Contract.
- b) All Deliverables may be subject to inspection and test by the State or its authorized representatives.
- c) The Contractor and its Subcontractors shall provide all reasonable facilities for the safety and convenience of auditors at no additional cost to the State. The Contractor shall furnish to auditors all information and data as may be reasonably required to perform their inspection.
- d) Subject to subsection 16 (a) above, all Deliverables may be subject to final inspection, test and acceptance by the

State at destination, notwithstanding any payment or inspection at source.

- e) In the event any Deliverables or Services should fail to conform to Contractual requirements, or to the sample submitted by Contractor (if applicable), the State may reject the same, and Contractor shall reclaim and remove the item promptly or correct the performance of the Deliverables or Services or other purchases, without expense to the State, and immediately replace all such rejected items with items conforming to the Contract. The State shall give written Notice of rejection of Deliverables delivered or Services performed hereunder within a reasonable time after receipt of such Deliverables or performance of such Services. Such Notice of rejection will state the respects in which the Deliverables do not substantially conform to their specifications. If the State does not provide such Notice of rejection within thirty (30) Days of delivery or within such time provided in the Contract for inspection, Acceptance, and rejection if longer than thirty (30) Days, for purchases of Cloud Services, Commercial Hardware, or Third-Party Software or all other purchases, such Deliverables and Services will be deemed to have been accepted. Acceptance by the State will be final and irreversible, except as it relates to latent defects, fraud, and gross mistakes amounting to fraud. Acceptance shall not be construed to waive any warranty rights that the State might have at law or by express reservation in this Contract with respect to any nonconformity.
- f) Unless otherwise specified in the Statement of Work, title to Equipment shall remain with the Contractor and assignees, if any, until such time as successful Acceptance testing has been achieved. Title to a special feature installed on a Machine and for which only a single installation charge was paid shall pass to the State at no additional charge,

together with title to the Machine on which it was installed.

17. SAMPLES:

- a) Samples of items may be required by the State for inspection and specification testing and must be furnished free of expense to the State. The samples furnished must be identical in all respects to the products bid and/or specified in the Contract.
- b) Samples, if not destroyed by tests, may, upon request made at the time the sample is furnished, be returned at the Contractor's expense.

18. WARRANTY:

- a) Unless otherwise specified in the Statement of Work, the warranties in this subsection begin upon delivery of the goods or services in question. The Contractor warrants that Deliverables and Services furnished hereunder will substantially conform to the requirements of this Contract (including without limitation all descriptions, specifications, and drawings identified in the Statement of Work. Where the parties have agreed to design specifications (such as a Detailed Design Document) and incorporated the same or equivalent in the Statement of Work directly or by reference, the Contractor will warrant that its Deliverables provide all material functionality required thereby. In addition to the other warranties set forth herein, where the Contract calls for delivery of Deliverable or Services, the Contractor warrants that such Deliverables or Services will perform in accordance with its license and accompanying Documentation. The State's approval of designs or specifications furnished by Contractor shall not relieve the Contractor of its obligations under this warranty.
- b) The Contractor warrants that Deliverables furnished hereunder (i) will be free, at the time of delivery, of harmful code (i.e. computer viruses, worms, trap doors, time bombs, disabling code, or any similar malicious mechanism designed to interfere with the intended

operation of, or cause damage to, computers, data, Cloud Services, or Software); (ii) will not infringe or violate any U.S. Intellectual Property Right. Without limiting the generality of the foregoing, if the State believes that harmful code may be present in any Cloud Services or Software delivered hereunder, the Contractor will, upon the State's request, provide a new or clean implementation of the Cloud Services or Software; and (iii) have been tested in accordance with industry standards.

- c) Unless otherwise specified in the Statement of Work:
- (i) The Contractor does not warrant that any Software provided hereunder is error-free or that it will run without immaterial interruption.
 - (ii) The Contractor does not warrant and will have no responsibility for a claim to the extent that it arises directly from (A) a modification made by the State, unless such modification is approved or directed by the Contractor, (B) use of Software in combination with or on products other than as specified by the Contractor, or (C) misuse by the State.
 - (iii) Where the Contractor resells Cloud Services, Commercial Hardware, or Third-Party Software it purchased from a third party, Contractor, to the extent it is legally able to do so, will pass through any such third party warranties to the State and will reasonably cooperate in enforcing them. Such warranty pass-through will not relieve the Contractor from Contractor's warranty obligations set forth above with respect to the Deliverables and Services.
- d) Notwithstanding subsection f), the Contractor represents and warrants that Contractor has the appropriate license and legal authority to provide the license, as defined in section 38, in the Custom Software to the State and U.S. Federal Government. In the event of a breach of this warranty, Contractor, at its own

expense, will promptly take the following actions: (i) secure for the State and/or U.S. Federal Government the right to continue using the Custom Software; (ii) replace or modify the Custom Software to make it noninfringing, provided such modification or replacement will not materially degrade any functionality, as determined by the State; or (iii) refund one hundred percent (100%) of the fee paid for the license for every month remaining in the license term following the date after which the State or U.S. Federal Government is required to cease operation of the Custom Software. The preceding remedies in this section are not exclusive of any other remedies that the State and/or the U.S. Federal Government may have.

- e) All warranties, including special warranties specified elsewhere herein, shall inure to the State, its successors, assigns, customer agencies, and governmental users of the Deliverables or Services.
- f) Except as may be specifically provided in the Statement of Work or elsewhere in this Contract, for any breach of the warranties provided in this Section, the State's exclusive Remedy and the Contractor's sole obligation will be limited to:
- (i) re-performance, repair, or replacement of the nonconforming Deliverable (including without limitation an infringing Deliverable) or Service; or
 - (ii) should the State in its sole discretion consent, refund of all amounts paid by the State for the nonconforming Deliverable or Service and payment to the State of any additional amounts necessary to equal the State's Cost to Cover. "Cost to Cover" means the cost, properly mitigated, of procuring Deliverables or Services of equivalent capability, function, and performance. The payment obligation in subsection (e)(ii) above will not exceed the limits on the Contractor's liability set

forth in the Section entitled
"Limitation of Liability."

- g) EXCEPT FOR THE EXPRESS WARRANTIES SPECIFIED IN THIS SECTION, THE CONTRACTOR MAKES NO WARRANTIES EITHER EXPRESS OR IMPLIED, INCLUDING WITHOUT LIMITATION ANY IMPLIED WARRANTIES OF MERCHANTABILITY OR FITNESS FOR A PARTICULAR PURPOSE.

- h) Unless otherwise specified in the Statement of Work, Contractor warrants Cloud Services and all support for Cloud Services will be performed in a skilled, professional manner by competent personnel and in accordance with the Contract. Contractor shall ensure that the service provider applies anti-malware controls to the Cloud Services to help avoid malicious software gaining unauthorized access to State Data, including malicious software originating from public networks. Such controls shall at all times equal or exceed the controls consistent with the industry standards for such data.

19. SAFETY AND ACCIDENT PREVENTION:

In performing work under this Contract on State premises, the Contractor shall conform to any specific safety requirements contained in the Contract or as required by law or regulation. The Contractor shall take any additional precautions as the State may reasonably require for safety and accident prevention purposes. Any violation of such rules and requirements, unless promptly corrected, shall be grounds for termination of this Contract in accordance with the default provisions hereof.

20. **INSURANCE:** The Contractor shall maintain all commercial general liability insurance, workers' compensation insurance and any other insurance required under the Contract. The Contractor shall furnish insurance certificate(s) evidencing required insurance coverage acceptable to the State, including endorsements showing the State as an "additional insured" if required under the Contract. Any required endorsements requested by the State must be separately

provided; merely referring to such coverage on the certificate(s) is insufficient for this purpose. When performing work on state owned or controlled property, Contractor shall provide a waiver of subrogation in favor of the State for its workers' compensation policy.

21. TERMINATION FOR NON-APPROPRIATION OF FUNDS:

- a) If the term of this Contract extends into fiscal years subsequent to that in which it is approved, such continuation of the Contract is contingent on the appropriation of funds for such purpose by the Legislature. If funds to effect such continued payment are not appropriated, the Contractor agrees to take back any affected Deliverables furnished under this Contract, terminate any Services supplied to the State under this Contract, and relieve the State of any further obligation therefor.
- b) The State agrees that if it appears likely that subsection a) above will be invoked, the State and Contractor shall agree to take all reasonable steps to prioritize work and Deliverables and minimize the incurrence of costs prior to the expiration of funding for this Contract.
- c) THE STATE AGREES THAT IF PARAGRAPH (a) ABOVE IS INVOKED, COMMERCIAL HARDWARE AND SOFTWARE THAT HAS NOT BEEN PAID FOR SHALL BE RETURNED TO THE CONTRACTOR IN SUBSTANTIALLY THE SAME CONDITION IN WHICH DELIVERED TO THE STATE, SUBJECT TO NORMAL WEAR AND TEAR. THE STATE FURTHER AGREES TO PAY FOR PACKING, CRATING, TRANSPORTATION TO THE CONTRACTOR'S NEAREST FACILITY AND FOR REIMBURSEMENT TO THE CONTRACTOR FOR EXPENSES INCURRED FOR THEIR ASSISTANCE IN SUCH PACKING AND CRATING.

22. TERMINATION FOR THE CONVENIENCE OF THE STATE:

- a) The State may terminate performance of work under this Contract for its

- convenience in whole or, from time to time, in part, if the State or its designee, determines that a termination is in the State's interest. The State or its designee, shall terminate by delivering to the Contractor a Notice of Termination specifying the extent of termination and the effective date thereof.
- b) After receipt of a Notice of Termination, and except as directed by the State, the Contractor shall immediately proceed with the following obligations, as applicable, regardless of any delay in determining or adjusting any amounts due under this clause. The Contractor shall:
- (i) Stop work as specified in the Notice of Termination.
 - (ii) Place no further subcontracts for materials, Services, or facilities, except as necessary to complete the continuing portion of the Contract.
 - (iii) Terminate all subcontracts to the extent they relate to the work terminated.
 - (iv) Settle all outstanding liabilities and termination settlement proposals arising from the termination of subcontracts;
- c) After termination, the Contractor shall submit a final termination settlement proposal to the State in the form and with the information prescribed by the State. The Contractor shall submit the proposal promptly, but no later than 90 days after the effective date of termination, unless a different time is provided in the Statement of Work or in the Notice of Termination.
- d) The Contractor and the State may agree upon the whole or any part of the amount to be paid as requested under subsection (c) above.
- e) Unless otherwise set forth in the Statement of Work, if the Contractor and the State fail to agree on the amount to be paid because of the termination for convenience, the State will pay the Contractor the following amounts; provided that in no event will total payments exceed the amount payable to the Contractor if the Contract had been fully performed:
- (i) The Contract price for Deliverables or Services accepted or retained by the State and not previously paid for, adjusted for any savings on freight and other charges; and
 - (ii) The total of:
 - A) The reasonable costs incurred in the performance of the work terminated, including initial costs and preparatory expenses allocable thereto but excluding any cost attributable to Deliverables or Services paid or to be paid;
 - B) The reasonable cost of settling and paying termination settlement proposals under terminated subcontracts that are properly chargeable to the terminated portion of the Contract; and
 - C) Reasonable storage, transportation, demobilization, unamortized overhead and capital costs, and other costs reasonably incurred by the Contractor in winding down and terminating its work.
- f) The Contractor will use generally accepted accounting principles, or accounting principles otherwise agreed to in writing by the parties, and sound business practices in determining all costs claimed, agreed to, or determined under this clause.
- 23. TERMINATION FOR DEFAULT:**
- a) The State may, subject to the clause titled "Force Majeure" and to sub-section d) below, by written Notice of default to the Contractor, terminate this Contract in whole or in part if the Contractor fails to:
 - (i) Deliver the Deliverables or perform the Services within the time specified in the Contract or any amendment thereto;
 - (ii) Make progress, so that the lack of progress endangers performance of this Contract; or
 - (iii) Perform any of the other provisions of this Contract.

- b) The State's right to terminate this Contract under sub-section a) above, may be exercised only if the failure constitutes a material breach of this Contract and if the Contractor does not cure such failure within the time frame stated in the State's cure notice, which in no event will be less than fifteen (15) days, unless the Statement of Work calls for a different period.
- c) If the State terminates this Contract in whole or in part pursuant to this Section, it may acquire, under terms and in the manner the Buyer considers appropriate, Deliverables or Services similar to those terminated, and the Contractor will be liable to the State for any excess costs for those Deliverables and Services, including without limitation costs third party vendors charge for Manufacturing Materials (but subject to the clause entitled "Limitation of Liability"). However, the Contractor shall continue the work not terminated.
- d) If the Contract is terminated for default, the State may require the Contractor to transfer title, or in the case of licensed Software, license, and deliver to the State, as directed by the Buyer, any:
- (i) completed Deliverables,
 - (ii) partially completed Deliverables, and,
 - (iii) subject to provisions of sub-section (e) below, Manufacturing Materials related to the terminated portion of this Contract. Nothing in this sub-section d) will be construed to grant the State rights to Deliverables that it would not have received had this Contract been fully performed. Upon direction of the Buyer, the Contractor shall also protect and preserve property in its possession in which the State has an interest.
- e) The State shall pay Contract price for completed Deliverables delivered and accepted and items the State requires the Contractor to transfer under section (d) above. Unless the Statement of Work calls for different procedures or requires no-charge delivery of materials, the Contractor and Buyer shall attempt to agree on the amount of payment for Manufacturing Materials and other materials delivered and accepted by the State for the protection and preservation of the property; provided that where the Contractor has billed the State for any such materials, no additional charge will apply. Failure to agree will constitute a dispute under the Disputes clause. The State may withhold from these amounts any sum it determines to be necessary to protect the State against loss because of outstanding liens or claims of former lien holders.
- f) If, after termination, it is determined by a final decision that the Contractor was not in default, the rights and obligations of the parties shall be the same as if the termination had been issued for the convenience of the State.
- g) Both parties, State and Contractor, upon any termination for default, have a duty to mitigate the damages suffered by it.
- h) The rights and remedies of the State in this clause are in addition to any other rights and remedies provided by law or under this Contract, and are subject to the clause titled "Limitation of Liability."
24. **FORCE MAJEURE:** Except for or defaults of Subcontractors at any tier, the Contractor shall not be liable for any excess costs if the failure to perform the Contract arises from causes beyond the control and without the fault or negligence of the Contractor. Examples of such causes include, but are not limited to:
- a) Acts of God or of the public enemy, and
 - b) Acts of the federal or State government in either its sovereign or contractual capacity.
- If the failure to perform is caused by the default of a Subcontractor at any tier, and if the cause of the default is beyond the control of both the Contractor and Subcontractor, and without the fault or negligence of either, the Contractor shall not be liable for any excess costs for failure to perform.
25. **RIGHTS AND REMEDIES OF STATE FOR DEFAULT:**
- a) In the event any Deliverables furnished or Services provided by the Contractor in

the performance of the Contract should fail to conform to the requirements herein, or to the sample submitted by the Contractor, the State may reject the same, and it shall become the duty of the Contractor to reclaim and remove the item promptly or to correct the performance of Services, without expense to the State, and immediately replace all such rejected items with others conforming to the Contract.

- b) In addition to any other rights and remedies the State may have, the State may require the Contractor, at Contractor's expense, to ship Deliverables via air freight or expedited routing to avoid or minimize actual or potential delay if the delay is the fault of the Contractor.
- c) In the event of the termination of the Contract, either in whole or in part, by reason of default or breach by the Contractor, any loss or damage sustained by the State in procuring any items which the Contractor agreed to supply shall be borne and paid for by the Contractor (but subject to the clause entitled "Limitation of Liability").
- d) The State reserves the right to offset the reasonable cost of all damages caused to the State against any outstanding invoices or amounts owed to the Contractor or to make a claim against the Contractor therefore.

26. LIMITATION OF LIABILITY:

- a) Except as may be otherwise approved by the State or its designee, Contractor's liability for damages to the State for any cause whatsoever, and regardless of the form of action, whether in Contract or in tort, shall be limited to the Purchase Price. For purposes of this sub-section (a), "Purchase Price" will mean the aggregate Contract price; except that, with respect to a Contract under which multiple purchase orders will be issued (e.g., a Master Agreement or Multiple Award Schedule contract), "Purchase Price" will mean the total price of the purchase order for the Deliverable(s) or Service(s) that gave rise to the loss, such

that the Contractor will have a separate limitation of liability for each purchase order.

- b) Unless otherwise specified in the General or Special Provisions, the foregoing limitation of liability shall not apply to the following: (i) any liability under Section 28 of the General Provisions entitled "Indemnification"; (ii) any liability under Section 7 of the General Provisions entitled "Compliance with Statutes and Regulations"; (iii) any liability under Section 8 of the General Provisions entitled "Contractor's Power and Authority"; (iv) any liability under Section 43 of the General Provisions entitled "Patent, Copyright, and Trade Secret Indemnity"; (v) claims arising under provisions herein calling for indemnification for third party claims against the State for death, bodily injury to persons, or damage to real or tangible personal property caused by Contractor's negligence or misconduct; or (vi) costs or attorneys' fees that the State becomes entitled to recover as a prevailing party in any action.
- c) The State's liability for damages for any cause whatsoever, and regardless of the form of action, whether in Contract or in tort, shall be limited to the Purchase Price, as that term is defined in subsection (a) above. Nothing herein shall be construed to waive or limit the State's sovereign immunity or any other immunity from suit provided by law.
- d) In no event will either the Contractor or the State be liable for consequential, incidental, indirect, special, or punitive damages, even if notification has been given as to the possibility of such damages, except (i) to the extent that the Contractor's liability for such damages is specifically set forth in the Statement of Work or (ii) to the extent that the Contractor's liability for such damages arises out of subsection (b)(i), (b)(ii), or (b)(iv) above.
- e) Notwithstanding any provision of this Contract to the contrary, the parties expressly agree that the limitation of

liability provisions specified within subsection (a) of this Section of the General Provisions, shall be inapplicable to any damages incurred by the State arising directly or indirectly from a Breach caused by the failure of the Contractor to comply with the security requirements set forth within Appendix A-2 Special Provisions, Section 15.3.

- f) Liability caused directly or indirectly by Contractor's failure to comply with the security requirements set forth within Appendix A-2 Special Provisions, Section 15.3, shall be limited to no more than 200% of the Purchase Price.

27. CONTRACTOR'S LIABILITY FOR INJURY TO PERSONS OR DAMAGE TO PROPERTY:

- a) The Contractor shall be liable for damages arising out of injury to the person and/or damage to the property of the State, employees of the State, persons designated by the State for training, or any other person(s) other than agents or employees of the Contractor, designated by the State for any purpose, prior to, during, or subsequent to delivery, installation, acceptance, and use of the Deliverables either at the Contractor's site or at the State's place of business, provided that the injury or damage was caused by the fault or negligence of the Contractor.
- b) The Contractor shall not be liable for damages arising out of or caused by an alteration or an Attachment not made or installed by the Contractor, or for damage to alterations or Attachments that may result from the normal operation and maintenance of the Deliverables provided by the Contractor during the Contract.

28. INDEMNIFICATION:

- a) The Contractor agrees to indemnify, defend and save harmless the State, its officers, agents and employees from any and all claims, losses, costs, liabilities, damages or deficiencies, including interest, penalties and attorneys' fees, which arise from third party claims which:

- (i) Arise out of or are due to, or are alleged to arise out of or be due to, a breach by Contractor of any of its representations, warranties, covenants or other obligations, contained in Section 7(a), Compliance with Statutes and Regulations, or Section 8, Contractor's Power and Authority, of the Contract, with the details of such indemnification obligations stated in such sections, or
- (ii) Are caused by or result from, or are alleged to arise out of or result from, Contractor's acts or omissions constituting bad faith, willful misfeasance, negligence or reckless disregard of its duties under this Contract, or
- (iii) Accrue or result, or are alleged to accrue or result, to any and all contractors, Subcontractors, suppliers, laborers, and any other person, firm, or corporation furnishing or supplying to Contractor work, Services, materials, or supplies in connection with the performance of this Contract, and from any and all claims and losses accruing or resulting to any person, firm or corporation who may be injured or damaged by Contractor in the performance of this Contract, or
- (iv) Arise out of or are due to, or are alleged to arise out of or be due to, any claim or allegation of infringement, misappropriation or violation of any patent, copyright, trademark, trade secret, domain name or other intellectual property right comprising or involving any of the subject inventions, prior inventions or other inventions provided in any way by the Contractor and used, reproduced or otherwise exploited by the State in connection with any of the Contract programs or any turnover thereof, which indemnification shall be pursuant to Section 43 of these General Provisions, or

- (v) Arise out of or are due to, or are alleged to arise out of or be due to, any violation of applicable security or privacy laws, by the Contractor or any Subcontractor or agent under the Contractor's control.
- (vi) With regard to (a)(ii) above, where claims arise from Contractor's acts or omissions constituting negligence, the Contractor's liability for claims, losses, costs, liabilities, damages or deficiencies, including interest, penalties and attorneys' fees, shall be limited to \$50 million.
- b) If and to the extent that the Contractor has knowledge of a claim that it believes may develop into an action that would be subject to this Contract, the Contractor must promptly notify the State of the claim.
- c) **Right to Tender or Undertake Defense.** If the State is named a party in any judicial, administrative, or other proceeding arising out of or in connection a matter for which the Contractor is obligated to indemnify the State under this Provision of this Contract, then the State will have the option at any time to either (a) tender its defense to Contractor, in which case the Contractor will provide qualified attorneys, consultants, and other appropriate professionals to represent the State's interests at Contractor's expense, or (b) undertake its own defense, choosing the attorneys, consultants, and other appropriate professionals to represent its interests, in which case the Contractor will be responsible for and shall pay reasonable fees and expenses of such attorneys, consultants, and appropriate professionals. If the State elects option (b) above, the Contractor shall be afforded a reasonable opportunity to participate in the defense and attend the legal proceedings at its own expense. However the State shall have sole control of the defense.
- d) **Right to Control Resolution:** Notwithstanding that the State may have tendered its defense to the Contractor, neither party shall settle, compromise or resolve any claims, causes of action, liabilities or damages against the State

without the consent of the other party, which consent shall not be unreasonably withheld. Any such resolution will not relieve the Contractor of its obligation to indemnify the State.

- 29. **INVOICES:** Unless otherwise specified, invoices shall be sent to the address set forth herein. Invoices shall be submitted in triplicate and shall include the Contract number; release order number (if applicable); item number; unit price, extended item price and invoice total amount. State sales tax and/or use tax shall be itemized separately and added to each invoice as applicable.
- 30. **REQUIRED PAYMENT DATE:** Payment will be made in accordance with the provisions of the California Prompt Payment Act, Government Code Section 927 et. seq. Unless expressly exempted by statute, the Act requires State agencies to pay properly submitted, undisputed invoices not more than 45 days after (i) the date of acceptance of Deliverables or performance of Services; or (ii) receipt of an undisputed invoice, whichever is later.
- 31. **TAXES:** Unless otherwise required by law, the State of California is exempt from Federal excise taxes. The State will only pay for any State or local sales or use taxes on the Services rendered or Goods supplied to the State pursuant to this Contract.
- 32. **NEWLY MANUFACTURED GOODS:** All Goods furnished under this Contract shall be newly manufactured Goods or certified as new and warranted as new by the manufacturer; used or reconditioned Goods are prohibited, unless otherwise specified.
- 33. **CONTRACT MODIFICATION:** No amendment or variation of the terms of this Contract shall be valid unless made in writing, signed by the parties and approved as required. Notwithstanding the foregoing, service agreements may be modified by service provider from time to time without the necessity of amending the Contract so long as any such modification does not degrade the functionality or security features of the Cloud Services, pose unacceptable level of risk to the State, or amend or modify any clauses of this Contract. Service agreements shall be subject to Order of Precedence. In

the event of the conflict between the terms of the Contract and any subsequently modified online terms, the Contract shall take precedence pursuant to Order of Precedence. No oral understanding or agreement not incorporated in the Contract is binding on any of the parties.

34. **CONFIDENTIALITY OF DATA:** All financial, statistical, personal, technical and other data and information relating to the State's operation which are designated confidential by the State and made available to the Contractor in order to carry out this Contract, or which become available to the Contractor in carrying out this Contract, shall be protected by the Contractor from unauthorized use and disclosure through the observance of the same or more effective procedural requirements as are applicable to the State. The identification of all such confidential data and information as well as the State's procedural requirements for protection of such data and information from unauthorized use and disclosure shall be provided by the State in writing to the Contractor. Contractor shall comply, and ensure compliance by the service provider, with the security and data protection provisions set forth in this Contract. Contractor shall have appropriate agreements in place to ensure confidentiality and security of State Data required pursuant to the Contract. Contractor shall ensure that all Contractor and service provider personnel with access to State Data shall comply with security and confidentiality obligations set forth in the Contract. If the methods and procedures employed by the Contractor for the protection of the Contractor's data and information are deemed by the State to be adequate for the protection of the State's ~~confidential~~ Confidential information Information, such methods and procedures may be used, with the written consent of the State, to carry out the intent of this paragraph. The Contractor shall not be required under the provisions of this paragraph to keep confidential any data or information which is or becomes publicly available, is already rightfully in the Contractor's possession without obligation of

confidentiality, is independently developed by the Contractor outside the scope of this Contract, or is rightfully obtained from third parties. All rights, including all intellectual property rights, in and to State Data, shall remain the exclusive property of the State. Contractor has a limited, non-exclusive license to access and use State Data solely for performing its obligations under the Contract. Nothing herein shall be construed to confer any license or right to State Data, including User tracking and exception data within the System, by implication, estoppel, or otherwise, under U.S. Intellectual Property Rights, to any third-party. Unauthorized use of State Data by Contractor or third parties is prohibited. For the purposes of this requirement, the phrase "unauthorized use" includes data mining, machine learning from data, or processing of data, stored or transmitted by the System, for any purpose that is not authorized by the Contract or Statement of Work. Contractor shall not collect, use, disclose, retain, or maintain (collectively, "use") State Data except as necessary and proportionate to perform Contractor's obligations under the Contract. Contractor shall not: (a) transfer, share, rent, barter, trade, sell, loan, lease, or otherwise distribute or make available to any third party any State Data except as expressly permitted by the Contract; (b) copy, modify, destroy, or delete State Data during the Contract term; and (c) shall not sell or share State Data or Personal Information collected in the service of the Contract with the State. For the purposes of this, "collect" and "collected" have the meaning provided in Civil Code section 1798.140, subdivision (f); and (b) "sell" has the meaning provided in Civil Code section 1798.140, subdivision (ad)(1).

35. **NEWS RELEASES:** Unless otherwise exempted, news releases, endorsements, advertising, and social media content pertaining to this Contract shall not be made without prior written approval of the State.
36. **DOCUMENTATION:**
- a) The Contractor agrees to provide to the State, at no charge, all Documentation as described within the Statement of Work,

and updated versions thereof, which are necessary or useful to the State in its use of the System provided hereunder. The Contractor agrees to provide additional Documentation at prices not in excess of charges made by the Contractor to its other customers for similar Documentation.

- b) If the Contractor is unable to perform maintenance or the State desires to perform its own maintenance on the System or other project Deliverables or Services implemented or purchased under this Contract then upon written Notice by the State the Contractor will provide at Contractor's then current rates and fees adequate and reasonable assistance including relevant Documentation to allow the State to maintain the System or other project Deliverables or Services based on the Contractor's methodology. The Contractor agrees that the State may reproduce such Documentation for its own use in maintaining the System or other project Deliverables or Services. If the Contractor is unable to perform maintenance, the Contractor agrees to license any other Contractor that the State may have hired to maintain the Equipment to use the above noted Documentation. The State agrees to include the Contractor's copyright notice on any such Documentation reproduced, in accordance with copyright instructions to be provided by the Contractor.

37. RIGHTS IN WORK PRODUCT:

- a) All inventions, discoveries, intellectual property, technical communications and records originated or prepared by the Contractor pursuant to this Contract including papers, reports, charts, computer programs, and other Documentation or improvements thereto, and including the Contractor's administrative communications and records relating to this Contract (collectively, the "Work Product"), shall be the State's exclusive property. The State shall retain all ownership rights in any Software or modifications thereof

and associated documentation designed, developed or installed with Federal financial participation as required by subdivision (a) of 45 CFR 95.617. The U.S. Department of Health and Human Services reserves a royalty-free, non-exclusive and irrevocable license to reproduce, publish and otherwise use and to authorize others to use for Federal Government purposes such Software, modifications and documentation as required by subdivision (b) of 45 CFR 95.617. Proprietary operating/vendor Software packages which are provided at established catalog or market prices and sold or leased to the general public shall not be subject to the ownership provisions in required by subdivisions (a) and (b) of 45 CFR 95.617. The provisions of this sub-section a) may be revised in a Statement of Work.

- b) Software, Cloud Services, and other materials developed or otherwise obtained by or for the Contractor or its affiliates independently of this Contract or applicable purchase order ("Pre-Existing Materials") do not constitute Work Product. If the Contractor creates derivative works of Pre-Existing Materials, the elements of such derivative works created pursuant to this Contract constitute Work Product, but other elements do not. Nothing in this Section 37 will be construed to interfere with the Contractor's or its affiliates' ownership of Pre-Existing Materials.
- c) The ideas, concepts, know-how, or techniques relating to data processing, developed during the course of this Contract by the Contractor or jointly by the Contractor and the State may be used by either party without obligation of notice or accounting.
- d) This Contract shall not preclude the Contractor from developing materials outside this Contract that are competitive, irrespective of their similarity to materials which might be delivered to the State pursuant to this Contract.
- 38. SOFTWARE LICENSE:** Unless otherwise specified in the Statement of Work and

subject to the Federal Government purposes provisions in Provision 37 sub-section (a), the Contractor hereby grants to the State and the State accepts from the Contractor, subject to the terms and conditions of this Contract, a perpetual, irrevocable, royalty-free, nonexclusive, license to use Custom Software, Cloud Services, and any Documentation or Work Product in this Contract.

- a) Upon written request of the State, the Contractor shall execute a written agreement naming the State and the U.S. Federal Government as licensees, memorializing the terms of the license in a form acceptable to the State.
- b) Acceptance of Third-Party Software and Custom Software will be governed by the terms and conditions of this Contract.

39. PROTECTION OF PROPRIETARY SOFTWARE AND OTHER PROPRIETARY DATA:

- a) The State agrees that all material appropriately marked or identified in writing as proprietary, and furnished hereunder are provided for the State's exclusive use for the purposes of this Contract only. All such proprietary data shall remain the property of the Contractor. The State agrees to take all reasonable steps to insure that such proprietary data are not disclosed to others, without prior written consent of the Contractor, subject to the California Public Records Act.
- b) The State will insure, prior to disposing of any media, that any licensed materials contained thereon have been erased or otherwise destroyed.
- c) The State agrees that it will take appropriate action by instruction, agreement or otherwise with its employees or other persons permitted access to licensed software and other proprietary data to satisfy its obligations in this Contract with respect to use, copying, modification, protection and security of proprietary software and other proprietary data.

40. RIGHT TO COPY OR MODIFY:

- a) Any Software provided by the Contractor in machine-readable form may be copied, in whole or in part, in printed or machine-readable form for use by the State with the Cloud Services or Machine, to perform one-time benchmark tests, for archival or emergency restart purposes, to replace a worn copy, to understand the contents of such machine-readable material, or to modify the Software as provided below; provided, however, that no more than the number of printed copies and machine-readable copies as specified in the Statement of Work will be in existence under this Contract at any time without prior written consent of the Contractor. Such consent shall not be unreasonably withheld by the Contractor. The original, and any copies of the Software, in whole or in part, which are made hereunder shall be the property of the Contractor.
- b) The State may modify any non-personal computer Software, in machine-readable form, for its own use and merge it into other program material. Any portion of the Software included in any merged program material shall be used only on the Cloud Services or Machines and shall be subject to the terms and conditions of the Contract.

- 41. FUTURE RELEASES:** Unless otherwise specifically provided in this Contract, or the Statement of Work, if improved versions, e.g., patches, bug fixes, updates or releases, of any Software or Cloud Services are developed by the Contractor, and are made available to other licensees, they will be made available to the State at no additional cost only if such are made available to other licensees at no additional cost. If the Contractor offers new versions or upgrades to the Software or Cloud Services, they shall be made available to the State at the State's option at a price no greater than the Contract price plus a price increase proportionate to the increase from the list price of the original version to that of the new version, if any. If the Software or Cloud Services has no list price, such price increase will be proportionate to the increase in average

price from the original to the new version, if any, as estimated by the Contractor in good faith.

42. ENCRYPTION/CPU ID AUTHORIZATION CODES:

- a) When Encryption/CPU Identification (ID) authorization codes are required to operate the Cloud Services or Software, the Contractor will provide all codes to the State with delivery of the Cloud Services or Software.
- b) In case of an inoperative Cloud Service or Machine, the Contractor will provide a temporary encryption/CPU ID authorization code to the State for use on a temporarily authorized CPU until the Cloud Services or Machine is returned to operation.
- c) When changes in the Cloud Services or Machines occur, the State will notify the Contractor via telephone and/or e-mail of such change. Upon receipt of such notice, the Contractor will issue via telephone and/or e-mail to the State within 24 hours, a temporary encryption ID authorization code for use on the Cloud Services or Machine until such time as permanent code is assigned.

43. PATENT, COPYRIGHT AND TRADE SECRET INDEMNITY:

- a) Contractor will indemnify, defend, and save harmless the State, Federal Government, their officers, agents, and employees, from any and all third party claims, costs (including without limitation reasonable attorneys' fees), and losses for infringement or violation of any U.S. Intellectual Property Right by any product or service provided hereunder. With respect to claims arising from computer Hardware or Software manufactured by a third party and sold by Contractor as a reseller, Contractor will pass through to the State and Federal Government such indemnity rights as it receives from such third party ("Third Party Obligation") and will cooperate in enforcing them; provided that if the third party manufacturer fails to honor the Third Party Obligation, Contractor will provide the State and

Federal Government with indemnity protection equal to that called for by the Third Party Obligation, but in no event greater than that called for in the first sentence of this Section). The provisions of the preceding sentence apply only to third party Cloud Services, Hardware or Software sold as a distinct unit and accepted by the State.

Unless a Third Party Obligation provides otherwise, the defense and payment obligations set forth in this Section will be conditional upon the following:

- (i) The State will notify the Contractor of any such claim in writing and tender the defense thereof within a reasonable time; and
 - (ii) The Contractor will have sole control of the defense of any action on such claim and all negotiations for its settlement or compromise; provided that (a) when substantial principles of government or public law are involved, when litigation might create precedent affecting future State operations or liability, or when involvement of the State is otherwise mandated by law, the State may participate in such action at its own expense with respect to attorneys' fees and costs (but not liability); (b) where a settlement would impose liability on the State, affect principles of California government or public law, or impact the authority of the State, the State will have the right to approve or disapprove any settlement or compromise, which approval will not unreasonably be withheld or delayed; and (c) the State will reasonably cooperate in the defense and in any related settlement negotiations.
- b) Should the Deliverables, or the operation thereof, become, or in the Contractor's opinion are likely to become, the subject of a claim of infringement or violation of a U.S. Intellectual Property Right, the State shall permit the Contractor, at its option and expense, either to procure for the

State the right to continue using the Deliverables, or to replace or modify the same so that they become non-infringing. If none of these options can reasonably be taken, or if the use of such Deliverables by the State shall be prevented by injunction, the Contractor agrees to take back such Deliverables and make every reasonable effort to assist the State in procuring substitute Deliverables. If, in the sole opinion of the State, the return of such infringing Deliverables makes the retention of other Deliverables acquired from the Contractor under this Contract impractical, the State shall then have the option of terminating such Contracts, or applicable portions thereof, without penalty or termination charge. The Contractor agrees to take back such Deliverables and refund any sums the State has paid the Contractor less any reasonable amount for use or damage.

- c) The Contractor shall have no liability to the State under any provision of this clause with respect to any claim of patent, copyright or trade secret infringement which is based upon:
- (i) The combination or utilization of Deliverables furnished hereunder with Equipment, Software or devices not made or furnished by the Contractor; or,
 - (ii) The operation of Equipment furnished by the Contractor under the control of any Operating Software other than, or in addition to, the current version of Contractor-supplied Operating Software; or
 - (iii) The modification initiated by the State, or a third party at the State's direction, of any Deliverable furnished hereunder; or
 - (iv) The combination or utilization of Software furnished hereunder with non-Contractor supplied Software.
- d) The Contractor certifies that it has appropriate systems and controls in place to ensure that State funds will not be used in the performance of this

Contract for the acquisition, operation or maintenance of computer Software in violation of copyright laws.

44. DISPUTES:

- a) The parties shall deal in good faith and attempt to resolve potential disputes informally. If the dispute persists, the Contractor shall submit to the contracting Department Procurement Chief a written demand for a final decision regarding the disposition of any dispute between the parties arising under, related to or involving this Contract. Contractor's written demand shall be fully supported by factual information, and if such demand involves a cost adjustment to the Contract, the Contractor shall include with the demand a written statement signed by an authorized person indicating that the demand is made in good faith, that the supporting data are accurate and complete and that the amount requested accurately reflects the Contract adjustment for which Contractor believes the State is liable. The contracting Department Procurement Chief shall have 30 days after receipt of Contractor's written demand invoking this Section "Disputes" to render a written decision. If a written decision is not rendered within 30 days after receipt of the Contractor's demand, it shall be deemed a decision adverse to the Contractor's contention. If the Contractor is not satisfied with the decision of the contracting Department Procurement Chief, the Contractor may appeal the decision, in writing, within 15 days of its issuance (or the expiration of the 30 day period in the event no decision is rendered by the contracting department), to the Department Executive Steering Committee, State, who shall have 45 days to render a final decision. If the Contractor does not appeal the decision of the Department Procurement Chief, the decision shall be conclusive and binding regarding the dispute and the Contractor shall be barred from commencing an action in court, or with the Victims Compensation Government

Claims Board, for failure to exhaust Contractor's administrative remedies.

- b) Pending the final resolution of any dispute arising under, related to or involving this Contract, Contractor agrees to diligently proceed with the performance of this Contract, including the delivery of Goods or providing of Services in accordance with the State's instructions regarding this Contract. Contractor's failure to diligently proceed in accordance with the State's instructions regarding this Contract shall be considered a material breach of this Contract.
- c) Any final decision of the State shall be expressly identified as such, shall be in writing, and shall be signed by the Department Director or designee if an appeal was made. If the Department Director or designee fails to render a final decision within 45 days after receipt of the Contractor's appeal for a final decision, it shall be deemed a final decision adverse to the Contractor's contentions. The State's final decision shall be conclusive and binding regarding the dispute unless the Contractor commences an action in a court of competent jurisdiction to contest such decision within 90 days following the date of the final decision or one (1) year following the accrual of the cause of action, whichever is later.
- d) For disputes involving purchases made by the State, the Contractor shall submit to the Department Procurement Chief a written demand for a final decision, which shall be fully supported in the manner described in subsection (a) above. The Department Procurement Chief shall have 30 days to render a final decision. If a final decision is not rendered within 30 days after receipt of the Contractor's demand, it shall be deemed a final decision adverse to the Contractor's contention. The final decision shall be conclusive and binding regarding the dispute unless the Contractor commences an action in a court of competent jurisdiction to contest such

decision within 90 days following the date of the final decision or one (1) year following the accrual of the cause of action, whichever is later.

- e) The dates of decision and appeal in this Section may be modified by mutual consent as applicable, except for the time to commence an action in a court of competent jurisdiction.

45. STOP WORK:

- a) The State may, at any time, by written Stop Work Order to the Contractor, require the Contractor to stop all, or any part, of the work called for by this Contract for a period up to 45 days after the Stop Work Order is delivered to the Contractor, and for any further period to which the parties may agree. The Stop Work Order shall be specifically identified as such and shall indicate it is issued under this clause. Upon receipt of the Stop Work Order, the Contractor shall immediately comply with its terms and take all reasonable steps to minimize the incurrence of costs allocable to the work covered by the Stop Work Order during the period of work stoppage. Within a period of 45 days after a Stop Work Order is delivered to the Contractor, or within any extension of that period to which the parties shall have agreed, the State shall either:
 - (i) Cancel the Stop Work Order; or
 - (ii) Terminate the work covered by the Stop Work Order as provided for in the termination for default or the termination for convenience clause of this Contract.
- b) If a Stop Work Order issued under this clause is canceled or the period of the Stop Work Order or any extension thereof expires, the Contractor shall resume work. The State shall make an equitable adjustment in the delivery schedule, the Contract price or both, and the Contract shall be modified, in writing, accordingly, if:
 - (i) The Stop Work Order results in an increase in the time required for, or in the Contractor's cost properly

allocable to the performance of any part of this Contract; and
(ii) The Contractor asserts its right to an equitable adjustment within 60 days after the end of the period of work stoppage; provided, that if the State decides the facts justify the action, the State may receive and act upon a proposal submitted at any time before final payment under this Contract.

- c) If a Stop Work Order is not canceled and the work covered by the Stop Work Order is terminated in accordance with the provision entitled Termination for the Convenience of the State, the State shall allow reasonable costs resulting from the Stop Work Order in arriving at the termination settlement.
- d) The State shall not be liable to the Contractor for loss of profits because of a Stop Work Order issued under this clause.

46. EXAMINATION AND AUDIT: The Contractor agrees that the State or its designated representative shall have the right to review and copy any records and supporting documentation directly pertaining to performance of this Contract. The Contractor agrees to maintain such records for possible audit for a minimum of ten (10) years after final payment under this Contract, unless a longer period of records retention is stipulated. The Contractor agrees to allow the auditor(s) access to such records during normal business hours and in such a manner so as to not interfere unreasonably with normal business activities and to allow interviews of any employees or others who might reasonably have information related to such records. Further, the Contractor agrees to include a similar right of the State to audit records and interview staff in any subcontract related to performance of this Contract. The State shall provide reasonable advance written Notice of such audit(s) to the Contractor. Regarding Data Center and Cloud Services: Unless otherwise provided in the Statement of Work, for all Contracts requiring NIST SP 800- 53 MODERATE or

higher-level Security and Privacy Controls for Systems and Organizations, Contractor shall undergo an annual Statement on Standards for Attestation Engagements (SSAE) No. 18 Service Organization Control (SOC) 2 Type II audit (or successor), at its own expense, of: (1) its data centers, and (2) Cloud Services that in any way interact with the State's System or Non-Public Data. Contractor shall provide a redacted version of audit reports and Contractor's plan to correct any negative findings upon request. Contractor may remove its proprietary information from the redacted version.

47. FOLLOW ON CONTRACTS:

If the Contractor or its affiliates provides Technical Consulting and Direction (as defined below), the Contractor and its affiliates:

- (i) will not be awarded a subsequent contract to supply the service or system, or any significant component thereof, that is used for or in connection with any subject of such Technical Consulting and Direction; and
- (ii) will not act as consultant to any person or entity that does receive a contract described in sub-section (i). This prohibition will continue for one (1) year after termination of this Contract or completion of the Technical Consulting and Direction, whichever comes later.
 - a) "Technical Consulting and Direction" means Services for which the Contractor received compensation from the State and includes:
 - (i) development of or assistance in the development of work statements, specifications, solicitations, or feasibility studies;
 - (ii) development or design of test requirements;
 - (iii) evaluation of test data;
 - (iv) direction of or evaluation of another Contractor;
 - (v) provision of formal recommendations regarding the acquisition of Information

Technology products or Services;
or

- (vi) provisions of formal recommendations regarding any of the above. For purposes of this Section, “affiliates” are employees, directors, partners, joint venture participants, parent corporations, subsidiaries, or any other entity controlled by, controlling, or under common control with the Contractor. Control exists when an entity owns or directs more than fifty percent (50%) of the outstanding shares or securities representing the right to vote for the election of directors or other managing authority.
- b) To the extent permissible by law, the State, or its designee, may waive the restrictions set forth in this Section by written Notice to the Contractor if the Director determines their application would not be in the State’s best interest. Except as prohibited by law, the restrictions of this Section will not apply:
 - (i) to follow-on advice given by vendors of commercial off-the-shelf products, including Cloud Services, Software, and Hardware, on the operation, integration, repair, or maintenance of such products after sale; or
 - (ii) where the State has entered into a master agreement for Software or services and the scope of work at the time of Contract execution expressly calls for future recommendations among the Contractor’s own products.
- c) The restrictions set forth in this Section are in addition to conflict of interest restrictions imposed on public Contractors by California law (“Conflict Laws”). In the event

of any inconsistency, such Conflict Laws override the provisions of this Section, even if enacted after execution of this Contract.

48. PRIORITY HIRING CONSIDERATIONS: If this Contract includes services in excess of \$200,000, the Contractor shall give priority consideration in filling vacancies in positions funded by the Contract to qualified recipients of aid under Welfare and Institutions Code Section 11200 in accordance with PCC Section 10353.

49. COVENANT AGAINST GRATUITIES: The Contractor warrants that no gratuities (in the form of entertainment, gifts, or otherwise) were offered or given by the Contractor, or any agent or representative of the Contractor, to any officer or employee of the State with a view toward securing the Contract or securing favorable treatment with respect to any determinations concerning the performance of the Contract. For breach or violation of this warranty, the State shall have the right to terminate the Contract, either in whole or in part, and any loss or damage sustained by the State in procuring on the open market any items which the Contractor agreed to supply shall be borne and paid for by the Contractor. The rights and remedies of the State provided in this clause shall not be exclusive and are in addition to any other rights and remedies provided by law or in equity.

50. NONDISCRIMINATION CLAUSE:

- a) During the performance of this Contract, the Contractor and its Subcontractors shall not unlawfully discriminate, harass or allow harassment, against any employee or applicant for employment because of sex, sexual orientation, race, color, ancestry, religious creed, national origin, disability (including HIV and AIDS), medical condition (cancer), age, marital status, and denial of family care leave. The Contractor and Subcontractors shall insure that the evaluation and treatment of their employees and applicants for employment are free from such discrimination and harassment. The

Contractor and Subcontractors shall comply with the provisions of the Fair Employment and Housing Act (Government Code, Section 12990 et seq.) and the applicable regulations promulgated thereunder (California Code of Regulations, Title 2, and Section 7285.0 et seq.). The applicable regulations of the Fair Employment and Housing Commission implementing Government Code Section 12990 (a-f), set forth in Chapter 5 of Division 4 of Title 2 of the California Code of Regulations are incorporated into this Contract by reference and made a part hereof as if set forth in full. The Contractor and its Subcontractors shall give written Notice of their obligations under this clause to labor organizations with which they have a collective bargaining or other agreement.

- b) The Contractor shall include the nondiscrimination and compliance provisions of this clause in all subcontracts to perform work under the Contract.

51. NATIONAL LABOR RELATIONS BOARD

CERTIFICATION: The Contractor swears under penalty of perjury that no more than one final, unappealable finding of contempt of court by a federal court has been issued against the Contractor within the immediately preceding two-year period because of the Contractor's failure to comply with an order of the National Labor Relations Board. This provision is required by, and shall be construed in accordance with, PCC Section 10296.

52. ASSIGNMENT OF ANTITRUST ACTIONS:

Pursuant to Government Code Sections 4552, 4553, and 4554, the following provisions are incorporated herein:

- a) In submitting a bid to the State, the supplier offers and agrees that if the bid is accepted, it will assign to the State all rights, title, and interest in and to all causes of action it may have under Section 4 of the Clayton Act (15 U.S.C. 15) or under the Cartwright Act (Chapter 2, commencing with Section 16700, of Part 2 of Division 7 of the Business and

Professions Code), arising from purchases of Goods, material or other items, or services by the supplier for sale to the State pursuant to the solicitation. Such assignment shall be made and become effective at the time the State tenders final payment to the supplier.

- b) If the State receives, either through judgment or settlement, a monetary recovery for a cause of action assigned under this chapter, the assignor shall be entitled to receive reimbursement for actual legal costs incurred and may, upon demand, recover from the State any portion of the recovery, including treble damages, attributable to overcharges that were paid by the assignor but were not paid by the State as part of the bid price, less the expenses incurred in obtaining that portion of the recovery.
- c) Upon demand in writing by the assignor, the assignee shall, within one year from such demand, reassign the cause of action assigned under this part if the assignor has been or may have been injured by the violation of law for which the cause of action arose and
 - (i) the assignee has not been injured thereby, or
 - (ii) the assignee declines to file a court action for the cause of action.

53. DRUG FREE WORKPLACE

CERTIFICATION: The Contractor certifies under penalty of perjury under the laws of the State of California that the Contractor will comply with the requirements of the Drug-Free Workplace Act of 1990 (Government Code Section 8350 et seq.) and will provide a drug-free workplace by taking the following actions:

- a) Publish a statement notifying employees that unlawful manufacture, distribution, dispensation, possession, or use of a controlled substance is prohibited and specifying actions to be taken against employees for violations, as required by Government Code Section 8355(a).

- b) Establish a Drug-Free Awareness Program as required by Government Code Section 8355(b) to inform employees about all of the following:
 - (i) the dangers of drug abuse in the workplace;
 - (ii) the person's or organization's policy of maintaining a drug-free workplace;
 - (iii) any available counseling, rehabilitation and employee assistance programs; and,
 - (iv) penalties that may be imposed upon employees for drug abuse violations.
- c) Provide, as required by Government Code Section 8355(c), that every employee who works on the proposed or resulting Contract:
 - (i) will receive a copy of the company's drug-free policy statement; and,
 - (ii) will agree to abide by the terms of the company's statement as a condition of employment on the Contract.

54. FOUR-DIGIT DATE COMPLIANCE:

Contractor warrants that it will provide only Four-Digit Date Compliant (as defined below) Deliverables and/or Services to the State. "Four Digit Date Compliant" Deliverables and Services can accurately process, calculate, compare, and sequence date data, including without limitation date data arising out of or relating to leap years and changes in centuries. This warranty and representation is subject to the warranty terms and conditions of this Contract and does not limit the generality of warranty obligations set forth elsewhere herein.

55. SWEATFREE CODE OF CONDUCT:

- a) Contractor declares under penalty of perjury that no equipment, materials, or supplies furnished to the State pursuant to the Contract have been produced in whole or in part by sweatshop labor, forced labor, convict labor, indentured labor under penal sanction, abusive forms of child labor or exploitation of children in sweatshop labor, or with the benefit of sweatshop labor, forced labor, convict labor, indentured

labor under penal sanction, abusive forms of child labor or exploitation of children in sweatshop labor. The Contractor further declares under penalty of perjury that they adhere to the Sweatfree Code of Conduct as set forth on the California Department of Industrial Relations website located at www.dir.ca.gov, and Public Contract Code Section 6108.

- b) The Contractor agrees to cooperate fully in providing reasonable access to its records, documents, agents or employees, or premises if reasonably required by authorized officials of the State, the Department of Industrial Relations, or the Department of Justice to determine the Contractor's compliance with the requirements under paragraph (a).

56. RECYCLED CONTENT REQUIREMENTS:

The Contractor shall certify in writing under penalty of perjury, the minimum, if not exact, percentage of post-consumer material (as defined in the Public Contract Code (PCC) Section 12200-12209), in products, materials, goods, or supplies offered or sold to the State that fall under any of the statutory categories regardless of whether the product meets the requirements of Section 12209. The certification shall be provided by the contractor, even if the product or good contains no postconsumer recycled material, and even if the postconsumer content is unknown. With respect to printer or duplication cartridges that comply with the requirements of Section 12156(e), the certification required by this subdivision shall specify that the cartridges so comply (PCC 12205 (b)(2)). A state agency contracting officer may waive the certification requirements if the percentage of postconsumer material in the products, materials, goods, or supplies can be verified in a written advertisement, including, but not limited to, a product label, a catalog, or a manufacturer or vendor Internet web site. Contractors are to use, to the maximum extent economically feasible in the performance of the contract work, recycled content products (PCC 12203(d)).

57. CHILD SUPPORT COMPLIANCE ACT:

For any Contract in excess of \$100,000, the Contractor acknowledges in accordance with PCC Section 7110, that:

- a) The Contractor recognizes the importance of child and family support obligations and shall fully comply with all applicable State and federal laws relating to child and family support enforcement, including, but not limited to, disclosure of information and compliance with earnings assignment orders, as provided in Chapter 8 (commencing with Section 5200) of Part 5 of Division 9 of the Family Code; and
- b) The Contractor, to the best of its knowledge is fully complying with the earnings assignment orders of all employees and is providing the names of all new employees to the New Hire Registry maintained by the California Employment Development Department.

58. AMERICANS WITH DISABILITIES ACT:

The Contractor assures the State that the Contractor complies with the Americans with Disabilities Act of 1990 (42 U.S.C. 12101 et seq.).

59. ELECTRONIC WASTE RECYCLING ACT OF 2003:

The Contractor certifies that it complies with the applicable requirements of the Electronic Waste Recycling Act of 2003, Chapter 8.5, Part 3 of Division 30, commencing with Section 42460 of the Public Resources Code. The Contractor shall maintain documentation and provide reasonable access to its records and documents that evidence compliance.

60. USE TAX COLLECTION: In accordance with PCC Section 10295.1, the Contractor certifies that it complies with the requirements of Section 7101 of the Revenue and Taxation Code. Contractor further certifies that it will immediately advise the State of any change in its retailer's seller's permit or certification of registration or applicable affiliate's seller's permit or certificate of registration as described in subdivision (a) of PCC Section 10295.1.

61. EXPATRIATE CORPORATIONS: Contractor hereby declares that it is not an expatriate corporation or subsidiary of an expatriate corporation within the meaning of PCC

Sections 10286 and 10286.1, and is eligible to contract with the State.

62. DOMESTIC PARTNERS: For contracts over \$100,000 executed or amended after January 2007, the Contractor certifies that the Contractor is in compliance with Public Contract Code Section 10295.3.

63. SMALL BUSINESS PARTICIPATION AND DVBE PARTICIPATION REPORTING REQUIREMENTS:

- a) If for this Contract the Contractor made a commitment to achieve small business participation, then the Contractor must within 60 days of receiving final payment under this Contract (or within such other time period as may be specified elsewhere in this Contract) report to the awarding department the actual percentage of small business participation that was achieved. (Govt. Code § 14841.)
- b) If for this Contract the Contractor made a commitment to achieve disabled veteran business enterprise (DVBE) participation, then Contractor must within 60 days of receiving final payment under this Contract (or within such other time period as may be specified elsewhere in this Contract) certify in a report to the awarding department: (1) the total amount the prime Contractor received under the Contract; (2) the name and address of the DVBE(s) that participated in the performance of the Contract; (3) the amount each DVBE received from the prime Contractor; (4) that all payments under the Contract have been made to the DVBE; and (5) the actual percentage of DVBE participation that was achieved. A person or entity that knowingly provides false information shall be subject to a civil penalty for each violation. (Mil. & Vets. Code § 999.5(d); Govt. Code § 14841.)

64. LOSS LEADER: It is unlawful for any person engaged in business within this state to sell or use any article or product as a "loss leader" as defined in Section 17030 of the Business and Professions Code. (PCC 12104.5(b).).

**65. COMPLIANCE WITH DATA
PROTECTION LAWS, POLICIES &
REGULATIONS:**

Subject to Section 66 below but notwithstanding anything to the contrary in the Contract, Contractor shall comply with the data protection laws, regulations, and policies relating to the collection, maintenance, transmission, use, receipt, storage, disclosure, retention, destruction, unavailability, security, or other use or processing of State Data in connection with Contractor's provision of Deliverables under the Contract, including but not limited to, and to the extent applicable:

- a) the California Information Practices Act (Civil Code § 1798 et seq.),
- b) Federal Privacy Act of 1974,
- c) Health Insurance Portability and Accountability Act of 1996,
- d) IRS 1075 regulations,
- e) Health Information Technology for Economic and Clinical (HITECH) Act,
- f) Criminal Justice Information Services (CJIS) Security Policy,
- g) Social Security Administration (SSA) Electronic Information Exchange Security Requirements,
- h) Payment Card Industry (PCI) Data Security Standard (DSS),
- i) NIST Special Publications,
- j) California State Administrative Manual (SAM) (Chapters 4983, 5100, 5300), and
- k) California Statewide Information Management Manual (SIMM) Sections 5305A, 5310A and B, 5315-B, 5325A and B, 5340 A and C, and 5360B.

Contractor shall not take, or fail to take, any action that would put the State in violation of such data protection laws, policies, and regulations.

**66. DATA CLASSIFICATION STANDARDS
& SECURITY CONTROLS:**

- a) Unless otherwise specified in the Special Provisions or Statement of Work, security requirements designated in these provisions are assuming a National Institute of Standards and Technology (NIST) MODERATE classification. For a

higher or lower data classification standard, State shall:

- (i) Classify their data pursuant to the State Administrative Manual (SAM) 5305.5; and
 - (ii) Obtain approval from the State Chief Information Security Officer (CISO) or State Project Director or Designee prior to modifying this Section through the Statement of Work to meet the needs of the Contract.
- b) Contractor shall comply with the current version of the NIST Special Publication (SP) 800-53 Security and Privacy Controls for Systems and Organizations. Controls shall be applied at the MODERATE level. Subject to the prior written approval of the State CISO or designee, Contractor may submit a current ISO 27001 certification in satisfaction of the foregoing requirements of this subsection. Responsibility to obtain CISO approval lies with the State. Contractor shall comply with NIST 800-171, if applicable, and shall implement and maintain a System Security Plan with respect to any System that are part of the System or the Contractor has assisted the State to implement and any of Contractor's systems that in any way interact with the State's System or State Data. Contractor shall ensure such plan is reviewed annually.

Contractor shall implement and maintain all appropriate administrative, physical, technical, and procedural safeguards in accordance with applicable laws, policies, and regulations at all times during the Contract term, to secure State Data from Data Breach, and protect State Data and Systems, Services, Cloud Services and components thereof, from unauthorized or unlawful use, access, modification, disclosure or destruction, introduction of viruses, disabling devices, malware and other forms of

malicious or inadvertent acts that can disrupt the State's access.

End-to-end encryption shall be implemented for all Personal Information and Non-Public Data that is transmitted, stored, or accessed both inside and outside the secure internal network, including Contractor's servers. The Statement of Work or Service Level Agreement will specify which Party is responsible for encryption and access control of the State Data under the Contract. If the Statement of Work or Service Level Agreement are silent, then the State is responsible for encryption and access control. All Non-Public or Personal Information must be encrypted at rest and in transit with validated cryptography standards as referenced in FIPS 140-3 (or higher).

The Parties acknowledge that information transmitted by the State to Contractor or service provider may inadvertently contain Federal Tax Information (FTI). The State will use all reasonable efforts to prevent the transmittal of FTI to Contractor or service provider under the Contract. The State further acknowledges that Contractor or service provider does not require any "access" to, or "receipt" or "storage" of FTI to perform the Cloud Services under the Contract. Contractor or service provider further acknowledge that Contractor or service provider shall not knowingly access or permit access to such FTI, unless directed by the State. Access to FTI is out-of-scope of the Cloud Services. To the extent that Contractor's or service provider's access to FTI is "incidental" to Contractor's provision of Cloud Services, it is the Parties' view that such incidental exposure should not legally subject Contractor or service provider to the Internal Revenue Service (IRS) requirements set forth in IRS Publication 1075, Section 11.2. However, if the IRS ultimately takes a contrary position, and determines that Contractor, service provider or the State should have nevertheless complied with the requirements of IRS Publication 1075, the

Parties will immediately evaluate the feasibility of continued performance under the Contract.

Patch Management: Unless otherwise provided in the Statement of Work, all of Contractor's workstations, laptops, and other systems that process or store State Data must have operating system and application security patches applied, with system reboot if necessary. Contractor shall maintain a documented patch management process which determines installation timeframe based on risk assessment. At a minimum, emergency (vulnerability and active exploit) patches must be applied immediately, while critical (vulnerability and no exploit known) patches must be applied within 30 Days of release. All other applicable patches must be installed within 90 Days of release.

Endpoint Protection Standard: All Contractor workstations, laptops, and other systems used to process or store State Data must install and actively use a comprehensive endpoint protection solution that will at minimum comply with SIMM 5335-A.

67. **CLOUD SERVICE AVAILABILITY:** The minimum standards for Cloud Services availability shall be as set forth herein. Nothing herein precludes the State from specifying a higher standard for Cloud Services availability in the Special Provisions or Statement of Work. Requests for a lower Cloud Services availability standard shall require the written approval of the State CISO or State Project Director or Designee prior to Contract execution. Responsibility to obtain this approval lies with the State.
- The Cloud Services shall be available 24 hours per Day, 365 Days per year, excluding agreed-upon maintenance downtime (Cloud Service availability).
 - If the monthly Cloud Service availability averages less than 99.9% (excluding agreed-upon maintenance downtime), the State shall be entitled to recover damages, apply credits, or use other contractual remedies as set forth in the Contract.

- c) If the monthly Cloud Service availability averages less than 99.9% (excluding agreed-upon maintenance downtime) for 3 or more months in a rolling 12- month period, the State may terminate the Contract for material breach in accordance with Section 23 (Termination for Default).
- d) Contractor shall provide advance written Notice to the State in the manner set forth in the Contract of any major upgrades or changes that will affect Cloud Service availability.

68. **DATA AVAILABILITY:** The minimum standards for State Data availability shall be as set forth herein. Nothing herein prevents the State from specifying a higher standard for Data availability in the Special Provisions or Statement of Work. Requests for a lower Data availability standard shall require the written approval of the State CISO or State Project Director or Designee prior to Contract execution. Responsibility to obtain approval lies with the State.

- a) State Data shall be available 24 hours per Day, 365 Days per year, excluding agreed- upon maintenance downtime (Data availability).
- b) If the monthly Data availability averages less than 99.9% (excluding agreed-upon maintenance downtime), the State shall be entitled to recover damages, apply credits, or use other contractual remedies as set forth in the Special Provisions or Statement of Work if the State is unable to access the State Data as a result of: (i.) Acts or omissions of Contractor; (ii.) Acts or omissions of third parties working on behalf of Contractor; (iii.) Network compromise, network intrusion, hacks, introduction of viruses, disabling devices, malware and other forms of attack that can disrupt access to Contractor's server, to the extent such attack would have been prevented by Contractor taking reasonable industry standard precautions; or (iv.) Power outages or

other telecommunications or Internet failures, to the extent such outages were within Contractor's direct or express control.

- c) If the monthly Data Availability averages less than 99.9% (excluding agreed-upon maintenance downtime) for 3 or more months in a rolling 12- month period, the State may terminate the Contract for material breach in accordance with Section 23 (Termination for Default).

69. **ARTIFICIAL INTELLIGENCE:**

Disclosure Obligations:

- a) Contractor must immediately notify the State in writing if it: (1) intends to provide AI as a Deliverable to the State; or (2) intends to utilize AI, including AI from third parties, to complete all or a portion of any Deliverable that materially impacts: (i) functionality of the System, (ii) risk to the State, or (iii) Contract performance.
- b) Such notification shall be provided to the State designee identified in this Contract.
- c) At the direction of the State, Contractor shall discontinue the provision to the State of any previously unreported AI that results in a material impact to the functionality of the System, risk to the State, or Contract performance, as determined by the State.
- d) If the use of previously undisclosed AI is approved by the State, then Contractor will update the Deliverable description, and the Parties will amend the Contract accordingly, which may include incorporating the AI Special Provisions into the Contract, at no additional cost to the State.

Failure to Disclose or Discontinue AI Use: The State, at its sole discretion, may consider Contractor's failure to disclose or discontinue the provision or use of AI as described above, to constitute a material breach of Contract when such failure results in a material

impact to functionality of the System, risk to the State, or Contract performance. The State is entitled to seek any and all remedies available to it under law as a result of such breach, including but not limited to termination of the Contract, for default pursuant to Section 23.

Contractor's Obligations For Responsible Use: Contractor shall ensure that it has obtained all necessary consents, permissions, and licenses from data subjects and third parties to use the AI for this Contract. Subject to Section 28, Contractor represents and warrants, it has the appropriate U.S. Intellectual Property Rights associated with any AI used in the Deliverables provided under the Contract.

Contractor shall ensure that the AI included, or made available as part of the Deliverables is equitable, non-discriminatory, and reasonably well-designed to avoid harmful, offensive, dangerous, and unlawful impact.

(Government Code 11549.63. Contractor shall be liable for any Hallucination produced by the AI that has an adverse impact on Generated Data or a Deliverable.

Contractor shall comply with all applicable laws and regulations, including as set forth in Section 7 above and these General Provisions in relation to the provision or use of any AI in the Deliverables.

AI Training Data Ownership: Except as otherwise agreed to by the Parties, Contractor shall retain all ownership and intellectual property rights in the AI Training Data it provides.

Rights To State Generated Data: In addition to government purpose rights set forth in Section 37, the Parties agree that Generated Data created from a State provided Prompt is not a derivative work of the AI Training Data.

Notwithstanding the preceding sentence, in the event a court of competent jurisdiction determines that Generated Data created from a State-provided Prompt constitutes a derivative work of

the AI Training Data, Contractor agrees to grant the State an unlimited, irrevocable, worldwide, perpetual, royalty-free, non-exclusive right, and license to use, modify, reproduce, perform, release, display, create derivative works from, and disclose the Generated Data for any State Government Purpose Rights.

Contractor's Use Of State Data: Contractor shall not incorporate any Non-Public State Data into AI Training Data and shall not otherwise utilize Non-Public State Data to train, tune, maintain, improve, or develop AI, except with the express written authorization from the State specifying the Non-Public State Data that may be used along with the acceptable scope of such usage.

APPENDIX A-2 SPECIAL PROVISIONS

APPENDIX A-2 SPECIAL PROVISIONS

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APPENDIX A-2 - SPECIAL PROVISIONS

1 DEFINITIONS

Definitions for terms in these Special Provisions shall be as stated in the Appendix C, GLOSSARY or the General Provisions – Information Technology, as provided throughout the document.

2 CONTRACT AND SPECIAL PROVISIONS

As used in these Special Provisions and unless otherwise stated the phrase “this Contract,” “the Contract”, or “Contract” shall refer to the Contract as defined in the General Provisions, in effect at any given time.

3 SCOPE OF WORK

The Contractor shall provide a System Development, Maintenance and Operations (SDMO) solution for the California Healthcare Eligibility, Enrollment, and Retention System (CalHEERS) more specifically provided in the Statement of Work (SOW), to the Office of Technology & Solutions Integration (OTSI) for the benefit of Covered California and the California Department of Health Care Service (DHCS).

4 TERM

The term of the Contract shall be as provided in the Appendix A-4, STATEMENT OF WORK (SOW) Section 1.1, TERM.

5 FINANCIAL MATTERS

5.1 PAYMENT

Payment shall be made in accordance with Paragraph 30 of the General Provisions and shall not be due until receipt of an undisputed invoice following the Acceptance of an applicable Deliverable or Service. An invoice received prior to State Acceptance of a Deliverable shall not be due until after the Acceptance of the Deliverable. For Services received, payment shall be made in arrears following the month in which the Service was provided to the State.

The Contractor shall be paid in accordance with the requirements described in Appendix D, COST WORKBOOK. The Contractor shall not increase the amounts due from the State for Services and Deliverables under this Contract. In no case shall the maximum number of hours allowed, or the Contract budget amount exceed that provided in Appendix D, COST WORKBOOK. The amount in the Cost Workbook is the maximum budget for this Contract. Actual amounts paid by the State to the Contractor are based on the Services performed and accepted Deliverables and work product or milestone.

[The Contractor commits to review the required costs for each year and provide appropriate credit to the State for any Deliverables or Services that are no longer used by the State.](#)

5.2 INVOICES

Invoices shall be submitted the month following the month in which the State accepted the Deliverable or Services were performed. The Contractor shall provide sufficient documentation

supporting its invoices submitted to the State for payment and upon request by the State. The Contractor shall not submit invoices more frequently than monthly.

In no event shall the Contractor submit invoices more than 6 months following the date on which the Deliverable or the Services were accepted by the State. The Contractor shall not, without State approval, invoice for increased costs based on audit findings or other corrections which increase costs outside the State Fiscal Year in which the Deliverable or the Services were invoiced.

The Contractor shall submit electronic invoices and backup documentation monthly, in arrears, in a State-approved format, which shall specify the dollar amount due and in which the Contractor has certified that Services or Deliverables required under the Contract conform to the requirements set forth in this Contract. Invoices payable by the State shall be submitted to the following e-mail address: AccountsPayable@otsi.ca.gov

Electronic invoices must be submitted individually (OTSI shall not accept multiple invoices in a single e-mail). The invoice shall be in PDF format and include all supporting documentation. Additional formats may also be required. The subject line must contain the following:

- Company Name
- Contract Number
- Invoice Number

All invoices submitted must be approved by the State Project Director or designee prior to payment.

Subject to receipt of an undisputed invoice, the Contractor's performance of its obligations in accordance with the terms of the Contract, and to the State's exercise of its rights and remedies, the State shall pay the Contractor the charges for each payment milestone, Deliverable, Service, or other cost following its Acceptance and as described on such invoices which are issued in accordance with the terms of this Contract, within 45 Days of receipt of such invoices.

5.2.1 Inclusion of Contract Number

All invoices, bills of lading, shipping memos, packages, and any other form of correspondence shall refer to the Contract by number plus any unique identifier generated by the State on a Change Request (CR).

5.2.2 Information Required

Invoices shall account for each billable item, description, cost (including Subcontractor costs), and include summary total levels.

Invoices for Equipment, (for example, including physical and virtual hardware, Software and Services, or other items invoiced to the State) shall account for each item by model number, serial number, and physical location with applicable costs broken down by item price and applicable sales tax. The State and the Contractor may mutually agree upon additional or other invoice elements as may be required to accurately describe Deliverables and Services. Subject to Paragraph 31 of the General Provisions, any future increases or decreases in State sales or use tax shall be separately itemized in any applicable invoice.

For approved Change Requests, Contractor may submit an invoice for the approved amount upon State approval of the corresponding payment milestone: (1) at Design Acceptance; (2) at Change Request System Test Acceptance; and (3) at Change Request Implementation

Acceptance. The parties may mutually agree to alternative payment milestones to be described and documented in the executed Change Request.

Additional invoice descriptions, details, and backup documentation, including those for Software, may be mutually agreed upon by the State and the Contractor as required.

5.2.3 Incorrect Invoices

The Contractor shall make every effort to reconcile incorrect invoices in a timely manner, not to exceed 30 Days from Notice by the State of a discrepancy. The State shall withhold payments for disputed invoices, or if divisible, disputed portions of an invoice until the discrepancies have been resolved.

5.3 AVAILABILITY OF FUNDS

Payment pursuant to this Contract, whether in whole or in part, is subject to and contingent upon the continuing availability of federal and State funds for the purposes hereof. If such funds, or any part thereof, become unavailable as reasonably determined by the State, or if the funds the State relied upon to establish or continue this Contract are withdrawn, not appropriated, reduced, or limited in any way, or if additional or modified conditions are placed on such funding, the State in addition to its other remedies may proceed with any of the following alone or in conjunction: (i) issue a Stop Work Order for this Contract or the portion affected thereby; (ii) issue a Change Request to the extent the State determines is necessary; or (iii) five (5) Business Days after providing Notice, immediately terminate this Contract, in whole or in part, and make payment to the Contractor as provided in Paragraph 21 of the General Provisions as a termination for non-appropriation of funds.

5.4 BUDGET CONTINGENCY

Notwithstanding any other provision of this Contract, if the Annual State Budget Act of the current fiscal year or any subsequent fiscal years is not approved by the constitutional or statutory deadlines for enacting a budget and as a result the State's spending authority for this Contract temporarily lapses, upon the request of the State based upon a reasonable good-faith understanding that CalHEERS shall continue to operate and be funded when the Annual State Budget Act is passed by the Legislature and signed by the Governor, the Contractor shall continue to provide the Services contracted for pursuant to this Contract and the State shall pay the Contractor, absent any late fees and/or penalties, in accordance with the California Prompt Payment Act, for such Services upon subsequent passage of the Annual Governor's Budget Act continuing CalHEERS.

5.5 CONTRACTOR EXPENSES

The consideration to be paid to the Contractor, as provided herein, shall be in compensation for all of the Contractor's expenses incurred in the performance hereof, including without limitation travel and per diem, unless otherwise expressly agreed to in writing by the State Project Director or designee prior to the expenditure of such funds.

5.6 OVERPAYMENTS TO CONTRACTOR

The Contractor shall promptly refund to the State the full amount of any erroneous payments, incorrect payments, or overpayments upon determination by the Contractor or upon receipt of Notice from the State Project Director or designee provided that such Notice sets forth in reasonable detail the basis for the State's determination of an erroneous payment, incorrect payment, or overpayment.

5.7 CREDITS AND RIGHT TO WITHHOLD

Amounts due to the State by the Contractor, including but not limited to liquidated or other damages, whether disputed or not, may be deducted, credited or withheld by the State from any money payable to the Contractor pursuant to this Contract. Any such amounts due to the State under this Contract may be applied against the Contractor's invoices with appropriate information attached, upon giving of 30 Days prior Notice by the State Project Director or designee to the Contractor.

5.8 ADVANCE PAYMENTS PROHIBITED

No payments in advance of or in anticipation of Services, or Deliverables to be provided under this Contract shall be provided by the State.

5.9 TRUE COST WITH FIXED BUDGET~~EQUITABLE ADJUSTMENT~~

The Contractor shall provide the Deliverables and Services required as part of the fixed price set upon Contract execution. For the purchase of Hardware, Cloud Services, Software, and any other agreed upon elements, the Contractor shall work within a set Fixed Budget Amount and provide these Deliverables and Services at the True Cost. The State reserves the right to an equitable adjustment of any Deliverables or Services costs. If during any state fiscal year, the market pricing is lower, in excess of 10%, compared to Contractor proposed costs for that year, the Contractor agrees to adjust its billing accordingly. The Contractor commits to review the required costs for each year and provide appropriate credit to the State for any Deliverables or Services that is no longer used by the State.

6 PROJECT MANAGEMENT AND SCOPE

6.1 OVERALL RESPONSIBILITIES OF CONTRACTOR

The Contractor shall have responsibility for providing all Deliverables and Services in accordance with the requirements of the Contract.

6.2 SUPPLEMENTAL CONTRACTS

The State may undertake or award supplemental contracts for work related to this Contract or any portion thereof in the State's best interest. The Contractor shall make commercially reasonable efforts to contract and/or cooperate with such other contractors and the State in all such cases to attain optimal System performance. To the extent that such cooperation requires additional work on the Contractor's part that is beyond the scope of work outlined herein, the parties shall follow the Contract Amendment process. When the addition of new or modification of existing System components or functionality is within the general scope of the Contract, the parties shall follow the Change Request process.

6.3 LIMITATION OF AUTHORITY

6.3.1 Waivers

Only the State Project Director or designee shall have the authority to waive any clause or condition of this Contract on behalf of the State, to the extent permitted by this Contract and applicable law. Any waiver of any clause or condition of this Contract is not effective or binding until made in writing and signed by the State Project Director or designee thereof and approved by the State.

6.3.2 Changes

The State Project Director or designee is the only individual that may authorize changes in scope to this Contract in accordance with Section 12.1 of these Special Provisions, or through a Contract Amendment. The State Project Director or designee shall delegate in writing, authority to authorize changes prior to any changes. All such changes shall be made in writing and approved by the State. Any change proposed by any other State employee, or an employee of any County shall be of no effect.

6.3.3 Continuous Improvement

The Contractor shall on an ongoing basis, as part of its total quality management process, identify, report to the State prior to implementing, and implement ways to improve performance of the Services and the System and identify and apply techniques and tools from other Contractor installations that would benefit the State either operationally or financially.

Additionally, the State may request new or updated tools or techniques to improve Services or System performance. The Contractor shall make every effort to review, recommend additional efficiencies of the tool or technique, and implement the request as directed by the State in agreed upon timeframes (Refer also to SOW Section 6.6 TECHNOLOGY REFRESH).

7 DELIVERABLES AND SERVICES

7.1 GENERAL

The Contractor shall provide the State with the Deliverables and Services listed in the Statement of Work and, if applicable, as further described in the Deliverable Expectation Document (DED) for each Deliverable found in SOW Section 8, DELIVERABLES. The Contractor shall use the Contractor's expert knowledge and this Contract as the basis for the development of the Deliverables. The parties acknowledge that additional Deliverables and Services may be added in the future and agree to work together to identify the contents of and Acceptance Criteria for any additional Deliverables as a Change Request. The Contractor shall retain backup copies on electronic media of all Deliverables until 180 Days after termination or expiration of this Contract and shall provide the State on its request with a copy thereof until that time.

The Deliverables and Services being provided by the Contractor and its Subcontractors, if any, pursuant to this Contract shall be available at no additional cost for inspection and review at any reasonable time by representatives of State or federal government, upon reasonable notice, and if at the Contractor's facility, subject to the Contractor's facility security policies.

Unless otherwise noted in SOW sections (such as the True Cost requirements associated with Hardware, Cloud Services, and Software), the Contractor shall takeover (or develop), analyze, update, and maintain the Deliverable(s), as well as execute all activities, processes and provide all Services identified within each SOW section or the associated Deliverable(s) under the Fixed Price Services of the Contract.

7.2 ACCEPTANCE PROCESS

7.2.1 Delivery and Review of Deliverables

The Contractor shall deliver all Deliverables pursuant to this Contract to the State Project Director or designee for purposes of determining whether the State shall give its Acceptance for such Deliverables in accordance with the Contract requirements.

The State's review of the subset of Deliverables found in SOW Section 8, DELIVERABLES shall be in accordance with the timeframes set forth in the project schedule. The State's review period shall vary with the complexity and volume of the Deliverable. The State shall have at least ten (10) Business Days for such review, unless otherwise agreed to in writing, with the first day starting on the next Business Day after delivery.

7.2.2 Effect of Acceptance

By submitting a Deliverable or performing a Service, the Contractor represents that the Deliverable or Service meets the requirements of this Contract. The parties acknowledge and agree that the State's Acceptance of a Deliverable or Service indicates only that it has reviewed the Deliverable or Service and detected no Deficiencies at that time. The parties agree that the Contract requirements shall be modified only through a Change Request or amendment to this Contract.

7.2.3 Acceptance

The State will provide Acceptance for the Deliverable or Service if it meets the Acceptance Criteria for each Deliverable or Service as spelled out in the Contract, Change Request, and applicable processes, including but not limited to the scope and level of detail prescribed in an applicable Deliverable Expectation Document (DED), within a reasonable amount of time.

7.2.4 Effect of Rejection

If, following the State's review, the Contractor's Deliverable or Service does not meet the Acceptance Criteria, the State shall give Notice of rejection in accordance with Paragraph 16(e) of the General Provisions, with such Notice delineating the reasons for rejection.

7.3 CORRECTIONS OF DEFICIENCIES

The Contractor shall implement corrections to Deliverables or Services depending on the nature of the Deficiency identified. The following corrections shall be applied for the following conditions and shall follow the State-approved timelines as defined within Contract or associated Deliverables:

7.3.1 Corrections for Contractor Requirement Deficiencies

Where the Contractor is non-compliant with a "Contractor shall" requirement, the Contractor shall identify and implement correction in accordance with SOW Section 3.11.4 CORRECTIVE ACTION PLAN (CAP).

7.3.2 Corrections for System Requirement Deficiencies

Where a "System shall" requirement is non-compliant (e.g. Software defect), the Contractor shall identify and implement corrections according to the criteria defined in SOW 4.9.1 Section DEFECT MANAGEMENT PLAN Deliverable.

7.3.3 Corrections for System Security & Performance Deficiencies

Where a Security or Performance issue is raised, the Contractor shall identify and implement corrections in accordance with SOW Sections 6.7.1 SYSTEM SECURITY PLAN, 6.7.2 SYSTEM SECURITY EXECUTION Requirements, and/or 6.13 SYSTEM PERFORMANCE activities.

7.3.4 Corrections for Deliverable Efforts

Where a SOW Section 8 Deliverable (also known as a DEL) is non-compliant with stated requirements, the Contractor shall identify and implement correction in accordance with SOW Section 8.5.2 REVISED FORMAL DELIVERABLES.

7.3.5 Correction to Service Level Agreement (SLA) Deficiencies

Where an SLA is deemed non-compliant, the Contractor shall identify and implement corrections in accordance with the specific guidance provided for each of the SLAs defined in this Contract.

7.4 SERVICES

Except as provided herein, Contractor shall perform the Services in conformance with professional standards for performing services of a similar kind and shall meet or exceed the performance standards stated in the Contract Requirements in performing the Services or providing the Deliverables, including but not limited to Institute of Electrical and Electronics Engineers (IEEE), Project Management Body of Knowledge (PMBOK) or Information Technology Information Library (ITIL), as appropriate. Contractor may adopt alternate or equivalent standards or processes, provided the Contractor obtains prior written approval from the State Project Director or designee.

7.5 RESOLUTION BETWEEN DOCUMENTS

Except as provided in Paragraph 11 of the General Provisions, in the event of a contradiction, conflict, ambiguity, or inconsistency in or between Deliverables, any such contradiction, conflict, ambiguity or inconsistency shall be resolved in favor of the latest State Accepted Deliverable except in the case where a previous documented requirement is inadvertently omitted or not addressed directly in a subsequent Deliverable.

7.6 PROJECT SCHEDULE

The Contractor shall comply with the project schedule management requirements set forth in Appendix A-4, SOW Section 3.2, SCHEDULE MANAGEMENT.

7.6.1 Changes for Deficiency Correction

The project schedule shall not change as a result of additional time required by the Contractor to correct Deficiencies, unless otherwise agreed beforehand in writing by the State Project Director or designee.

7.6.2 Schedule Updates

The Contractor shall regularly provide proposed updates to the Project schedule as described in the SOW and as otherwise necessary throughout the Project to accurately reflect the status of activities, tasks, events, Deliverables, or Services. Any such update shall be deemed a Deliverable and the State Project Director or designee must provide Acceptance prior to its incorporation into the project schedule. Upon Acceptance, the updated project schedule shall replace the then-current project schedule. However, an update to the project schedule shall not relieve the Contractor of liability for Liquidated Damages (LDs) and other damages arising from failure to perform its obligations.

7.7 UPDATES TO STANDARDS, REGULATIONS, AND CODES

Throughout the Statement of Work (SOW) there are compliance requirements that are established by external entities (e.g., IEEE, PMI, ARC-AMPE) which impact how the Contractor produces Deliverables and Services. There are hundreds of such requirements throughout the SOW.

When such a standard, regulation, or code is revised (by these external groups) and made known to the State or the Contractor, the Contractor shall provide the State with an analysis that compares the current standard against the updated standard. The State will then review the analysis and decide via the Change Control Process if they wish for the updated standard to be adopted. If the State wishes the updated standard to be incorporated into the Contract, the State Project Director or designee will notify the Contractor to incorporate the change. Otherwise, the State reserves the right to keep that standard as currently stated.

The initial implementation, update or replacement of any and all standards, regulations, or codes on the project, including all Deliverables and Services, shall be done under the SDMO Fixed Price.

Refer to SOW Section 3.10.8 STANDARDS, REGULATIONS, AND CODES TRACKING AND UPDATES for specific requirements.

8 EQUIPMENT, CLOUD SERVICES, AND SOFTWARE

8.1 SYSTEM COMPONENTS

8.1.1 Placement of CalHEERS Main System Processing Platform Components

Equipment and Cloud Services specified for the main processing for the CalHEERS System (Production and operations Equipment and Cloud Services) shall be installed and shall operate according to the SOW [Section 6](#), CD - 6.17.1 HOSTING SERVICES PLAN Deliverable, unless otherwise agreed to by the State Project Director or designee.

8.1.2 Purchase of Equipment, Cloud Services, and Software

The Contractor shall purchase, in the name of the State, unless otherwise approved by the State, CalHEERS Equipment, Cloud Services, and Software identified in Appendix D COST WORKBOOK and other Equipment, Cloud Services, and Software necessary for SDMO activities as approved by the State.

The Contractor shall purchase, install, and maintain any office Equipment and Software to be used by the Contractor and State staff as outlined in SOW Section 6.18 PROJECT SUPPORT SERVICES, and Appendix D, COST WORKBOOK, including but not limited to workstations, laptops, printers, e-mail servers, copiers, etc.

8.1.3 Title to Equipment, Cloud Services, and Software

The Contractor shall transfer all rights, interests, title and ownership of the Equipment, Cloud Services, and Software required for SDMO activities to the State, unless otherwise directed by the State. Title to all Equipment, licenses to Software, and Cloud Services shall pass to the State. The Contractor shall provide all such Third-Party Software license agreements to the State for pre-approval before securing licenses. The State shall assign to the Contractor the rights necessary under each license agreement for purposes of the Contractor's performance of this Contract.

8.1.4 Third-Party Equipment, Cloud Services, and Software

The Contractor shall procure and maintain any Cloud Services or third-party equipment and associated operating Software, and Third-Party Software identified in the Contractor's proposal or used by the Contractor in operating or providing Services in support of CalHEERS SDMO Services. The State hereby appoints the Contractor as its agent with respect to Cloud Services or Third-Party Equipment and Software for which the license is held by the State. With respect to any such Cloud Services or Third-Party Equipment, and Software, the Contractor's responsibility, as the agent of the State, is to implement all reasonable efforts to repair or provide a work around or suitable replacement product such that any Service or Deliverable provided by the Contractor meets the Contractor's warranty as specified in Paragraph 18 of the General Provisions.

The State shall have the option to purchase any Cloud Services or Equipment identified in the Contractor's proposal directly from a third-party independent vendor, and not from the Contractor. The Contractor shall provide the State with 30 Business Days prior written Notice before purchasing the Cloud Services or Equipment. The Contractor shall be responsible for the maintenance of any such Cloud Services or Equipment and/or associated Operating Software purchased by the State. The Contractor shall keep in effect and current all maintenance agreements, warranty service and support contracts, and licensing agreements for all Cloud Services or Equipment and associated Operating Software for the Contract terms, including any optional extensions.

8.1.5 State Office Installation and Certification

Installation by the Contractor of any Hardware and Software at State Offices or other sites approved by the State, shall be performed by appropriately certified and licensed the Contractor or Subcontractor personnel and in conformity with the manufacturer's and the Contractor's specifications, and State and other Site Requirements. Upon completion of any Installation, the Contractor shall certify in writing to the State Project Director or designee, for each State and other applicable Site location, that all required Site modifications have been satisfactorily completed, that the Hardware has been Installed pursuant to and in conformity with all requirements, and that the Equipment Installation is complete and ready to operate pursuant to the Contractor's specifications. Installation at State Offices is subject to Acceptance by the State. Any installation at other applicable sites is subject to Acceptance by the respective organization.

Any alterations or modifications to any State Office or other applicable Site after the initial procurement and installation that are directly attributable to incomplete or erroneous Specifications provided by the manufacturer or the Contractor and that involve additional expense shall be made at the cost and expense of the Contractor, to the extent that such cost and expense would not have been incurred had complete or correct Specifications been initially provided by the Contractor.

8.1.6 Approvals

The Contractor shall obtain written approval from the State prior to purchasing, providing, and/or using any Equipment, Cloud Services, and Software Products in connection with this Contract, including but not limited to incorporating the Software Products into the System.

8.1.7 Compatibility

The Contractor shall ensure that the Equipment, Cloud Services, and Licenses for all Software Products provided to the State pursuant to this Contract are compatible and may be used

together along with Custom Software developed pursuant to the Contract. The Contractor shall provide a copy of each and every license to the State for all Software Products provided to the State.

8.2 MAINTENANCE

The Contractor shall keep in effect and current for the term of the Contract all Equipment, Cloud Services, and Software maintenance agreements, warranty service and support contracts and licensing agreements for all Equipment, Cloud Services, and Software defined in Appendix D, COST WORKBOOK and required for the ongoing growth and evolution of the project and System.

The Contractor shall maintain and manage for the term of the Contract, System Software including, but not limited to, Commercial Off-the-Shelf (COTS), modified off-the-shelf (MOTS) and Custom Software as part of the base level of Service.

The Contractor shall maintain for the term of the Contract, unless otherwise approved by the State Project Director or designee, all tools and all related data used for the System development and documentation.

The Contractor shall maintain for the term of the Contract, unless otherwise approved by the State Project Director or designee, all tools and related data used for managing and maintaining supporting processes related to the Contract. Tools and related data for supporting processes include, but are not limited to, those used to create documentation, project plans, and reports.

The Contractor shall perform directly or coordinate and ensure performance of all maintenance tasks and activities referenced in this Section 8.2, including, but not limited to, identifying Software warranty and maintenance periods and renewals, and maintaining all licensing agreements, warranty service and support contracts for the term of this Contract.

As the agent of the State, the Contractor shall coordinate the services of Third Parties related to Equipment, Cloud Services, and Software to correct Deficiencies, including but not limited to troubleshooting, repairing, and replacing unless otherwise directed by the State and shall, if necessary, develop temporary solutions or workarounds for or emergency bypass of such Deficiencies.

8.3 DELIVERY

The Contractor shall strictly adhere to the delivery date and Installation Schedules for Equipment specified in the Master Work Plan. Delivery may be restricted by the State to nonpeak commute hours at specific State, county, and public authority sites. If the Contractor delivers in excess of the quantities specified herein, the State shall not be required to make any payment for the excess Goods and may require the Contractor to remove the excess Goods at the Contractor's expense or utilize any other rights available to the State in law or in equity.

8.4 ACCESS

8.4.1 CalHEERS System Component Access

As deemed necessary by the State Project Director or designee, the Contractor shall provide access (read only access, at a minimum, when acceptable to the State), for designated State staff, to any of the CalHEERS components and resources, including but not limited to Data, Cloud Services, Hardware, Software, System jobs, maintenance Schedules, submission and processing statistics, and System monitoring tools (e.g., Splunk, Qualys, and AWS Console access).

8.4.2 Documentation Access

The Contractor shall maintain and provide State staff access to all Deliverables, work products, user guides, processes, procedures, and all other forms of documentation used in support of the CalHEERS Project and System.

8.4.3 Enterprise Tools Access

The Contractor shall maintain and provide State staff access to all enterprise tools used in support of the CalHEERS Project and System.

8.5 CODES

The Contractor shall comply with all applicable federal, State, county, and local codes, inspection standards, and ordinances related to installing the Equipment or Cloud Services which are in effect on the date of Installation. In the event that any Installation Services performed by the Contractor are subsequently found to be in violation of codes in effect on the date of Installation, the Contractor shall bring the Installation Services into compliance at no additional cost.

8.6 STATE OBLIGATION TO PROCURE

The State is not obligated to procure any specific quantity of Equipment, Cloud Services, or Software.

9 OFFSHORE ACTIVITIES

The Contractor is permitted to conduct certain project related activities offshore subject to the limitations provided in this Contract. The Contractor shall not conduct any Services offshore without the prior written consent of the State Project Director or designee, which may be withheld in the State's sole discretion.

9.1 OFFSHORE ACCESS TO PROTECTED INFORMATION

The terms of Attachment A-2.2, OFFSHORE SECURITY, ACCESS AND TECHNOLOGY REQUIREMENTS, shall only apply to the Contractor offshore Staff who are accessing Sensitive Information.

The Contractor offshore Staff accessing Sensitive Information shall be located in a bay segregated from the Contractor Staff without access to Sensitive Information. The following controls shall apply to offshore Staff, regardless of their access to PII or PHI:

1. Security guards shall be posted at all entrances of each facility; and
2. All computers shall be locked down to not allow the use of any external ports and devices including, but not limited to, USB ports, serial ports, and CD or DVD drives, except when required to deliver the Services (e.g., monitor, keyboard, mouse, network connectivity).
3. No offshore access shall be granted to Federal Tax Information (FTI).

9.2 WHOLLY OWNED SUBSIDIARY

The Contractor's offshore Project Staff shall be employees of the Contractor or the Contractor's wholly owned subsidiary. The Contractor's offshore facilities shall comply with all the security protocols set forth in this Contract, including but not limited to Appendix A-4, SOW Section 6.7,

SYSTEM SECURITY, SOW Section 6.17, HOSTING SERVICES, California State Administrative Manual (SAM) 5365, Physical Security, and the HIPAA found at <http://www.hhs.gov/hipaa/>. Additionally, Key Staff, service desk staff, and all others who shall have access to Federal Tax Information (FTI) shall be located in the United States unless otherwise approved by the State Project Director or designee. The Contractor's information security unit shall enforce and monitor the compliance of the System Security Plan and report upon its compliance with the controls to the project team.

10 WARRANTIES

In addition to the warranties expressed in Paragraph 18 of the General Provisions, the Contractor provides the warranties described in this section to the State.

10.1 SYSTEM WARRANTY

The Contractor warrants that the CalHEERS, in whole and in part, including but not limited to any Custom Software, Source Code, database management system, and data design shall function, operate, and perform in all facilities in substantial conformity with the requirements of this Contract and/or any applicable Acceptance Criteria, and Specifications.

10.1.1 Warranty

For purposes of Paragraph 18(a) of the General Provisions and Section 10.1 above, warranties shall begin upon delivery of the Deliverables and activation of Services implemented into Production and end at the end of the Contract. Additionally, for new Services, System components or functionality, the warranties shall commence upon implementation and "activation" of such new Services, System components or functionality by the Contractor or the State. ~~Activation of Services excludes code that has been deployed into Production but has been "switched off" until a later date. In this case, activation of such Software, "switching it on," marks the beginning of the warranty period.~~

10.1.2 Not Under Warranty (NUW)

Not Under Warranty is a term that does not apply to the CalHEERS. At the point of transition completion for any part of CalHEERS, the Contractor shall warranty the activated Deliverables and Services for the entirety of the Contract period.

10.2 LITIGATION WARRANTY

The Contractor warrants that there is no actual or threatened suit by any such third party based on an alleged violation of the rights granted or licensed by the Contractor to the State and the Federal Centers for Medicare and Medicaid Services (CMS) hereunder.

10.3 RE-PERFORMANCE, REPAIR, AND REPLACEMENT

The provisions in this section are intended to clarify the re-performance, repair and replacement obligations of the Contractor pursuant to Paragraph 18(f) of the General Provisions. The Contractor shall promptly, and in all cases within the time periods described in this Contract, and at the Contractor's sole expense, re-perform any Services, correct all Deficiencies, including but not limited to the System, and coordinate the services of third parties for their repair or replacing of any Cloud Services, Hardware, Software, or Equipment not in compliance with all applicable warranties contained in this Contract. If the System fails to meet any Performance Standards established in this Contract, the Contractor shall coordinate the

services of such third parties to modify, reconfigure, upgrade or replace Cloud Services, Hardware, Software, or Equipment at no cost to the State in order to ensure that the System complies with the Performance Standards set forth in the Contract, and shall, if necessary, develop temporary solutions to, workarounds for, or emergency bypasses of such Cloud Services, Hardware, Software, or Equipment giving rise to the noncompliance.

10.4 SERVICES

Except as provided herein, the Contractor shall meet or exceed the performance standards stated in the Contract requirements in performing the Services or providing the Deliverables, including but not limited to Institute of Electrical and Electronics Engineers (IEEE), Project Management Book of Knowledge (PMBOK), Information Technology Infrastructure Library (ITIL), or all other applicable industry standards as appropriate. The Contractor may adopt alternate or equivalent standards or processes, provided the Contractor obtains prior written approval from the State Project Director or designee.

10.5 VERSIONS

The Contractor shall, during the term of the Contract, maintain any and all Third-Party Software and Custom Software provided by the Contractor, at its most current version, or at the State's request, a previous supported version. Extended support for any Software Products must be approved in advance by the State Project Director or designee.

11 ADDITIONAL RIGHTS AND REMEDIES

11.1 SERVICE LEVEL AGREEMENTS AND LIQUIDATED DAMAGES – GENERAL

The State has defined a set of parameters and measurements that define the minimum level of performance for System and Services performance. The definitions, expectations and associated amount of assessment for not meeting these standards are found in Attachment A-2.3, SERVICE LEVEL AGREEMENTS AND LIQUIDATED DAMAGES.

The purpose of the Liquidated Damages provision is to ensure adherence to the requirements of the Contract and to set an amount in advance of a Breach to compensate the State for damages that are impractical or extremely difficult to estimate but which would be sustained by the State in the event the Contractor fails to perform Services as agreed. Liquidated Damages are intended to be a reasonable estimate of the damages and costs the State would sustain as a result of a Breach. They are not intended to be punitive. The State and the Contractor, therefore, presume that in the event the Contractor fails to meet SLAs, the State shall assess the Contractor to pay such amounts as Liquidated Damages, and not as a penalty. The total amount of the Liquidated Damages, either for project delays or for service level delays, shall not exceed 10% of the total value of the Contract, unless otherwise noted, at the time the Liquidated Damages are imposed. The State shall calculate Liquidated Damages owed to the State and shall subtract Liquidated Damages from the payments made by the State to the Contractor. Project SLAs and the amount of Liquidated Damages are found in Attachment A-2.3, SERVICE LEVEL AGREEMENTS AND LIQUIDATED DAMAGES.

11.1.1 Acknowledgement of Harm

The parties agree that any delay or failure by the Contractor to timely perform its obligations by the dates in the Master Work Plan and in accordance with the Acceptance Criteria, Specifications, Performance Standards and other requirements in this Contract shall interfere with the proper and timely delivery of the Deliverables and Services, to the loss and damage of

the State. Further, State may incur costs to maintain the functions that would have otherwise been performed by the Contractor. The Liquidated Damages that may be assessed by the State as a result of the Contractor's delay or failure to perform its obligations in accordance with the terms of this Contract are as described Attachment A-2.3, SERVICE LEVEL AGREEMENTS AND LIQUIDATED DAMAGES. Liquidated Damages shall not be assessed if, as determined by the State, the Contractor's delay or failure to perform its obligations was caused by factors beyond the control of the Contractor, including acts of the State, and without any material error or negligence of the Contractor. The assessment of Liquidated Damages are subject to the dispute resolution process as provided in Paragraph 44 of the General Provisions.

11.1.2 Other Remedies

Nothing in the Liquidated Damages Section 11.1, Service Level Agreements and Liquidated Damages – General, of this Contract shall be construed as relieving the Contractor from performing any other Contract duty or being subject to any other provisions of this Contract not listed in these Liquidated Damages sections, nor is the State's right to enforce any other Contract duty herein or right to seek other remedies for failure to perform any other section of this Contract diminished.

11.2 LIQUIDATED DAMAGES – SPECIFIC AMOUNTS

See Attachment A-2.3, SERVICE LEVEL AGREEMENTS AND LIQUIDATED DAMAGES, for Specific Liquidated Damages.

11.3 WITHHOLDS

11.3.1 Withholding Payments

The State shall have the right to withhold or delay payments to the Contractor for the applicable Services or Deliverables, in whole or in part, if the Contractor fails to perform its obligations set forth in this Contract as respects the same. The State shall provide Notice to the Contractor when withholding payment and Contractor shall have 10 Days to cure such failure. The State may withhold such payments due hereunder to the Contractor, without penalty or work stoppage by the Contractor, until such failure to perform is cured.

11.3.2 Reductions in Payments Due

In addition to the remedies provided in Paragraph 25 of the General Provisions, amounts due the State by the Contractor as Liquidated Damages disputed or not, may be credited, deducted or withheld by the State from any money payable to the Contractor pursuant to this Contract.

11.3.3 Release of Payment Withholds

The State shall withhold such payments described above or a portion thereof, without penalty or work stoppage by the Contractor, until such failure to perform is cured. Acceptance shall not be unreasonably withheld or delayed. For each month that a payment or a portion thereof is withheld, the State shall continue to withhold said amount until the Deliverable or Service is provided and meets Acceptance Criteria for which the payment withhold is associated.

11.4 PERFORMANCE BOND

The Contractor shall within 21 Days of Contract Award furnish a performance bond. Per section 12112 of the California Public Contract Code (PCC), the State requires a performance bond for the following Services being remunerated with the use of progress payments:

Contract: The awarded Contractor shall supply a performance bond in the amount of thirty percent (30%) of the Bidder's proposed base Contract price. The bond shall be on a form from an admitted surety insurer and must guarantee Contractor's compliance with the terms of this Contract.

Transition-In: The awarded Contractor shall supply a performance bond in the amount of fifty percent (50%) of the Transition-In Contract execution amount to ensure the Contractor's performance in all respects of, and subject to, the terms and conditions and provisions of the Contract, for this phase of the Contract. For example, a bond amount of \$1 million shall be procured for a Transition-In phase valued at US \$2 million.

12 CHANGE REQUESTS

12.1 GENERAL

The State Project Director or designee may, at any time, by Change Request (CR), make changes within the general scope of this Contract. Each Change Request is a contract, i.e. the parties will identify requirements, negotiate terms and costs, etc.

12.1.1 Change Costs for Efforts Requiring Multiple CRs

For changes that, by process or otherwise, utilize multiple CRs in the system of record, the Contractor shall report to the State the total solution cost. The reporting shall include all costs that add to the overall cost of the change so that a total running cost (all associated known, planned, or potential future CRs adding to the solution total, including but not limited to: all implementation, testing, Software, M&O, Hosting Services, and related efforts at the discretion of the State). The Contractor shall also associate all related CRs in the system of record so when viewing any CR associated to the change, all other associated CRs can easily be viewed. The Contractor shall not charge the State for efforts related to change cost reporting.

12.2 CHANGE REQUEST APPROVAL PROCESS

12.2.1 Change Request Required

For each change in requirements, a Change Request shall be prepared. Either party may initiate a proposal for a Change Request.

12.2.2 Content of Change Request

The Contractor shall respond in a manner agreed to by the parties (typically in the system of record) to a Change Request issued by the State Project Director or designee as defined in the Change Request Process.

12.2.3 Change Request Cost

The Contractor shall estimate costs consistent with the requirements described in sections of the Statement of Work, including, but not limited to, Section 4.2, CHANGE MANAGEMENT AND CONFIGURATION MANAGEMENT (SYSTEM), for estimating base prices for each Change Request based on the number of staff hours required multiplied by the rate for each labor category, plus any other reasonable costs to be incurred to effect the change at a fair and reasonable price. In addition, the Contractor shall break out costs for each Change Request, at a minimum, as identified:

1. By month the Service is performed or the Cloud Services, Equipment, Hardware, Software is received.
2. Identified as one-time or recurring costs. Recurring costs must be identified as monthly, annual, etc.
3. Total costs for a Change Request must be summarized by State fiscal year, including any future fiscal year costs the State shall incur to maintain the Change Request.
4. Costs for future fiscal years must be identified at the same level of detail as current fiscal year (e.g., labor, maintenance, license, Cloud Services, etc.)

The Contractor shall be paid for work under a Change Request based upon the fixed cost shown in the Change Request at the time of approval by the State Project Director or designee. The Contractor shall not charge the State for preparing a Change Request, including but not limited to document preparation, [internal](#) meetings, proof of concept, research, vendor or other external consultations, or ad hoc reporting efforts.

12.2.4 Inclusion in Contract

The parties shall follow the Contract amendment process to account for any significant increases or decreases in the Contract value or material changes to the Statement of Work or rights or duties of the parties in this Contract as a result of an approved and executed Change Request.

12.2.5 Good Faith

The Contractor and the State shall negotiate in good faith and in a timely manner with regard to all Change Requests.

12.2.6 Stop Work

The State has the right to require the Contractor to stop work on any Change Request in accordance with Paragraph 45 of the General Provisions.

12.3 [CHANGE REQUEST](#) DISAGREEMENT, CLAIMS AND TERMINATION

12.3.1 Disagreement

If the parties are unable to reach an agreement in writing within 15 Days of the Contractor's response to a Change Request, the State Project Director or designee may make a determination of the fair and reasonable price and schedule for the Change Request and shall provide a written explanation of such determination. The Contractor shall proceed with the work according to that price and schedule which shall be included in the resulting Change Request, subject to the Contractor's right to appeal the State Project Director's or designee's determination of the price and/or schedule using the dispute resolution process under Paragraph 44 of the General Provisions.

If the dispute between the parties regarding the price and/or schedule persists, the State shall pay for such work up to the price determined by the State Project Director or designee until all amounts in such price are expended, after which the Contractor shall continue performing such work until completion of the dispute resolution process related to the Change Request. If there is a mutually acceptable completion of the dispute resolution process, the State shall pay the Contractor in accordance with the resolution. Nothing in this Section shall in any manner excuse the Contractor from proceeding diligently with the Contract as changed by the Change Request.

12.3.2 Claims

If the Contractor wishes to assert a claim under Paragraph 44 of the General Provisions, the Contractor must do so within 30 Days after receipt of a signed -Change Request, unless the period is extended by the State Project Director or designee in writing. No claim by the Contractor for such an adjustment hereunder shall be allowed if Notice of such claim is not given prior to final payment under this Contract.

12.3.3 Termination

If the Contractor fails or refuses to perform a Change Request issued by the State, a Change Request required because of emergency, or a Change Request determined to be appropriate at the conclusion of the dispute process under Paragraph 44 of the General Provisions and does not cure such failure or refusal by commencing such performance within five (5) Business Days of receiving a cure Notice with respect to such Change Request, the Contractor shall be in material breach of this Contract, and the State shall have the right to immediately terminate this Contract for default; or if the Contractor fails to correct a material default within 30 Days of receiving a cure Notice with respect to a Change Request, the State shall have the right to secure cover pursuant to this Contract.

13 INSURANCE

During the term of the Contract, and including any optional extensions, the Contractor shall maintain in full force and effect, the insurance coverage and comply with all insurance requirements described in this Appendix A-4, SOW Section 2.5.5, INSURANCE COVERAGE REQUIREMENTS, with an insurance carrier approved to do business in the California.

14 STATE PROPERTY

14.1 OWNERSHIP

The State shall retain title to all property provided by the State to the Contractor for use in the Project.

14.2 USE OF PROPERTY

Any property provided to the Contractor shall, unless otherwise provided herein, or approved in writing by the State Project Director or designee, be used only for the performance of and subject to the terms of this Contract. The Contractor's use of the property shall be subject to the State's security, administrative and other requirements provided in writing to the Contractor.

14.3 DAMAGE TO PERSONS OR PROPERTY

The Contractor shall protect and be responsible for any loss, destruction, or damage to State Property which results from or is caused by the Contractor's negligent acts or omissions. At no cost to the State, the Contractor shall repair or replace any State Property that is damaged, destroyed, or lost at the Facility or Sites caused by the Contractor's negligent acts or omissions. The Contractor shall be responsible for any personal injury at the Facility(s) or Site(s) that may be caused by the Contractor's negligent acts or omissions.

14.4 NOTICE OF DAMAGE

Upon the loss of, destruction of, or damage to any of the property, the Contractor shall notify the State Project Director or designee thereof and shall take reasonable steps to protect that property from further damage.

14.5 SURRENDER OF PROPERTY

The Contractor shall ensure that the property shall be returned to the State in like condition to that in which it was furnished to the Contractor, reasonable wear and tear excepted. The Contractor shall surrender to the State all property upon the earlier of it no longer being required or termination of this Contract. Upon failure to return the property within 45 Days of this Contract expiration or termination, the Contractor shall be charged with reasonable costs of recovery, including without limitation transportation and attorney's fees.

15 CONFIDENTIAL INFORMATION

15.1 ACCESS AND NONDISCLOSURE OBLIGATION

During the term of this Contract, the Contractor and the State shall have access to and become acquainted with Confidential Information (CI) of the other party. The State and the Contractor, and each of their officers, employees and agents, shall hold all Confidential Information of the other party in confidence, in accordance with the terms of this Contract, and shall not at any time use, publish, reproduce or disclose any Confidential Information, except to authorized employees, contractors, or agents requiring such information, as authorized in writing by the other party, to perform its obligations as authorized hereunder, or unless otherwise required by law.

15.2 PROTECTIVE MEASURES

Both parties shall take steps to safeguard the other party's Confidential Information against unauthorized disclosure, reproduction, publication, or use. The Contractor shall have written policies governing access to, duplication, and dissemination of all such Confidential Information the Contractor shall take appropriate action, as reasonably determined by the State, with any persons permitted access to the State's Confidential Information so as to enable the Contractor to safeguard the Confidential Information and otherwise to satisfy the Contractor's obligations under this Contract. The use or disclosure by either party of any Confidential Information concerning the other party for any purpose not directly connected with the administration of the disclosing parties' responsibilities with respect to Service(s) provided under this Contract is prohibited except by prior written consent of the other party, unless otherwise required by law. The Contractor shall safeguard all information about the recipients as required by Title 42 Code of Federal Regulations (CFR) 431, subpart F.

15.3 SECURITY REQUIREMENTS

The Contractor, its officers, employees, and Subcontractors shall at all times comply with Attachment A-2.1, Privacy & Security Requirements, all security standards, practices, and procedures which are equal to or exceed those of the State, including without limitation the OTSI Acceptable Use Security Policy and the OTSI Confidentiality and Nondisclosure Agreement Certification and, in the event that there are changes to the above security requirements after the execution date of this Contract, such changes will be treated as a change request or amendment, with respect to information and materials which come into the Contractor's possession and to which the Contractor gains access under this Contract. Such information and materials include, without limitation, all Confidential Information.

15.4 UNAUTHORIZED DISCLOSURE OF CONFIDENTIAL INFORMATION

Each party shall immediately report to the other party any and all unauthorized disclosures or uses of the other party's Confidential Information of which it or its staff is aware or has knowledge. Each party acknowledges that any publication or disclosure of the other party's Confidential Information to others may cause immediate and irreparable harm to the other party, and if either party should publish or disclose such Confidential Information to others without authorization, the other party shall immediately be entitled to seek injunctive relief to prevent further harm.

15.5 PUBLIC RECORDS REQUEST

15.5.1 Public Records

Notwithstanding anything to the contrary herein, the Contractor acknowledges that this Contract shall be a public record under State law. Any specific information that is claimed by the Contractor to be Confidential Information must be clearly identified as such by the Contractor. Information identified as confidential does not preclude the State from disclosing the information.

15.5.2 Request for Disclosure

The State shall notify the Contractor as soon as reasonably practicable of any and all public records requests for the Contractor's Confidential Information in accordance with and subject to applicable State laws regarding disclosure of the Contractor's Confidential Information. If the Contractor disagrees with the State's disclosure of the Contractor's Confidential Information, the Contractor shall have the right to contest its disclosure in accordance with State law. If the Contractor fails to obtain a court order enjoining disclosure, the State shall release the identified requested information on the date specified in the order.

15.6 EXCEPTIONS

The following information shall not be considered Confidential Information for the purposes of this Contract:

1. Information, which was already known to the receiving party, other than under an obligation of confidentiality, at the time of disclosure by the disclosing party; information which was generally available to the public or otherwise part of the public domain at the time of its disclosure to the receiving party;

2. Information which now is or hereafter becomes publicly known by other than a Breach hereof; information which is developed by one party independently of any disclosures made by the other party of such information.
3. Information which was received by the receiving party after disclosure to it from a third party who had a lawful right to disclose such information to it; or
4. Information which is disclosed by a party pursuant to subpoena or other legal process and which as a result becomes lawfully obtainable by the public. The party who receives such a subpoena shall promptly notify the other party.

15.7 WRITTEN STAFF AGREEMENTS

The Contractor agrees to require staff to which the Contractor makes available the State's Confidential Information to agree in writing to observe and perform all provisions of this Section. The Contractor must submit to the State Project Director or designee written documentation of the Contractor's current internal process for ensuring that the protection of Confidential Information substantially meets the requirements of this section in its entirety.

15.8 SURVIVAL

The provisions of this entire section (Section 15 Confidential Information) shall remain in effect following the termination or expiration of this Contract.

16 INDEMNIFICATIONS

16.1 INDEMNIFICATION

For purposes of Paragraph 28 of the General Provisions, third-party claims, costs (including without limitation reasonable attorneys' fees) and losses shall include:

Liability, damages, penalties, costs, fees, including, without limitation, reasonable attorney's fees, or expenses, including without limitation, interest expenses, caused by or arising from the negligent or intentionally tortious acts or omissions of the Contractor, its officers, employees, agents, or Subcontractors, giving rise to third party claims for:

1. Fraud on the part of the Contractor or its representatives or Subcontractors.
2. Payment of applicable worker's compensation premiums or any claim for worker's compensation benefits by the Contractor's agents, employees, representatives or Subcontractors.
3. The Contractor's failure to protect the State's Confidential Information pursuant to this Contract.
4. Claims, taxes, premiums or assessments grounded in an allegation that Contractors' employees, agents or Subcontractors are employees of the State.
5. A Security Incident or any other failure of the Contractor to prohibit unauthorized individuals from gaining unauthorized access to the CalHEERS System or data as required by this Contract, including but not limited to, costs to the State of providing Breach notifications required pursuant to California Civil Code Section 1798.29.
6. The Contractor's offshore activities and/or a Breach of the Contractor's obligations under Section 9 of the Special Provisions resulting in a misuse or improper disclosure of PHI, PII, or CI (See ATTACHMENT A-2.2, OFFSHORE SECURITY, ACCESS AND

TECHNOLOGY REQUIREMENTS); such costs or damages may include, without limitation:

- a. Awarded damages resulting from any third-party action under applicable (i) HIPAA requirements, (ii) Requirements relating to protecting PHI, PII, or CI in this Contract; or (iii) California state law, and
- b. The out of pocket and reasonable costs of State for actions taken to: (i) notify the affected individual(s) and to respond to any resulting Breach; (ii) mitigate harm to the affected individual(s) arising from a Breach; and (iii) respond to questions or requests for information about the Breach.

16.2 OTHER CLAIMANTS

The Contractor's obligations to indemnify, defend, and hold harmless include any claim by the Contractor's agents, employees, or representatives, or any Subcontractor or its employees.

16.3 CERTIFICATION OF INTELLECTUAL PROPERTY

In addition to Paragraph 43, Patent, Copyright and Trade Secret Indemnity, of the General Provisions, the Contractor certifies that it has appropriate systems and controls in place to ensure that State funds shall not be used in the performance of this Contract for the acquisition, operation or maintenance of computer Software in violation of copyright laws.

17 ADDITIONAL RIGHTS OF TERMINATION

In addition to the rights of termination expressed in Paragraphs 21, 22 and 23 of the General Provisions, the State has the following additional rights of termination.

17.1 GRATUITIES

The State may, in addition to its other rights, immediately terminate this Contract for default if any gratuities in the form of entertainment, gifts or otherwise, were offered or given by the Contractor to an employee of the State, with a view towards securing this Contract or securing favorable treatment with respect to the awarding or amending or the making of any determinations with respect to this Contract.

17.2 INABILITY TO CORRECT DEFICIENCIES DURING CURE PERIOD

If the Contractor is unable to: (a) correct all Priority 1 through Priority 2 Deficiencies; (b) correct all Deficiencies in the System as required by this Contract; or (c) correct all Deficiencies arising during the User Acceptance Testing and to otherwise complete Transition in accordance with the requirements of this Contract, and the failure to correct the Deficiencies amounts to a material breach of the Contract, the State may, at its option: (i) terminate this Contract, in whole or in part, for default pursuant to Paragraph 23 of the General Provisions; (ii) require the Contractor to provide a replacement Deliverable or Service associated with the Deficiencies within a specified time period, pursuant to Paragraph 18 of the General Provisions and/or Section 11 of the Special Provisions. The Contractor shall continue working, without additional compensation, until the Deficiencies are corrected or eliminated. If the State terminates the Contract, in whole or in part, the State shall have the right to return a Deliverable with Deficiencies that the Contractor has not corrected, and other Deliverables impacted or affected by such uncorrected Deliverable. If the State returns any Deliverables to the Contractor under this Section, the Contractor shall immediately return to the State all payments made to the

Contractor for the returned Deliverables, if any. Title to, and all other rights in, Deliverables returned by the State shall return to the Contractor upon refund of any amounts paid.

17.2.1 Substitute

If in the reasonable judgment of the State, a Default-default by the Contractor is not so substantial as to require termination, reasonable efforts to induce the Contractor to cure the Default-default are futile, and the Default-default is capable of being cured by the State or by another resource without unduly interfering with continued performance by the Contractor, the State may provide or procure the Deliverables or Services reasonably necessary to cure the Default-default, in which event the Contractor shall reimburse the State for the reasonable cost of the Deliverables or Services.

17.3 CONTRACTOR INELIGIBILITY TO BID

If the State is required to re-procure or acquire from another vendor or vendors any Deliverable or Service covered by this Contract due to a termination for default of the Contractor, the Contractor shall be ineligible to bid on the re-procurement(s), in whole or in part.

17.4 INACCURATE TERMINATION FOR DEFAULT

If, after Notice of Termination for default, it is determined by the State or a court of competent jurisdiction that the Contractor was not in default or that the Contractor's failure to perform was due to causes beyond its control and without any material error or negligence of the Contractor or any of its Subcontractors or suppliers, the Notice of termination may be deemed by the State to have been issued as a termination for the convenience of the State, and the rights and obligations of the parties shall be governed accordingly.

17.5 TERMINATION AND EXPIRATION PROCEDURE

1. Available Rights and Remedies: The rights and remedies of the State provided in Section 18 of these Special Provisions shall apply in the event of expiration or earlier termination of this Contract for default or convenience, shall not be exclusive, and are in addition to any other rights and remedies by law or equity or under this Contract.
2. Disposition of Property: In the event of expiration or termination, the Contractor shall deliver or convey title to the State or to another entity named by the State any property specifically produced under this Contract, including without limitation, the Deliverables, work in process, partially completed plans, drawings, and information as designated by the State. The Contractor shall not be required to deliver any Pre-Existing Materials.
3. Contractor Compensation: In the event of termination, the State shall pay the Contractor the Charges stated in this Contract for the Deliverables and Services for which the State has given its Acceptance, subject to the State's rights and remedies herein. If the termination is for convenience, the State shall, in its discretion, also pay reasonable Charges the Contractor can demonstrate to the satisfaction of the State have resulted from the termination. In determining the reasonable charges, the Contractor shall use generally accepted accounting principles, or accounting principles otherwise agreed to in writing by the parties, and sound business practices. If the termination is for convenience, the State shall pay the Contractor's charges approved by the State upon termination, pursuant to Paragraph 22 of the General Provisions.

17.6 DETERMINATION OF AMOUNT DUE

In arriving at the amount due to the Contractor, the following shall be deducted from the total due:

1. All payments to the Contractor under the terminated portion of this Contract, and
2. Any claim(s) which the State has against the Contractor under this Contract

17.7 TERMINATION CLAIMS

If the termination is for convenience and the parties are not able to agree on such amounts, the Contractor shall submit a termination claim specifying the amounts claimed due because of the termination for convenience together with cost or pricing data supporting the claim. If the Contractor fails to file a termination claim within 90 Days from the effective date of termination, the State may determine, on the basis of information available, the amount, if any, due the Contractor because of the termination and shall pay to the Contractor the amount determined.

17.8 ASSISTANCE DURING TERMINATION

Upon and following termination or expiration of this Contract, each party shall assist the other party in the orderly termination of this Contract and the transfer of all assets, tangible and intangible, and of all Services, as may facilitate the orderly, non-disrupted continuation of the Project. Upon expiration of the Contract, the Contractor shall assist the State at the State's request in transitioning the Services to another contractor in accordance with the Transition-Out Plan. At the request of the State and subject to the Change Request process, after the expiration date of this Contract, the Contractor shall continue to perform the duties and responsibilities for any Change Request in process for a period not to exceed 180 Days.

17.9 CONTRACTOR'S ACTIONS AFTER NOTICE OF TERMINATION

After the Contractor receives a written Notice of termination, and except as otherwise directed by the State Project Director or designee, the Contractor shall, regardless of any delay in determining or adjusting any amounts due under this Contract:

1. Stop work on the date and to the extent specified in a Notice of termination.
2. Place no further orders and cease to enter into subcontracts for materials, Services, or facilities, except as necessary to complete the portion of the work not terminated.
3. Terminate all subcontracts to the extent they relate to the work terminated.
4. Settle all outstanding liabilities and provide termination settlement proposals arising from the termination of subcontracts, the approval or ratification of which by the State shall be final for purposes of this Contract.
5. Complete performance of the work not terminated.
6. Take any action that may be necessary or as the State may direct for the protection and preservation of the property related to this Contract that is in the possession of the Contractor and in which the State has or may acquire an interest and to mitigate any potential damages or requests for adjustment or termination settlement to the maximum practical extent the Contractor upon refund of any amounts paid.

18 ADDITIONAL CALHEERS SDMO GENERAL PROVISIONS

18.1 AUTHORITY

The Contractor shall have no authority to bind, obligate, or commit the State by any representation or promise.

18.2 AUTHORIZATION

The Contractor warrants that it has full power and authority to enter into and perform this Contract, and the person signing this Contract on behalf of the Contractor has been properly authorized and empowered to enter into this Contract and to bind the Contractor to each and every one of the terms, conditions, and obligations set forth herein.

18.3 BINDING EFFECT

Each party agrees that this Contract binds it and each of its officers, and those employees, agents, independent contractors, and representatives working on or otherwise associated with this Contract.

18.4 CONFLICT OF INTEREST

18.4.1 Appearance of Conflict

The Contractor acknowledges that, in governmental contracting, even the appearance of a conflict of interest is harmful to the interest of the State. Thus, the Contractor agrees to refrain from any practices, activities or relationships that could reasonably be considered to be in conflict with the Contractor's fully performing his/her obligations to the State under the terms of this Contract. The Contractor shall inquire and require disclosure by its staff and Subcontractors of all activities that may create an appearance of conflict. In the event that the Contractor is uncertain whether the appearance of a conflict of interest may reasonably exist, the Contractor shall submit to the State Project Director or designee a full disclosure statement setting forth the relevant details of any activity which the Contractor reasonably believes may have the appearance of a conflict of interest for the State's consideration and direction. Failure to promptly submit a disclosure statement setting forth the relevant details for the State consideration and direction shall be grounds for Termination of this Contract. The Contractor shall ensure that all the Contractor staff engaged to work on the Project comply with the State Ethics Training provided by the State and Statement of Economic Interests (Form 700) reporting requirements set forth in the Appendix A-4, SOW Section 2.5.3, FORM 700.

18.4.2 Current or Former State Employees

The Contractor acknowledges it is aware of and shall take no action which causes State employees or officers to violate the following provisions regarding current or former State employees. If the Contractor has any questions on the status of any person rendering Services or involved with this Contract, the Contractor shall contact the State Project Director or designee immediately for clarification:

1. Current State Employees (California Public Contract Code (PCC) 10410)
 - a. No State Officer or employee shall engage in any employment, activity, or enterprise from which the officer or employee receives compensation or has a financial interest, and which is sponsored or funded by any State agency unless the employment, activity, or enterprise is required as a condition of regular State employment.

- b. No officer or employee shall contract on that person's own behalf as an independent contractor with any State agency to provide Goods or Services.
- 2. Former State Employees (California Public Contract Code (PCC) 10411)
 - a. For the two (2) year period from the date of leaving State employment, no former State officer or employee may enter into a Contract in which that person was engaged in any of the negotiations, transactions, planning, arrangements, or any part of the decision-making-process relevant to this Contract while employed in any capacity by any State agency.
 - b. For the 12-month period from the date of leaving State employment, no former State officer or employee may enter into an agreement with any State agency if that person was employed by that State agency in a policy-making position in the same general subject area as the proposed agreement within the 12-month period prior to that person leaving State service.

18.5 ENTIRE CONTRACT

The State and the Contractor acknowledge and agree that they have read this Contract, understand it, and agree to be bound by its terms and conditions.

18.6 HEADINGS

The headings throughout this Contract are for reference purposes only, and the words contained therein shall in no way be held to explain, modify, amplify or aid in the interpretation, construction or meaning of the provisions of this Contract.

18.7 TIME IS OF THE ESSENCE

Time is of the essence in connection with the Parties fulfilling their obligations under the Contract.

18.8 GOOD STANDING

The Contractor warrants it is currently in good standing with the Secretary of State's office and qualified to do business in California.

18.9 NOTICE OF LITIGATION

The Contractor shall promptly notify the OTSI Chief Counsel in the event that the Contractor learns of any potential or actual litigation in which it is a party or a defendant in a case which involves Services provided under this Contract. The Contractor shall promptly, after being served with a summons, complaint, or other pleading which has been filed in any federal or state court or administrative agency, deliver copies of such document(s) if publicly available to the OTSI Chief Counsel. The term "litigation" includes but is not limited to an assignment for the benefit of creditors and filings in bankruptcy, reorganization, or foreclosure.

Notice Address for Litigation: State of California
Office of Technology & Solutions Integration
Office of the Chief Counsel
2870 Gateway Oaks Drive, Suite 150
Sacramento, CA 95833

18.10 MAINTENANCE AND AUDIT OF RECORDS

18.10.1 Maintenance of Records

The Contractor and its Subcontractors shall maintain a complete file of all records, documents, communications, and other materials which directly pertain to the Project or the delivery of Services under this Contract. These records shall be maintained according to generally accepted accounting principles and shall be readily separable from other the Contractor records. The Contractor shall maintain for a period of ten (10) years after final payment under this Contract the above-described records and records that are sufficient to:

1. Document the performance of all acts required by this Contract.
2. Substantiate by commercially acceptable methods, the Contractor's statement of its organization's structure, tax status, capabilities, and performance.
3. Verify the accuracy of invoiced charges pursuant to this Contract.
4. Ascertain that personnel policies, procedures and practices were in compliance with this Contract and applicable State and Federal law.
5. Ascertain that all taxes and insurance required by State and Federal law by the terms of this Contract were paid by the Contractor; and
6. Ensure sufficient documentation needed to fulfill any auditing or oversight functions by applicable oversight agencies.

18.10.2 Right to Audit

The Contractor shall always abide by the conditions of any applicable federal or California State regulations, incorporated by reference herein, regarding the retention and access requirements related to financial and programmatic records, supporting documents, statistical records and other records created or covered by this Contract.

The Contractor agrees that State and federal agencies with appropriate jurisdiction and authority may, from time to time, enter the Contractor's facilities, premises or other locations where the Contractor is fulfilling its obligations under this Contract to inspect, monitor or otherwise evaluate the Contractor's performance or compliance with the terms of this Contract. The Contractor shall provide reasonable access to any such facilities, premises or other locations upon request by the State or its designee.

The Contractor and any Subcontractors retained by the Contractor shall likewise cooperate in good faith with the State or its designee to make CalHEERS available to any such oversight agency determined by the State to have appropriate oversight authority and, upon reasonable request, shall provide copies of any electronic or paper-based documents, records, reports or supporting documentation needed to fulfill any federal or California State auditing or oversight obligations pertaining to CalHEERS, within seven (7) Business Days of the request unless otherwise approved by the State.

The Contractor shall retain any and all documents and records, including but not limited to financial records, records pertaining to eligibility verifications and determinations, enrollment transactions, appeals and plan variation certifications for a period of ten (10) years and shall provide any such information to Covered California, Office of Technology & Solutions Integration (OTSI), the Department of Health Care Services (DHCS) or their designee upon request.

The Contractor agrees to allow any such person(s) to access to such records during normal business hours and to allow interviews of any employees or others who might reasonably have information related to such records, without undue interruption to their normal duties.

The Contractor shall undergo an annual Statement on Standards for Attestation Engagements, Reporting on Controls at a Service Organization (SSAE No. 16) or successor audits throughout the term of this Contract. The Contractor shall work collaboratively with any such auditors and provide complete and accurate information and documentation in a timely manner at no cost to the State for any such participation, assistance and work. Should the auditor determine the existence of any exceptions, the Contractor shall correct any such exceptions in a timely manner. The State shall pay the cost associated with the retention and hiring of any such auditors needed to conduct the aforementioned SSAE No. 16.

18.10.3 Notice of Review

Whenever reasonably possible, the State shall give the Contractor advance written Notice of any monitoring, auditing, observation, or visits by authorized persons to the Contractor's place(s) of business. Such audit may include an audit of the books and records of the Contractor, or any of its Subcontractors or prospective Subcontractors, which are related to the Contract cost or pricing data and to the Contractor's performance of its obligations pursuant to the Contract, to the extent required by Federal or State laws or regulations and this Contract or any subcontracts. Upon notification, except in exceptional circumstances, by the State to the Contractor during any Business Day between the hours of 8:00 a.m. - 5:00 p.m., PT all documentation, including accounting records, related to this Contract shall be available for and subject to review, inspection, copying (at the State's expense), and audit by the State or Federal Governments, or other personnel duly authorized by the State.

18.10.4 Data and Materials Property of the State

All Data, records, documents, communications, and other materials developed and used in the performance of this Contract shall be the Property of the State unless otherwise specified herein and shall be maintained by the Contractor and made, to the extent reasonably feasible, accessible within the State of California on behalf of the State, for a period of ten (10) years from the date of final payment under this Contract, or for such further period as may be necessary to resolve any matters which may be pending, or until an audit has been completed with the following qualification: If an audit by or on behalf of the federal or State government has begun but is not completed at the end of the ten (10) year period, or if audit findings have not been resolved after a ten (10) year period, the materials shall be retained until the resolution of the audit findings.

18.10.5 Subcontracts

The records retention, review, inspection, audit, interview, copying, and other requirements of this section shall be incorporated by the Contractor in all of its subcontracts.

18.11 NOTICE OF DELAY

When the Contractor has knowledge that any actual or potential situation is delaying or threatens to delay the timely performance of this Contract, the Contractor shall, within five (5) Business Days, give written Notice thereof, including all relevant information with respect thereto, to the State.

18.12 NOTICES

Notice shall deem to be given by the parties under this Contract if delivered to the State immediately in writing with confirmation of receipt from the State. Each party shall provide Notice to the other of changes to such addresses.

Notice Address for the Contractor: (Company Name of SI)
CalHEERS Project Manager
[Street Address]
Sacramento, CA [ZIP]

Notice Address for the State: State of California
Office of Technology & Solutions Integration
CalHEERS Contract and Procurement Chief
2329 Gateway Oaks Drive, Suite 250
Sacramento, CA 95833

18.13 PUBLICITY

The Contractor shall not refer to the State of California, any office, agency, or officer thereof, or any State employee, including the head of the State, the State procurement officer, or to the Services or Deliverables, or both, provided under this Contract, in any of the Contractor's brochures, advertisements or other publicity of the Contractor without the prior written consent of the State Project Director or designee. The Contractor agrees to submit to the State Project Director all advertising, sales promotions, news releases, and other publicity matters relating to this Contract or any Deliverable or Service furnished by the Contractor wherein the State's name is mentioned, or language used from which the connection of the State's name therewith may, in State's judgment, be inferred or implied. All media contacts with the Contractor about the subject matter of this Contract shall be referred to the State Project Director or designee.

18.14 CRIMINAL BACKGROUND CHECKS

All staff, including employees, Contract or subcontract personnel, vendors or volunteers, prior to implementing Services under this Contract, must comply with the criminal background check requirements set forth in California Government Code section 1043, and its implementing regulations set forth in California Code of Regulations, Title 10, section 6456. Clearance to initiate Services must be received from Covered California Office of Legal Services, prior to providing any access to any CI, PII, PHI, FTI, or financial information contained in the information systems and devices of CalHEERS, or any other information as required by federal and State law or guidance. The Contractor shall bear all costs associated with obtaining clearance for each said employee.

18.15 REMEDIES

Except as provided herein, no remedy conferred by any of the specific provisions of this Contract is intended to be exclusive of any other remedy, and each and every remedy shall be cumulative and shall be in addition to every other remedy given hereunder, now or hereafter existing at law or in equity or by statute or otherwise. The election of any one or more remedies, excluding Liquidated Damages, by either party shall not constitute a waiver of the right to pursue other available remedies.

18.16 SUBCONTRACTORS

18.16.1 Process

The Contractor may, with prior written permission from the State Project Director or designee, enter into subcontracts with third parties for the performance of any part of the Contractor's duties and obligations. Any such permission may be rescinded. Subcontractors identified in the Contractor's Proposal shall be deemed to have prior written permission.

During the Contract term, the State reserves the right to approve or disapprove proposed Subcontractors and require replacement (termination for convenience) of current Subcontractors.

The Contractor shall provide the State Project Director, or designee, written Notice requesting approval to roll-on or roll-off a subcontractor 60 Days in advance (at a minimum). The written Notice for the roll-on of a proposed Subcontractor shall include confirmation that the vendor is experienced and proven at providing the goods or services assigned for the project, and that no conflict of interest exists. If the proposed Subcontractor will serve as an interface partner (e.g., a print vendor) the roll-on is subject to technical, security, and other State reviews and must follow existing Standard Operating Procedures for the roll on of a new interface partner. Costs associated with Subcontractor roll-on and roll-off efforts, including but not limited to implementing interface connections and/or infrastructure, are considered part of the Contract's fixed price costs. Tracking for Subcontractors should be maintained in a Subcontractor list provided to the State Contract Management Team and updated as changes occur, similar to the Contractor staff roll-on and roll-off tracking, and shall include, but not be limited to, actual approval, roll-on, and roll-off dates.

Upon request of the State, the Contractor shall provide the required documentation (e.g., Subcontractor's qualifications, insurance documentation, etc.) for any proposed replacement Subcontractor to the State Project Director, or designee, for review and approval prior to the commencing of any Contract work.

All subcontracts shall be in writing and available upon request by the State; provided however that the Contractor shall have the right to redact pricing and other sensitive and proprietary information prior to making the subcontract available to the State. Any subcontracts must be referenced in the Contract. In addition, the Contractor is responsible and liable for the proper performance of, and the quality of any work performed by any and all Subcontractors. In addition, the Contractor's use of any Subcontractor shall not cause the loss of any warranty from the Contractor or any Software manufacturer or provider. The State reserves the right to reject or refuse any of the Contractor or Subcontractor personnel whose workmanship, in the reasonable judgment of the State, is deemed to be substandard. In no event shall the existence of a subcontract operate to release or reduce the liability of the Contractor to the State for any breach in the performance of the Contractor's duties. Any permitted Subcontractor must submit to the State a tax clearance certificate from the California Franchise Tax Board (FTB) showing that any and all delinquent taxes have been paid. Subcontracts permitted by the State shall be subject to the applicable requirements of this Contract.

18.16.2 Subcontracts

The Contractor agrees that any subcontract(s) resulting from its performance under the applicable terms and conditions of this Contract shall include a provision that the Subcontractor shall abide by the applicable terms and conditions hereof, as well as all other applicable federal and State laws, and rules and regulations pertinent hereto that have been or may hereafter be established. Also, the Contractor agrees that all subcontracts shall include a provision that the

Subcontractor shall indemnify and hold harmless the State to the extent described in Section 16.1, INDEMNIFICATION. No subcontract shall terminate the legal responsibilities of the Contractor for overall performance under the Contract. Any contract between the Contractor and its Subcontractors shall require the Subcontractors to adhere to the same Performance Standards and other standards required of the Contractor as applicable to Subcontractor's Services. Subcontractors must be qualified, as demonstrated by receiving professional certification(s) and license(s), to work on any Deliverables and ~~Services~~for Services for which their Services are obtained.

18.17 SURVIVAL

The terms, conditions, and warranties contained in this Contract that by their sense and content are intended to survive the performance hereof by the parties hereunder shall so survive the completion of the performance, cancellation or termination of this Contract. In addition, the terms of Paragraphs 21, 22, 23, 26, 28, 34, 37 and 38 of the General Provisions, and Sections 16 and 18 of these Special Provisions shall survive the termination of this Contract.

18.18 THIRD PARTY BENEFICIARIES

It is expressly understood and agreed that the enforcement of the terms and conditions of this Contract and all rights of action relating to such enforcement, shall be strictly reserved to the State and the Contractor. Nothing contained in this Contract shall give to or allow any claim or right of action whatsoever by any third person. It is the express intention of the State and the Contractor that any person or entity, other than the State or the Contractor, receiving Services or benefits shall be deemed an incidental beneficiary only, except as provided in General Provisions Paragraph 37.

18.19 WATER OR AIR POLLUTION VIOLATION

The Contractor shall not: (1) violate any order or resolution not subject to review promulgated by the California State Air Resources Board or an air pollution control district; (2) be subject to a cease and desist order not subject to review issued pursuant to Water Code Section 13301 for violation of waste discharge requirements or discharge prohibitions; or (3) finally be determined to be in violation of federal law relating to air or water pollution.

18.20 WAIVER OF RIGHTS BY CONTRACTOR

Any action or inaction by the Contractor or the failure of the Contractor on any occasion, to enforce any right or provisions of the Contract, shall not be construed to be a waiver by the Contractor of its rights hereunder and shall not prevent the Contractor from enforcing such provision or right on any future occasion.

18.21 POSTAGE

1. Postage is a pass-through cost. Postage fulfilment shall be provided by third-party shipping agents or U.S. Postal Service (USPS).
2. The Contractor shall act in the capacity of an agent role for postage fulfilment and is not liable for non-delivery except because of mislabeling of material by the Contractor.
3. The Contractor shall be paid for its Services, including postage, for any non-delivery by third-parties or the U.S. Postal Service.
4. The Contractor shall be paid for any re-shipments, or second mailings required due to mis-delivery by third parties.

5. The Contractor shall invoice postage as a separate line item on monthly invoices.
6. If non-delivery was a result of mis-labeling of material by the Contractor, the Contractor shall re-ship or provide second and subsequent mailings at no cost to the State for its Services or postage.

18.22 ARTIFICIAL INTELLIGENCE (AI) REQUIREMENTS

During the term of the Contract, Contractor must notify the State in writing if their Services or any work under this Contract includes, or makes available, any previously unreported AI technology, including AI from third parties or Subcontractors. Contractor shall immediately complete and submit the CalHEERS Artificial Intelligence Risk Assessment form, notifying the State of any new or previously unreported AI technology.

At the direction of the State, the Contractor shall discontinue the use of any new or previously undisclosed AI technology that materially impacts functionality, risk or Contract performance, until use of such AI technology has been approved by the State.

Failure to disclose AI use to the State and submit the CalHEERS Artificial Intelligence Risk Assessment form may be considered a breach of the Contract, and the State may consider such failure to disclose AI and/or failure to submit the CalHEERS Artificial Intelligence Risk Assessment form as grounds for the immediate termination of the Contract. The State is entitled to seek any and all relief it may be entitled to as a result of such non-disclosure.

The State reserves the right to amend the Contract, without additional cost, to incorporate AI Special Provisions into the Contract at its sole discretion and/or terminate any contract that presents an unacceptable level of risk to the State.

1. The State of California seeks to realize the potential benefits of AI, through the development and deployment of AI tools, while balancing the risks of these new technologies. The Bidder/Offeror/Contractor must notify the State in writing if their solution or Service includes, or makes available, any AI including, AI from third parties or Subcontractors.
2. The State has developed the CalHEERS Artificial Intelligence Risk Assessment form to be completed by the Bidder/Offeror/Contractor. Failure to submit the CalHEERS Artificial Intelligence Risk Assessment form will result in disqualification of the Bidder/Offeror/Contractor.
3. Failure to report AI to the State may void any resulting contract. The State reserves its right to seek any and all relief to which it may be entitled to as a result of such non-disclosure.
4. Upon receipt of a Bidder/Offeror/Contractor CalHEERS Artificial Intelligence Risk Assessment form, the State reserves the right to incorporate ~~AI~~ Specialadditionaladditional Provisions-provisions into the final Contract or reject bids/offers that present an unacceptable level of risk to the State.

ATTACHMENT A-2.1 PRIVACY & SECURITY REQUIREMENTS

A. PURPOSE OF ATTACHMENT

1. This ATTACHMENT A-2.1 sets forth the privacy and security requirements that apply to all Personally Identifiable Information (PII) that Contractor obtains, maintains, transmits, uses or discloses from the State pursuant to this Contract.
2. The parties agree to all terms and conditions of this Attachment in order to ensure the integrity, security, and confidentiality of the information exchanged pursuant to this Contract, and to allow disclosure and use of such information only as permitted by law and only to the extent necessary to perform functions and activities pursuant to this Contract.
3. This Attachment establishes requirements in accordance with applicable federal and state privacy and security laws including, but not limited to, the Information Practices Act (California Civil Code section 1798 et seq.), the Federal Patient Protection and Affordable Care Act (Public Law (PL) 111-148), as amended by the Federal Health Care and Education Reconciliation Act of 2010 (PL 111-152) (herein, the "Affordable Care Act"), and its implementing regulations at Title 45 CFR Sections 155.260 and 155.270 (the "State Privacy and Security Rules") and, where applicable, the Health Insurance Portability and Accountability Act (42 United States Code (USC) section 1320d-d8) and the Health Information Technology for Economic and Clinical Health (HITECH) Act and their implementing regulations at Title 45 CFR Parts 160 and 164 (collectively, "HIPAA") , as well as applicable privacy and security control protocols defined in the most current version of CMS privacy and security framework, as required.

B. DEFINITIONS

Unless otherwise specified, the capitalized terms referenced herein shall at all times have the same meaning as set forth within Appendix C, ~~("Glossary")~~ of this Contract. In the event of a conflict between a specifically-defined term specified within this Addendum and the Glossary, the definition set forth within this Addendum shall prevail.

C. APPLICABLE LAWS

The Contractor shall comply with any and all federal and state privacy and security laws, as well as applicable rules and regulations pertaining to the State including, but not limited to, those arising under the Federal Patient Protection and Affordable Care Act (ACA) and its implementing regulations. To the extent a conflict arises between any laws or other requirements, the Contractor agrees to comply with the applicable requirements imposing the more stringent privacy and security standards.

a) State Privacy and Security Rules (Title 45 CFR section 155.260)

1. In accessing, collecting, using or disclosing PII in performing functions for the State as authorized by this Contract, the Contractor shall only use or disclose PII to the minimum extent such information is necessary to perform such functions.
2. The Contractor shall establish and implement privacy and security standards that are consistent with the principles of Title 45 CFR section 155.260(a)(3) as set forth below in subsections (i) through (viii):

- a. Individual access: Individuals shall be provided with a simple and timely means to access and obtain their PII in a readable form and format;
- b. Correction: Individuals shall be provided with a timely means to dispute the accuracy or integrity of their PII and to have erroneous information corrected or to have a dispute documented if their requests are denied;
- c. Openness and transparency: Contractor shall be open and transparent regarding its policies, procedures, and technologies that directly affect individuals and/or their PII;
- d. Individual choice: Individuals shall be provided a reasonable opportunity and capability to make informed decisions about the collection, use, and disclosure of their PII;
- e. Collection, use and disclosure limitations: PII shall be created, collected, used, and/or disclosed only to the extent necessary to accomplish a specified purpose(s) and never to discriminate inappropriately;
- f. Data quality and integrity: Contractor shall take reasonable steps to ensure that PII is complete, accurate, and up-to-date to the extent necessary for Contractor's intended purposes and has not been altered or destroyed in an unauthorized manner;
- g. Safeguards: PII shall be protected with reasonable operational, administrative, technical, and physical safeguards to ensure its confidentiality, integrity, and availability and to prevent unauthorized or inappropriate access, use, or disclosure; and,
- h. Accountability: The Contractor shall use appropriate monitoring and other means and methods to assure accountability with these principles and to report and mitigate nonadherence and Breaches.

b) California Information Practices Act

The Contractor shall comply with the applicable privacy and security provisions of the Information Practices Act of 1977, California Civil Code section 1798 et seq., as updated in 2017, and shall provide assistance to the State as may be reasonably necessary for the State to comply with these provisions (California Civil Code section 1798 et seq.).

1. Health Insurance Portability and Accountability Act ("HIPAA")

- a. The Contractor expressly acknowledges and agrees that the State is not a health care provider, a health care plan, or a health care clearinghouse. Accordingly, the parties mutually acknowledge and agree that, for purposes of this Contract, the State is not a Covered Entity as specifically defined in HIPAA.
- b. The Contractor expressly acknowledges and agrees that where the State performs a function required under applicable law pursuant to Title 45 Code of Federal Regulations (CFR) section 155.200, it is not acting as a Business Associate of any other Covered Entity and the Contractor is not acting as the State's Business Associate, as such terms are specifically defined in HIPAA.
- c. DHCS, which implements Medi-Cal program and other DHCS programs, is a Covered Entity as defined by HIPAA. Therefore, to the extent that the Contractor is performing functions pursuant to this Contract and accesses or uses PII that was provided to the State by DHCS or for the purposes of the Medi-Cal program or any other DHCS programs, the Contractor shall comply with the applicable terms and conditions of HIPAA.

c) Internal Revenue Service (IRS) Code section 6103 and *Publication 1075*

Per the State Privacy and Security Rules (Title 45 CFR 155.260 (a)(4)(iii), return information shall be kept confidential under Title 26 U.S. Code section 6103. As described by IRS Publication 1075, conforming to the guidelines set forth in that publication meets the safeguard requirements of Title 26 U.S. Code section 6103(p)(4) for FTI.

2. Fingerprinting and Background Checks (California Government Code Section 1043)
 - a. Before any individual who provides Services related to this Contract may access PII, including but not limited to any employee, Subcontractor or other person, Contractor must ensure that any such individual shall agree to a criminal background check, in accordance with California Government Code Section 1043, and its implementing regulations set forth in California Code of Regulations, Title 10, Section § 6456. The Contractor shall bear all costs associated with obtaining clearance for each said employee.
 - b. Background check records shall be maintained by Covered California for so long as any such individual is employed with Contractor or, if applicable, the Contractor's Subcontractor plus a period of no less than five (5) years thereafter. The Contractor shall provide Covered California with a list of any such individuals subject to this requirement and shall provide, update and notify Covered California of any personnel changes involving any such individuals via e-mail at backgroundchecks@covered.ca.gov.
3. Privacy and Security Awareness Training (ARC-AMPE or current State-approved standard)
 - a. The Contractor shall ensure that any and all employees, agents, representative or Subcontractors who are provided access to PII have been provided privacy and security awareness training prior to accessing PII subject to this Contract, then annually thereafter. The Contractor shall at a minimum ensure that the content of any such training shall address the security controls and safeguards required herein, as well as HIPAA compliance for PHI subject to this Contract and requirements arising under IRS Publication 1075 and Internal Revenue Code (IRC) §6103 pertaining to the receipt, storage, handling or use of FTI.
 - b. The Contractor shall likewise ensure that any and all such employees, agents, representatives or Subcontractors certify in writing their completion of any such privacy and security awareness programs. Upon request, the Contractor shall provide the State with copies of these certifications.
 - c. The Contractor shall retain the aforementioned certifications for a period of five (5) years and shall provide the copies upon request during this time.
 - d. Upon request, the Contractor shall provide the State with copies of any training materials used to satisfy the above referenced requirements to enable the State to review such materials and confirm that the Contractor's privacy and security awareness training fulfills the subject matter requirements set forth herein. Following its review, the State may, in its sole discretion, require that the Contractor's employees, agents, representatives or Subcontractors complete privacy and security awareness training provided by the State. The Contractor shall be deemed to have complied with the above referenced requirements through the completion of any such privacy and security awareness training provided by the State.

D. CONSUMER RIGHTS

a) Accounting of Disclosures

1. The Contractor shall assist the State in responding to accounting requests by individuals that are made to the State under the Information Practices Act (Civil Code section 1798.25-29) and if PHI is involved, pursuant to HIPAA, Title 45 CFR section 164.528.
2. The obligation of the Contractor to provide an accounting of disclosures as set forth herein survives the expiration or termination of this Contract with respect to accounting requests made after such expiration or termination.

b) Copies of Records Requests

1. Regardless of whether a request is made to the State or to the Contractor, the Contractor shall respond to the request with respect to the record the Contractor and its Subcontractors maintain, if any, in a manner and time frame consistent with requirements specified in the Information Practices Act (California Civil Code sections 1798.30 - 1798.34) and if PHI is involved, with HIPAA (Title 45 CFR section 164.524).

c) Requests to Amend Records

1. The Contractor shall make any amendments to PII in a record that the State directs or agrees to, whether at the request of the State or an Individual.
2. Regardless of whether a request to amend records is made to the State or to the Contractor, the Contractor shall respond to the request with respect to the record the Contractor and its Subcontractors maintain in a manner and time frame consistent with requirements specified in the Information Practices Act (Civil Code section 1798.35) and if PHI is involved, with HIPAA (Title 45 CFR section 164.526).

d) Requests to Restrict Use and Disclosure of PII

1. The Contractor shall reasonably comply with any requests to restrict the use and disclosure of PII.
2. If PHI is involved, the Contractor shall respond to the request in a manner and time frame consistent with requirements specified in HIPAA (Title 45 CFR section 164.522).

e) Confidential Communications Request

1. In responding to any requests from individuals, the Contractor shall follow any and all procedures and protocols implemented by Covered California pertaining to the authentication of individuals making the request.
2. Upon receipt of written Notice, the Contractor shall reasonably comply with any requests to utilize an alternate address, e-mail, or telephone number when communicating with the individual.
3. If the request is denied, a written response shall be sent to the individual stating the reasons for denying the request.
4. If PHI is involved, regardless of whether a request is made to the State or to the Contractor, the Contractor shall respond to the request in a manner and time frame consistent with requirements specified in HIPAA (Title 45 CFR section 164.522(b)(1)).

5. In the event any individual submits a confidential communications request to the Contractor, the Contractor shall forward any such requests to Covered California within 48 hours.

E. GENERAL SAFEGUARDS AND SECURITY CONTROLS

a) General Safeguards

1. The Contractor shall establish and implement operational, technical, administrative, and physical safeguards that are consistent with any applicable laws to ensure:
 - a. The confidentiality, integrity, and availability of PII created, collected, used, and/or disclosed by the State.
 - b. Personally Identifiable Information is only used by or disclosed to those authorized to receive or view it.
 - c. Return information, as such term is defined by section 6103(b)(2) of the Code, is kept confidential under section 6103 of the Code.
 - d. Personally Identifiable Information is protected against any reasonably anticipated threats or hazards to the confidentiality, integrity, and availability of such information.
 - e. Personally Identifiable Information is protected against any reasonably anticipated uses or disclosures of such information that are not permitted or required by law; and
 - f. Personally Identifiable Information is securely destroyed or disposed of in an appropriate and reasonable manner and in accordance with retention schedules.
2. The Contractor shall update these safeguards as appropriate and as requested by the State.

b) Security Controls

1. Electronic Security Controls:
 - a. Encryption: The Contractor shall encrypt all PII that is in motion or at rest, including but not limited to data on portable media devices, laptops and workstations, with FIPS 140-2 compliant encryption, including but not limited to any PII transmissions which occur via website access, file transfer or e-mail. Encryption protocols implemented by the Contractor shall at all times be consistent with the National Institute for Standards and Technology ("NIST") security controls concerning the protection of PII. The aforementioned encryption requirement shall at all times be applicable to PII transmissions both within and outside of the CalHEERS secure internal network and may be fulfilled either through network-level end-to-end encryption or the encryption of any data files containing PII.
 - b. Hardware: The Contractor shall ensure that any and all Hardware, including but not limited to personal computers, laptops, jump-drives, smart phones or other devices upon which PII is stored, is secured, password-protected and only accessible by the Contractor or the Contractor's agents, employees or Subcontractors in accordance with the terms of this Contract. The Contractor shall at all times remove and permanently delete any and all PII before any such Hardware is transferred or sold to a third-party or is otherwise subject to any change in ownership or control.
 - c. Log-In Credentials: The Contractor shall at all times ensure that each individual user of any State computer system through which PII is accessed maintains his or her own

unique user-id and password. The Contractor shall strictly refrain from sharing individual log-in credentials and shall always assume responsibility for ensuring that the log-in credentials of any former employees, Subcontractors, agents or other representatives who are no longer subject to this Contract are deactivated or otherwise changed to prevent unauthorized access by any such individuals within 24 hours.

- d. **Server Security:** Servers containing unencrypted PII must have sufficient administrative, physical, and technical controls in place to protect that data, based upon a risk assessment / system security review.
- e. **Minimum Necessary:** Only the minimum necessary amount of PII required to perform necessary business functions may be copied, downloaded, or exported.
- f. **Data Destruction:** When no longer needed, all PII must be cleared, purged, or destroyed consistent with NIST Special Publication 800-88, Guidelines for Media Sanitization, such that the personal, sensitive, confidential information cannot be retrieved.
- g. **Access Controls:** The System providing access to PII must use role-based access controls for all user authentications, enforcing the principle of least privilege.

c) **Physical Controls**

- a. **Supervision of Data:** PII in paper form shall not be left unattended at any time, unless it is locked in a file cabinet, file room, desk or office. Unattended means that information is not being observed by an employee authorized to access the information. PII in paper form shall not be left unattended at any time in vehicles or planes and shall not be checked in baggage on commercial airplanes.
- b. **Escorting Visitors:** Visitors to areas where PII is contained shall be escorted and PII shall be kept out of sight while visitors are in the area.
- c. **Confidential Destruction:** PII must be disposed of through confidential means, such as crosscut shredding and pulverizing in accordance with the State's secure document destruction protocols.
- d. **Removal of Data:** PII must not be removed from the premises of the Contractor except with express written permission of the State.
- e. **Faxing:** Faxes containing PII shall not be left unattended and fax machines shall be in secure areas. Faxes shall contain a confidentiality statement notifying persons receiving faxes in error to destroy them. Fax numbers shall be verified with the intended recipient before sending the fax.
- f. **Mailing:** Mailings of PII shall be sealed and secured from damage or inappropriate viewing of PII to the extent possible. Mailings which include 500 or more individually identifiable records of PII in a single package shall be sent using a tracked mailing method which includes verification of delivery and receipt, unless the prior written permission of the State to use another method is obtained.

F. POLICIES AND PROCEDURES

- 1. The Contractor shall designate one (1) individual to serve as the single point of contact ("SPOC") in matters pertaining to the Contractor's information security and privacy program and the implementation of the requirements set forth herein. The name and

contact person of the aforementioned SPOC shall be submitted to the State information security offices via email, no later than 60 Days prior to the effective date of this Contract:

OTSI: osiinfosecurity@otsi.ca.gov

CovCA: informationsecurity@covered.ca.gov

DHCS: incidents@dhcs.ca.gov

and State Privacy Offices via email, no later than 60 Days prior to the effective date of this Contract:

OTSI: privacy@otsi.ca.gov

CovCA: privacyofficer@covered.ca.gov

DHCS: DHCSPrivacyOfficer@dhcs.ca.gov

The SPOC may, in his or her discretion, delegate project-related tasks to other individuals but shall at all times remain responsible for ensuring compliance with the security and privacy-related requirements specified within this Contract and for communicating with the State Information Security and Privacy Offices on security and privacy-related matters.

2. The Contractor shall implement and maintain written policies and procedures to ensure the privacy and security of PII stored, maintained, or accessed in compliance with this Contract and any applicable laws. Such policies shall address:
 - a. Implementation of consumer rights as required by this Attachment.
 - b. Reasonable safeguards as required by this Attachment.
 - c. Monitoring, periodically assessing, and updating security controls and related system risks to ensure the continued effectiveness of those controls.
 - d. Training employees, Contractors, and Subcontractors.
3. Upon request, the Contractor shall provide the State with any written policies and procedures adopted by the Contractor to meet its obligations under this Contract. Should the State determine any such policies and procedures to be insufficient, the Contractor agrees to cooperate in good faith to incorporate appropriate revisions required by the State to bring any such policies and procedures into compliance.
4. The Contractor agrees to apply appropriate sanctions must be applied against workforce members who fail to comply with privacy policies and procedures or any provisions of these requirements, including termination of employment where appropriate.
5. Subcontractors
 - a. The Contractor shall be bound by and be responsible for the acts and omissions of its Subcontractors, agents or vendors in the exchange of data with the State. The Contractor shall take reasonable steps to ensure compliance with the terms of this Contract by its Subcontractors, agents and vendors.
 - b. The Contractor agrees to enter into written contracts with its agents and contractors that obligate such agents or Subcontractors to abide by the same privacy and security standards and obligations that the Contractor has agreed to in this Contract.
 - c. The Contractor represents and agrees that it shall only request that the State transmit data to Subcontractors with whom it has contractually imposed such privacy and

security standards and only to the extent such information is necessary to carry out the purposes authorized by this Contract.

- d. Upon request, the Contractor shall provide the State with copies of any written agreements or contracts entered into by the Contractor and its Subcontractors to meet the obligations of the Contractor under this Contract.

G. BREACHES & SECURITY INCIDENTS

1. The Contractor shall report any actual or suspected Breaches or Security Incidents in accordance with the terms and conditions specified within the applicable Service Level Agreements (“SLA’s”) set forth within Appendix A-2.3, SERVICE LEVEL AGREEMENTS AND LIQUIDATED DAMAGES, of this Contract, to the State Privacy Offices at:

OTSI: privacy@otsi.ca.gov

CovCA: privacyofficer@covered.ca.gov

DHCS: DHCSPrivacyOfficer@dhcs.ca.gov

and State Information Security Offices at:

OTSI: osiinfosecurity@otsi.ca.gov

CovCA: informationsecurity@covered.ca.gov

DHCS: incidents@dhcs.ca.gov

2. Security Incident reports shall at all times be submitted by the Contractor via the use of standardized forms (“Incident Report Forms”), which shall be reviewed and approved by the State. Incident Report Forms shall at all times include:
 - a. A brief description of what happened including the date of the incident and the date of the discovery of the incident;
 - b. The names or identification numbers of the individuals whose PII has been, or is reasonably believed to have been accessed, acquired, used or disclosed
 - c. A description of the types of PII that were involved in the incident, as applicable;
 - d. Information regarding any information system intrusion and any systems potentially compromised;
 - e. A brief description of the Contractor’s investigation and mitigation plan; and’
 - f. Any other information reasonably necessary to enable the State to ascertain the results of any investigation or mitigation plan required by the Contractor under the SLA’s; to conduct its own investigation if, in the State’s sole discretion, it determines it to be warranted; to notify affected consumers in the event of a Breach; and to comply with any applicable privacy-related legal obligation arising from the Security Incident or Breach.
3. Upon discovery of an actual or suspected Breach or Security Incident, intrusion or unauthorized access, use or disclosure of PII, the Contractor shall take:
 - a. Prompt corrective action to mitigate any risks or damages involved with the Breach and to protect the operating environment; and
 - b. Any action pertaining to such unauthorized disclosure required by applicable Federal and State laws and regulations.

4. In addition to the incident reporting obligations specified within the SLA's, the Contractor shall at all times immediately commence an investigation in accordance with applicable law to:
 - a. Determine the scope of the incident;
 - b. Mitigate harm that may result from the incident; and
 - c. Restore the security of the system to prevent any further harm or incidents.
5. The Contractor shall cooperate with the State in investigating the actual or suspected incident and in meeting the State's obligations, if any, under applicable laws.
6. The Contractor shall mitigate to the extent practicable any harmful effect of any Breach or Security Incident that is known or reasonably discoverable to the Contractor.
7. The Contractor shall cooperate with the State in developing content for any public statements and shall not give any public statements without the express written permission of the State.
8. If a Breach requires notifications and reporting under applicable laws, and the cause of the Breach is attributable to the Contractor, its agents or Subcontractors, the Contractor shall:
 - a. Be fully responsible for providing Breach notifications and reporting as required under applicable laws;
 - b. Pay any costs of such Breach notifications as well as any costs or damages associated with the incident; and
 - c. Should the State, in its sole discretion, determine that credit monitoring is an appropriate remedy, arrange for and bear the reasonable, out-of-pocket cost of providing to each such affected individual one (1) year of credit monitoring Services from a nationally recognized supplier of such Services.
9. If the Contractor determines that a Security Incident involving PII does not require Breach notifications or reporting, it shall document its assessment and provide such documentation to the State within one week of submitting its final report. Notwithstanding the foregoing, the State reserves the right to reject the Contractor's assessment and direct the Contractor to treat the Security Incident as a Breach.

H. RISK CLASSIFICATION & ASSESSMENT

1. The State may, in its discretion, assign a tier-based risk classification to the disclosure of PII to Contractor under this agreement.
2. Determinations as to Contractor's risk-classification tier shall be made by Covered CA in its sole discretion and Contractor shall be notified of Contractor's risk-classification prior to the execution of this agreement and during this agreement if it changes. Contractor's risk-classification tier shall be provided to the SPOC appointed by Contractor within Section F above.
3. Based on the applicable risk-classification, Contractor acknowledges and agrees that the State may impose additional privacy and information security-related obligations, which may include but need not be limited to an annual attestations or annual security assessments.

4. Contractor shall at all times cooperate in good faith with the State in the provision of any information needed by the State to ascertain Contractor's risk classification or the above-referenced security-related documentation.
5. Tier-Based Risk Classification:
 - a. General
 - i. Under Section H above, the California Health Benefits Exchange (herein, "Covered CA") is entitled to impose a tier-based risk classification upon Contractor's access to PII obtained by Contractor under this agreement. ~~In the event of a conflict between Exhibit D of this agreement and the provisions of this Attachment, the provisions of this Attachment will control.~~
 - ii. Covered CA has determined that the acquisition of PII by Contractor under this agreement warrants a Tier 1 Classification.
 - iii. All Contractors classified as Tier 1 are required to comply with following terms and conditions:
 - b. Tier 1 Privacy and Security Safeguards
 - i. A Tier 1 Contractor is required to maintain an information security program that meets or exceeds the privacy and security controls adopted by Covered CA. Covered CA is required to maintain compliance with the current version of the privacy and security safeguards for health benefit exchanges, currently ARC-AMPE, mandated by the Centers for Medicare & Medicaid Services (CMS). Tier 1 Contractors may select one of the following ways to demonstrate to Covered CA the development and maintenance of a comprehensive security program based on NIST SP 800-53 Rev. 5, which must at all times govern Contractor's access and use of PII disclosed to Contractor under this agreement.
 1. FedRAMP Authorization (Moderate Level)
 2. MARS-E 2.2 or most current effective version (v2.2 as of February 2024)
 3. ARC-AMPE (Latest volume and version)
 4. HITRUST v11.x or later (Moderate or High Risk Level)
 5. NIST CSF 2.0 or later
 6. ISO 27001
 7. SOC 2 Type 2
 - c. Assessment
 - i. Covered CA reserves the right to perform, or a contracted delegate to perform, a security risk assessment once per calendar year, to assess the Contractor's security program. Should Covered CA choose to conduct any such assessment, Contractor must respond to Covered CA within fifteen (15) Business Days.

In addition to the annual security risk assessment, Contractor must provide Covered CA with the following to *informationsecurity@covered.ca.gov*:

1. Quarterly

- a. Vulnerability scan report and remediation plan for critical and high findings on internal and external network and systems used for Covered CA contracted services.

2. Annually

- a. Outcome reports from the security program selected in Section H.2.
- b. Report on Security Risk Assessment findings and remediation plans performed by a reputable independent assessor within the last year.
- c. Report on findings and remediation plan on an internal and external network penetration test performed by a reputable independent assessor within the last year.
- d. Report from the most recent quarterly web application penetration test, if services include an internet facing website or portal.
- e. Evidence of pre-production code testing or peer reviews, if services include code development.
- f. Business Continuity Plan updated within the last year.
- g. Current PCI- DSS Attestation of Compliance, if Contractor processes credit card payments on behalf of Covered CA.
- h. List of all subcontractors.

Contractor will address critical and high-risk findings from any of the above assessments within a mutually agreed upon timeframe. Failure to meet the timeframe may be considered a breach of this agreement.

d. Location

- i. All Contractor services, workers, and data storage are required to be within the US and its territories. By written approval, workers may reside outside of the US but will be restricted to Non-Production environments and will not have access to PII.

e. Access

- i. If the Contractor will require direct access to Covered CA systems, Contractor must agree to the following:
 - a. Unless Contractor receives explicit consent, Contractor is required to use only Covered CA issued devices for services.
 - b. Covered CA devices must be connected to the internet for 24 hours at least once per week to obtain security updates.
 - c. Each Contractor worker agrees to the Covered CA Acceptable Use Policy prior to gaining access to Covered CA systems.

- d. Notify Covered CA immediately of any confirmed or suspected security incident identified while delivering services.
 - e. Notify Covered CA within one (1) hour of Contractor workers no longer requiring access to Covered CA systems.
 - f. Agree to return all Covered CA equipment in working condition at the termination of the contract.
- f. Subcontracting
 - i. Contractor must not disclose or store Covered CA PII with any third party without prior written approval from Covered CA. If approved, the Contractor's third party must be contractually required to meet the same security requirements as in this agreement. Contractor is responsible for the actions of their third parties.

I. RIGHT TO INSPECT

The State may inspect the facilities, systems, books, and records of the Contractor to monitor compliance with this Attachment at any time. The Contractor shall promptly remedy any violation reported to it by the State and shall certify the same to the designated State Privacy Offices in writing. The fact that the State inspects, fails to inspect, fails to detect violations of this Attachment or detects but fails to notify the Contractor of the violation or require remediation is not a waiver of the State's rights under this Contract and this Attachment.

J. INDEMNIFICATION

In addition to any remedies found at Paragraph 28 Indemnification in the General Provisions the Contractor shall indemnify, hold harmless, and defend the State from and against any and all costs (including mailing, labor, administrative costs, vendor charges, and any other costs the State determines to be reasonable), losses, penalties, fines, and liabilities arising from or due to the Contractor's failure to comply with the requirements of this Attachment, including a Breach or other nonpermitted use or disclosure of PII by the Contractor or its Subcontractors or Agents, including without limitation. Such indemnification shall be conditioned upon the State giving notice of any claims to the Contractor after discovery thereof. If the Contractor should publish or disclose PII to others, the State shall be entitled to injunctive relief or any other remedies to which it is entitled under law or equity, without posting a bond.

K. TERMINATION OF CONTRACT

1. If the Contractor Breaches its obligations under this Attachment as determined by the State, CalHEERS may, at its option:
 - a. Require the Contractor submit to a plan of monitoring and reporting that the State may deem necessary to maintain compliance with this Contract;
 - b. Provide the Contractor with an opportunity to cure the Breach; and
 - c. Notwithstanding any provision of the Contract to the contrary, terminate the Contract if Contractor has been provided an opportunity to cure and has not thus cured the Breach.

2. A failure of the State to exercise any of these options shall not constitute a waiver of its rights under this section.
3. Upon completion of this Contract, or upon termination of this Contract, at the State's direction, the Contractor shall either return all PII to the State or shall destroy all PII in a manner consistent with NIST Special Publication 800-88, Guidelines for Media Sanitization. If return or destruction of PII is not feasible, the Contractor shall explain in writing to the designated State Privacy Offices why return or destruction is not feasible. The obligations of the Contractor under this Contract to protect PII and to limit its use or disclosure shall continue and shall survive until all PII is either returned to the State or destroyed.

ATTACHMENT A-2.2 OFFSHORE SECURITY, ACCESS & TECHNOLOGY REQUIREMENTS

This Attachment A-2.2 sets forth the security, access and technology requirements for the performance of Offshore Services under the Contract. No Services under this Contract involving access to PHI or PII may be performed offshore without the prior written consent of the State (which may be withheld in the State's sole discretion). All work shall be conducted in accordance with all data privacy and security requirements included in this Contract and as further detailed in the California Healthcare Eligibility, Enrollment, and Retention System (CalHEERS) Deliverable D-6.7.1 –SYSTEM SECURITY PLAN, and any amendments to that plan made during the term of the Contract. The security provisions included in this Attachment are in addition to those already committed to in the System Security Plan. All work shall be performed by offshore personnel located in a secured bay dedicated to the Services ("Secure Bay"). Offshore facilities shall be deemed to be "Facilities" as defined in the Contract.

A. DEFINITIONS

Terms not otherwise defined in this Attachment shall have the meanings set forth in the Contract.

a) Personally Identifiable Information ("PII")

PII is information that can be used alone or with other information to identify, contact, or locate a single person, or to identify them in context. It includes: (1) A first and last name; (2) A home or other physical address, including street name and name of a city or town; (3) An e-mail address; (4) A telephone number; (5) A social security number; and (6) any other identifier that permits the physical or online contacting of a specific individual. PII also includes information defined as Personal Information in California Civil Code section 1798.3 and section 1798.29(g)-(h).

b) Protected Health Information ("PHI")

PHI is, as defined by Title 45 CFR 160.103, information transmitted or maintained by a covered entity or its business associates in any form or medium. It includes an individual's past, present, or future physical or mental health or condition, the provision of health care to the individual, or the past, present, or future payment for the provision of health care to the individual, and that identifies the individual or for which there is a reasonable basis to believe can be used to identify the individual.

c) Confidential Information ("CI")

CI has the same meaning as depicted in Appendix C, GLOSSARY, except, for the purposes of offshore work, CI shall not include any Federal Tax Information ("FTI"), as same is defined in USC Section 6103.

B. INDEMNIFICATION FOR THIRD PARTY CLAIMS RELATED TO CONTRACTOR'S SERVICES PERFORMED OFFSHORE

1. Notwithstanding anything to the contrary in the Contract, to the maximum extent permitted by law and except to the extent caused by negligence of the Indemnitees, the Contractor shall, at its expense, indemnify, defend with counsel reasonably approved by the State, and hold harmless, and defend the State, its employees, officers, directors, contractors successors, assigns and agency, (the "Indemnitees") from and against any losses,

liabilities, damages, penalties, costs, obligations and fees awarded to a third party and reasonably incurred fees incurred by the Indemnitees including without limitation reasonably attorneys' fees, and expenses arising from the third party claim, action, suit or judgment to the extent caused by or arising from or due to a Breach of the Contractor's obligations under this Attachment resulting in a misuse or improper disclosure of PHI or PII; such costs or damages may include, without limitation:

- a. Awarded damages resulting from any third party action under applicable (i) HIPAA requirements, (ii) requirements relating to protecting PII and PHI within Attachment A-2.1; or (iii) California state law relating to PII and PHI, and
 - b. The out of pocket and reasonable costs of State actions taken to: (i) notify the affected individual(s) and other entities of and to respond to the Breach; (ii) mitigate harm to the affected individual(s); and (iii) respond to questions or requests for information about the Breach or other impermissible use or improper disclosure of PII and/or PHI.
2. In addition, except to the extent caused by the Indemnitees' negligence, the Contractor shall be responsible for and shall indemnify the indemnitees against any finally assessed fines, penalties, sanctions, or disallowances which are imposed on the State or the Contractor by a governmental agency to the extent caused by or arising from or due to a breach of the Contractor's obligations under this Attachment and which results in misuse or improper disclosure of PHI or PII.
 3. The indemnifications set forth in this Section B shall not be subject to Contractor's Limitation of Liability as set forth in Paragraph 26, Limitation of Liability, of the General Provisions. The indemnification set forth in this Section B shall be subject to the Notice process set forth in Section 18.12.

C. ADDITIONAL CONTROLS

In addition to all of the obligations applicable to the Contractor under the Contract, the Contractor shall provide the following additional controls with respect to Services performed in Contractor's offshore facility(ies).

a) Secure Bay Requirements

The Contractor shall perform all Services within a Secured Bay environment, which shall adhere to the following requirements:

1. The Secured Bay shall be a physically segregated space that is clearly demarked from other common areas by walls and doors capable of supporting both magnetic and key locks.
2. Access to the Secured Bay must be controlled and audited via electronic badge system. Individuals may not share badges.
3. Only Contractor staff required for performing Services for State, and other supporting activities (i.e., Information Technology (IT) Administrator, etc.) shall be allowed to access the Secured Bay.
4. Security guards must be posted at all entrances of each facility that houses a Secured Bay.
5. The Contractor shall not authorize copying of any data from the Windows Virtual Desktop Instances (VDIs) to a local computer via copy and paste, screen capture, camera picture, or otherwise under any circumstance.

6. All devices such as mobile phones, USB storage devices, other external storage devices, and any other media recording devices shall be prohibited. Any exceptions must be explicitly approved by a State employee to be designated by the State.
7. All computers in the Secured Bay must be locked down to not allow the use of any external ports and devices including, but not limited to, USB ports, serial ports, and CD or DVD Drives, except when required to deliver the Services (e.g., monitor, keyboard, mouse, network connectivity).
8. The use of paper, pens, pencils and printed material may be allowed in the Secured Bay; however, no State documents or printed materials may be taken out of the Secured Bay by any Contractor Staff under any circumstance. Paper must be shredded before discarding. Print capabilities shall be restricted to supervisors or other senior management.

b) Network Connectivity Requirements

1. The Contractor shall utilize encrypted virtual desktop technology (VDI) located in the Secure Bay to provide access to Production systems and data, while protecting the integrity and security of that data.
2. The Contractor shall ensure secure communication from virtualization infrastructure (VDIs) in the Secure Bay to the Production environments.
3. The VDI shall be an isolated desktop instance in which a remote view of Production systems and data can be accessed, but from which the data itself cannot be removed.
4. Only the Contractor's approved personnel shall have remote access to those VDIs from their local PC in the Secure Bay.
5. Internet access shall be restricted when there is a live connection to the VDI.
6. Access to the State's virtual environment by the Contractor personnel shall only be authorized through the Contractor's managed PC Hardware.

c) Virus Protection

1. The Contractor's workstations in the Secured Bay shall have State designated and approved virus protection, malware prevention, and encryption Software.
2. The Contractor shall update, operate, and maintain such virus protection, malware prevention, and encryption Software.

d) Workstations

1. The Contractor's personnel shall use the standard State workstation image build with access to the State's virtual desktop environment.
2. The Contractor shall limit administrative rights to workstations.
3. The workstation environment shall meet agreed-upon security requirements (e.g., desktop encryption; updated anti-virus definitions; patch management processes).
4. The Contractor shall centrally manage operating Software patching of workstations. Security patches released by Microsoft shall be pushed to workstations and monitored.

e) Security

1. The Contractor's personnel located in the Secure Bay shall (i) undergo annual information security compliance training, HIPAA awareness sessions, and State data protection training, including training in the Contractor's Privacy and Security Policies and Procedures (P&Ps), in order to protect PII, PHI and CI from unauthorized use, disclosure or access; and (ii) document attendance at, or completion of, same.
2. State supplied access such as security certificates shall be periodically reconciled and inventoried.
3. For all of the Contractor's Offshore personnel, the Contractor shall review the Department of Health and Human Service (DHHS) Office of Inspector General (OIG) List of Excluded Individuals and Entities (LEIE) list and the General Services Administrations (GSA) Excluded Parties Lists System (EPLS) prior to the placement of any such individuals to perform any of the Services and monthly thereafter, to ensure that none of these persons or entities are excluded or become excluded from participation in Federal programs.
4. The Contractor shall develop and implement effective privacy and security procedures to protect PII, PHI and CI from unauthorized use, disclosure or access (Privacy and Security P&Ps) and share updated policies and procedures promptly with the State for review and input.
5. The Contractor shall maintain a compliance program aimed at preventing, detecting and correcting privacy and security issues and/or noncompliance with this Attachment.

f) Reporting and Access

1. The Contractor's information security unit shall enforce and monitor the Secure Bay and report upon its compliance with the controls to the project team.
2. The Contractor shall provide reasonable access to its Offshore facilities, and Equipment by, and make its books and other records pertaining to the Operations available to CMS, the Department of Health and Human Services ("DHHS"), the Office of the Comptroller General, General Accounting Office, the Office of the Inspector General ("OIG") and/or their respective designees the right to access, inspect, evaluate and audit books and other records pertaining to any aspect of the Services being performed in Contractor's Offshore.
3. The Contractor shall provide the State with rights of access to materials, facilities and persons that the State may reasonably request in order to monitor on an ongoing basis the Contractor's compliance with the requirements described and referenced in this Attachment (applicable requirements), including, but not limited to, copies of all Privacy and Security P&Ps (as updated from time to time), materials documenting Contractor's education and training program and copies of any SSAE 16 assessment conducted per the terms of the Contract.

ATTACHMENT A-2.3 SERVICE LEVEL AGREEMENTS (SLA) & LIQUIDATED DAMAGES

This Attachment A-2.3 shall be interpreted in conjunction with, and consistent with, the Contract, without limitation. The assessment of Liquidated Damages shall not constitute a waiver or release of any other remedy the State may have under the Contract.

The State shall not assess Liquidated Damages if the State determines (in its reasonable discretion) that the Contractor's delay or failure to perform its obligations was caused by factors beyond the reasonable control of the Contractor, including if caused by acts of the State and without any fault or negligence of the Contractor.

The methodology for measuring Contractor's Service Level Agreements ("SLAs") and the formulas used to calculate remedies if SLAs are not met are defined in tables 1 through 20 below. tables 1 through 17 and tables 19 and 20 are subject to a monthly cap maximum of 10% of the monthly fixed cost SDMO fees. Table 18 Technology Recovery is exempt from the monthly cap. Table 18 is subject to an amount up to 80% of the monthly fixed cost SDMO fees.

The Contractor shall report on all elements for all SLAs based on parameters and format defined by the State, including but not limited to the "Performance Standard" and "Measurement Process" sections for each table and the expected and minimum levels set and any additional reporting specifics provided in each table. Reporting shall show accurate and factual data, with justifications where applicable, such as scheduled downtime.

A. SLA- SYSTEM WEB PORTAL AVAILABILITY

Table 1: System Web Portal Availability Service Level Agreement (SLA)

Title	Description
SLA Name	System Web Portal Availability
Performance Standard	The System Web Portal is available 24-hours-a-Day, 7-Days-a-week. There are three Service Level's defined within this SLA. Service Level Operational - The System Web Portal shall be available 18-hours-a-day, from 6:00 a.m. Pacific time (PT) until 12:00 a.m. PT the following day, 6-days-a-week, from Monday through Saturday during non-Open Enrollment Periods. Service Level Peak - The System Web Portal shall be available during daily peak hours, from 10:00 a.m. PT until 2:00 p.m. PT each day, 6-days-a-week, from Monday through Saturday. Service Level Critical Calendar - The System Web Portal shall be available 18-hours-a-day, from 6:00 a.m. PT until 12:00 a.m. PT, the following day, 7-days-a-week during the Open Enrollment Period.
Measurement Process	The System Web Portal Availability SLA shall be calculated as follows: • (Data Element A) / (Data Element B) • Data Element A: (Month Minutes) – (Scheduled Downtime Minutes) – (Client Directed Downtime Minutes) – (Non-Client Directed Downtime Minutes) • Data Element B: (Month Minutes) – (Scheduled Downtime Minutes) – (Client Directed Downtime Minutes) • Month Minutes: The number of minutes within the reporting period.

Title	Description
	- Scheduled Downtime Minutes: The number of minutes of scheduled State approved downtime during the reporting period. - Client Directed Downtime Minutes: The number of minutes of unscheduled State approved downtime during the reporting period. All planned maintenance Downtime and requests for System Web Portal Downtime shall be made to the State Project Director or designee 24 hours in advance and approved by the State Project Director or designee. - Non-Client Directed Downtime Minutes: The number of minutes of unscheduled, non-client directed downtime as defined by the duration of all Severity Level 1 Incidents (as defined in Special Provisions, Table 14, System Deficiency Correction SLA) that impact the System Web Portal during the reporting period.
Liquidated Damages	Each month the Contractor's performance fails to meet the Service Level Operational, the monthly fixed cost SDMO fees shall be reduced by \$5000 for every 60 aggregate minutes that requirements are not met. Each month the Contractor's performance fails to meet the Service Level Peak, the monthly fixed cost SDMO fees shall be reduced by \$7500 for every 60 aggregate minutes that requirements are not met. Each month the Contractor's performance fails to meet the Service Level Critical Calendar, the monthly fixed cost SDMO fees shall be reduced \$10000 for every 60 aggregate minutes that requirements are not met.
Expected Service Level Agreement	99.80%
Minimum Service Level Agreement	99.50%
Minimum Event Quantity	Does not apply
Measurement Period	Monthly
Validation Period	No
Escalation	If the System (Web Portal) Availability falls below 99.8% during the month, the Contractor shall conduct the following: - The Contractor's management is notified - The Contractor notifies the State Project Director or designee
Exceptions	None, except as defined in the Measurement Process.
Reporting	Any non-Client Directed Downtime shall be documented and explained in writing to the State within 48 hours. The Contractor shall report all occurrences and duration of each such Downtime within the Monthly Service Level Management Report, as described in the Operations Manual Deliverable.

B. SLA- SYSTEM DAILY BATCH PRODUCTION JOBS COMPLETION

Table 2: System Daily Batch Production Jobs Completion Service Level Agreement

Title	Description
SLA Name	System Daily Batch Production Jobs Completion
Performance Standard	The System shall have 99.0% of the daily batch Production jobs completed by 6:00 a.m. PT, the next Day.
Measurement Process	The daily batch Production jobs completion percentage shall be measured as follows: • (Data Element A – Data Element B) / (Data Element A) • Data Element A: (Total Number of normal daily batch Production jobs scheduled • Data Element B: (Total Number of normal daily batch Production jobs that failed to successfully complete on time.)
Liquidated Damages	If the Contractor's performance falls below the Minimum Service Level Agreement, the monthly fixed cost SDMO fees shall be reduced by \$5,000 for each 24 consecutive hour period.
Minimum Event Quantity	Does not apply
Expected Service Level Agreement	99.5%
Minimum Service Level Agreement	99.0%
Measurement Period	Daily
Exceptions	Daily Batch Production Jobs Completion shall not be measured during periods where: • External interfaces are unavailable • Scheduled Downtime • Extension approved by State Project Director or designee • External Data Anomalies
Reporting	The Contractor shall report the Daily Batch Production Jobs Completion performance within the Monthly Service Level Management Report, as described in the Operations Manual Deliverable. At a minimum, daily reporting will be provided sufficient to determine compliance: • Total number of daily batch Production jobs • Total number of daily batch Production jobs not completed by 6 a.m. PT • List of batch programs not completed by 6 a.m. PT • Percentage of batch programs not completed by 6 a.m. PT each Day

C. SLA- ROOT CAUSE ANALYSIS SUBMISSION

Table 3: Root Cause Analysis Submission SLA

Title	Description
SLA Name	Root Cause Analysis Submission

Title	Description
Performance Standard	The Contractor shall submit to the State Project Director, or designee, as defined in CD-4.9-1 Defect Management Plan, an initial Root Cause Analysis documented in the appropriate reports for every Priority Level 1 Deficiency within 24 hours of identification and Priority Level 2 Deficiency within 48 hours of identification, as defined in Special Provisions, Section N, SLA-System Deficiency~~Table 14: Defect Management Triage SLA~~. The Contractor must report status of open RCA documents on a weekly basis in the CalHEERS Weekly Director's report. Note: Populating the RCA fields in the ALM or EWM tools does not constitute a "submission," in relation to this SLA.
Measurement Process	The Root Cause Analysis Submission SLA shall be calculated, in the event any Priority Level 1 or Priority Level 2 deficiencies are identified within the reporting period, as follows: • (Data Element A) / (Data Element B) • Data Element A: Number of Root Cause Analysis Submissions delivered within the Performance Standard within the reporting period. • Data Element B: Number of Root Cause Analysis Submissions due within the reporting period.
Liquidated Damages	For each Day and for each Root Cause Analysis document the Contractor's performance falls below the Minimum Service Level Agreement, the monthly fixed cost SDMO fees shall be reduced by \$1,000.
Minimum Event Quantity	Does not apply.
Expected Service Level Agreement	99.5%
Minimum Service Level Agreement	99.0%
Measurement Period	Monthly
Exceptions	None, however, an extension to a Root Cause Analysis submission date can be approved by the State Project Director or designee.
Reporting	The Contractor shall report the Root Cause Analysis Submission performance within the Monthly Service Level Management Report, as described in the Operations Manual Deliverable.

D. SLA- SYSTEM WEB PORTAL TRANSACTION TIME

Table 4: System Web Portal Transaction Time SLA

Title	Description
SLA Name	System Web Portal Transaction Time

Title	Description
Performance Standard	It is planned that ~~99~~<u>100</u>% of the total number of the Top 25 mutually designated transaction types are to complete processing within two (2) seconds or less 24-hours-a-day, 7-days-a-week. However, the Performance Standard is that 99% of the total number of the Top 25 mutually designated transaction types shall complete processing within two (2) seconds or less 18-hours-a-day, from 6:00 a.m. PT until 12:00 a.m. PT the following day, 6-days-a-week, from Monday through Saturday during the non-Open Enrollment Period. The Performance Standard is that 99% of the total number of the Top 25 mutually designated transaction types shall complete processing within two (2) seconds or less 18-hours-a-day, from 6:00 a.m. PT until 12:00 a.m. PT, 7-days-a-week during the Open Enrollment Period.
Roles & Responsibilities	State Staff and the Contractor • ~~During the Transition period, t~~The State Staff and the Contractor shall agree upon and designate the Top 25 transaction types to be assessed as part of the meeting of this Service Level Agreement. State Staff • State Staff may conduct independent transaction assessments and provide results to the Contractor. ~~The State may also require the Contractor to install Third Party Software to measure and monitor transaction times.~~ Contractor • The Contractor shall deploy the resources necessary to maintain the System Web Portal Transaction Time SLA and report the System performance within the Monthly Status Report. If requested by the State, the Contractor shall install Third Party Software for the purpose of conducting independent transaction response time monitoring.
Measurement Process	The System Web Portal Transaction Time SLA shall be calculated as follows: • Data Element A: The total number of transactions completed in less than < 2 secs • Data Element B: Average Response time for the transactions within the SLA Percentile Target for the (Total number of designated Top 25 Transactions completed on time during the reporting period) – (Total number of designated Top 25 Transactions that occur during a Severity Level 1 Incident during the reporting period). • Data Element C: Data Element B/Data Element A = success rate
Liquidated Damages	For each month the Contractor's performance falls below the Minimum Service Level Agreement, the monthly fixed cost SDMO fees shall be reduced by \$50,000 per 24 consecutive hour period of non-performance.
Minimum Event Quantity	Does not apply
Expected Service Level Agreement	99.0%
Minimum Service Level Agreement	95.0%
Measurement Period	Monthly

Title	Description
Escalation	If the System Web Portal Transaction Time falls below 96.5% during the month, the Contractor shall conduct the following: • The Contractor's management is notified. • The Contractor notifies the State Project Director or designee
Exceptions	None, except as defined in the Measurement Process.
Reporting	The Contractor shall report the System performance within the Monthly Service Level Management Report, as described in the Operations Manual Deliverable.

E. SLA- SECURITY INCIDENT NOTIFICATION

Table 5: Security Incident Notification SLA

Title	Description
SLA Name	Security Incident Notification
Performance Standard	The Contractor shall notify the Covered California Privacy and Information Security Officer, DHCS Privacy and Information Security Officer, State Project Director or designees within one (1) hour following the identification of any suspected security incident related to the System.
Measurement Process	The Security Incident Notification SLA shall be calculated as follows: • (Data Element A) / (Data Element B) • Data Element A: Number of Security Incident Notifications delivered within the Performance Standard within the reporting period. • Data Element B: Number of Security Incident Notifications due within the reporting period.
Liquidated Damages	For each month the Contractor's performance falls below the Minimum Service Level Agreement set forth below, a percentage of the monthly fixed cost SDMO fees shall be reduced by \$50,000 for every 60 consecutive minute period of non-delivery.
Minimum Event Quantity	The Minimum Event Quantity shall be 34 incidents, i.e., $1/34 = 2.94\%$. There are three (3) scenarios that can apply regarding the Minimum Event Quantity: 1. If the Minimum Event Quantity of 34 incidents is met or exceeded within a reporting period, the SLA metric shall be calculated and reported, and Liquidated Damages shall be applicable. 2. If the Minimum Event Quantity of 34 incidents has not been met within a reporting period, and there has been zero (0) or one (1) failure to meet the Performance Standard, then the SLA metric shall be calculated and reported, and Liquidated Damages shall not be applicable. However, if the one (1) failure to meet the Performance Standard is more than two (2) hours after identification, then the SLA metric shall be calculated and reported, and Liquidated Damages shall be applicable. 3. If the Minimum Event Quantity of 34 incidents has not been met within a reporting period, and there has been more than one (1) failures to meet the Performance Standard, then the SLA metric shall be calculated and reported, and Liquidated Damages shall be applicable.
Expected Service Level Agreement	99.0%
Minimum Service Level Agreement	97.0%

Title	Description
Measurement Period	Monthly
Exceptions	None
Reporting	The Contractor shall report the security incident within the Monthly Service Level Management Report, as described in the Operations Manual Deliverable.

F. SLA- SECURITY INCIDENT MITIGATION PLAN

Table 6: Security Incident Mitigation Plan SLA

Title	Description
SLA Name	Security Incident Mitigation Plan
Performance Standard	The Contractor shall provide the Covered California Privacy and Information Security Officer, DHCS Privacy and Information Security Officer, State Project Director or designees with a mitigation plan with any corrective actions needed to mitigate the Security Incident within: a) two (2) hours of notifying the State of any potential or actual Major Incident; and b) eight (8) hours of notifying the State of any potential or actual Minor Incident.
Measurement Process	The Security Incident Mitigation Plan SLA shall be calculated as follows: • (Data Element A) / (Data Element B) • Data Element A: Number of Mitigation Plans delivered on time within the reporting period. • Data Element B: Number of Mitigation Plans due within the reporting period.
SLA Definitions	For purposes of this SLA, the following capitalized terms shall have the respective meanings set forth below: - Major Incident: Shall mean: i) incidents involving the unauthorized logical or physical access to the System; ii) denial of service attacks which prevent or impair the authorized use of the System; iii) successful malicious coding attacks, including but not limited to those involving the use of a virus, worm, Trojan horse or other code-based attack upon the System; iv) unblocked scans, probes or other attempts by unauthorized persons to access the System; or v) incidents involving PHI or PII as such terms are defined below. - Minor Incident: Shall mean any improper usage of the System, including but not limited to the unacceptable use of any network or violation of State computer or information security policy related to the System. - Protected Health Information (PHI): Shall mean any individually identifiable health information. Identifiable refers not only to the data that is explicitly linked to a particular individual (that's identified information). It also includes health information with data items which reasonably could be expected to allow individual identification. - Personally Identifiable Information (PII): Shall mean any information about an individual including, but not limited to, education, financial transactions, medical history, and criminal or employment history, and information which can be used to distinguish or trace an individual's identity, such as their name, social security number, date and place of birth, mother's maiden name, biometric records, etc., including any other personal information, which is linked or linkable to an individual.
Liquidated Damages	If the Contractor's performance falls below the Minimum Service Level Agreement set forth below, the monthly fixed cost SDMO fees shall be reduced by \$50,000 per incident.

Title	Description
Minimum Event Quantity	Does not apply
Expected Service Level Agreement	99.0%
Minimum Service Level Agreement	98.0%
Measurement Period	Monthly
Exceptions	None
Reporting	The Contractor shall report the security incident within the Monthly Service Level Management Report, as described in the Operations Manual Deliverable.

G. SLA- SECURITY INCIDENT MANAGEMENT REPORT

Table 7: Security Incident Management Report SLA

Title	Description
SLA Name	Security Incident Management Report
Performance Standard	The Contractor shall provide a written report and assessment to the Covered California Privacy and Information Security Officer, DHCS Privacy and Information Security Officer, State Project Director or designees within 24 hours of any Major or Minor Incident regarding any and all actions taken concerning the Major or Minor incident, the current status, and any potential impact(s) the Major or Minor Incident may have upon the System.
Measurement Process	The Security Incident Management Report SLA shall be calculated as follows: • (Data Element A) / (Data Element B) • Data Element A: Number of Management Reports delivered on time within the reporting period. • Data Element B: Number of Management Reports due within the reporting period.
Liquidated Damages	For each month the Contractor's performance falls below the Minimum Service Level Agreement set forth below, the monthly fixed cost SDMO fees shall be reduced by \$50,000 for each 24 consecutive hour period of non-delivery.
Minimum Event Quantity	Does not apply
Expected Service Level Agreement	99.0%
Minimum Service Level Agreement	98.0%
Measurement Period	Monthly
Exceptions	None
Reporting	The Contractor shall report the security incident within the Monthly Service Level Management Report, as described in the Operations Manual Deliverable.

H. SLA- TECHNOLOGY SIMULATION

Table 8: Technology Recovery Simulation SLA

Title	Description
SLA Name	Technology Recovery Simulation
Performance Standard	The Contractor shall perform an annual Technology Recovery simulation <u>of all levels and scenarios</u> per mutually agreed upon ~~the~~ Contractor and State objectives.
Measurement Process	The Contractor shall provide a <u>detailed</u> report of the Technology Recovery simulation <u>incremental progress through the planned process and final results</u> and the back-up site outcomes for review within 15 Days of the simulation exercise.
Liquidated Damages	If the Technology Recovery simulation is not performed and reported on within the agreed upon annual timeframe, the monthly fixed cost SDMO fees shall be reduced by \$25,000 per Day.
Minimum Event Quantity	Does not apply
Minimum Service Level Agreement	100%
Measurement Period	Annually
Reporting	The Contractor shall report on the Technology Recovery simulation within the Monthly Service Level Management Report, as described in the Operations Manual Deliverable.

I. SLA- SYSTEM ONLINE EHIT TRANSACTION TIME

Table 9: System Online eHIT Transaction Time SLA

Title	Description
SLA Name	System online eHIT Transaction Time
Performance Standard	System eHIT online transactions shall complete processing within two (2) minutes or less, from 7:00 a.m. PT until 7:00 p.m. PT, 6-days-a-week, from Monday through Saturday. For the purposes of this SLA, the system eHIT online transaction is defined as that portion of transaction which is within the Contractor's responsibility and control. In the event of a companion set, measurement is effective when the full set is received.
Measurement Process	The online eHIT Transaction Time SLA shall be calculated as follows: • (Data Element A) / (Data Element B) • Data Element A: (Total Number of online eHIT Transactions processed during the online eHIT Processing Period within the Performance Standard) – (Total number of online eHIT Transactions excluded as defined in the Exceptions sub-section below) • Data Element B: (Total Number of online eHIT Transactions received during the online eHIT Processing Period) – (Total number of online eHIT Transactions excluded as defined in the Exceptions sub-section below) • Contractor's Monthly SLA report shall include Data Element A and B transaction counts broken down in to two (2) categories as follows: • Total Transaction count with exceptions • Total Transaction count without exceptions

Title	Description
Liquidated Damages	For each month the Contractor's performance falls below the Minimum Service Level Agreement, the monthly fixed cost SDMO fees shall be reduced by \$50,000 per 24 consecutive hours. In the event of such unscheduled Downtime exceeding 24 consecutive hours, it is expected the State and the Contractor shall declare a disaster and begin Technology Recovery procedures. Performance of the Technology Recovery procedures is addressed through the Technology Recovery SLA.
Minimum Event Quantity	Does not apply
Expected Service Level Agreement	95.0%
Minimum Service Level Agreement	90.0%
Measurement Period	Monthly
Escalation	If the System eHIT transactions falls below the Expected Service Level during the month, the Contractor shall conduct the following: - The Contractor's management is notified. - The Contractor notifies the State Project Director or designee by an email correspondence.
Exceptions	Online eHIT Processing shall not be measured during periods where: - The State Project Director or designee has approved Maintenance activities and/or, - External Interface Partners required for eHIT Processing are unavailable or experiencing degraded performance and/or, - The State Project Director or designee has requested that online eHIT processing not be activated. - All online eHIT Transactions received during any rolling minute where: - The rolling five (5) minute average number of transactions received exceeds 167 transactions per consortia per minute shall be excluded until - The unprocessed queue of transactions per consortia is no more than 167 transactions and - The rolling five (5) minute average number of transactions received is no more than 167 transactions per consortia per minute. - eHIT Transactions directly related to Data Fixes and Error Transactions, or other exceptions approved by the State as defined in the Measurement Process.
Reporting	The Contractor shall report the online eHIT Transaction Time performance within the Monthly Service Level Management Report, as described in the Operations Manual Deliverable.

J. SLA- SYSTEM BATCH EHIT TRANSACTION TIME

Table 10: System Batch eHIT Transaction Time SLA

Title	Description
SLA Name	System Batch eHIT Transaction Time
Performance Standard	The System shall process up to 40,000 inbound Batch eHIT Transaction requests per consortia during the Batch eHIT Processing Period. All inbound Batch eHIT Transaction requests must be fully received each Day prior to the start of the Batch eHIT Processing Period. All Batch eHIT Transactions received after the start of the Batch eHIT Processing Period or partially received shall be measured as part of the next Batch eHIT Processing Period. The Batch eHIT Processing Period is defined as: • Lasting from 5:00 p.m. PT until 7:00 a.m. PT the following day, Monday through Friday, excluding State holidays, and • Lasting from 7:00 a.m. PT Saturday until 12:00 a.m. PT Sunday.
Measurement Process	The Batch eHIT Transaction Time SLA shall be measured as follows: • (Data Element A) / (Data Element B) • Data Element A: (Total Number of Batch eHIT Transactions processed during the Batch eHIT Processing Period) – (Total number of online eHIT Transactions excluded as defined in the Exceptions sub-section) • Data Element B: (Total Number of Batch eHIT Transactions received during the Batch eHIT Processing Period) – (Total number of online eHIT Transactions excluded as defined in the Exceptions sub-section)
Liquidated Damages	For each month the Contractor's performance falls below the Minimum Service Level Agreement, the monthly fixed cost SDMO fees shall be reduced by \$50,000 per Day.
Minimum Event Quantity	Does not apply
Expected Service Level Agreement	99.0%
Minimum Service Level Agreement	95.0%
Measurement Period	Monthly

Title	Description
Exceptions	Batch eHIT Processing shall not be measured during periods where: - The State Project Director or designee has approved Maintenance activities and/or, - External Interface Partners required for eHIT Processing are unavailable or experiencing degraded performance and/or, - The State Project Director or designee has requested that Batch eHIT processing not be activated. - Any Batch eHIT Transactions received during one of the above periods shall be processed on a best-efforts basis. If this backlog cannot be cleared prior to the next Batch eHIT processing Period, the Contractor shall prioritize the oldest Batch eHIT Transactions and be measured on the first 40,000 Batch eHIT Transactions. - All Batch eHIT Transactions received above the 40,000 Batch eHIT Transactions per consortia limit shall not be measured as part of this SLA and shall be processed on a best-efforts basis. If this backlog cannot be cleared prior to the next Batch eHIT processing Period, the Contractor shall prioritize the oldest Batch eHIT Transactions and be measured on the first 40,000 Batch eHIT Transactions.
Reporting	The Contractor shall report the Batch eHIT Transaction Time performance within the Monthly Service Level Management Report, as described in the Operations Manual Deliverable.

K. SLA- PUBLICATIONS PRINT

Table 11: Publications Print SLA

Title	Description
SLA Name	Publications Print
Performance Standard	Ninety-Nine percent (99%) of the Eligibility Determination (NOD01 and NOD02) Notices shall be printed and sent (through mail Services or electronically) to the requestor within three (3) Days of the request date and as scheduled for each type of publication regardless of volume. Ninety-Nine percent (99%) of the remaining top 20 print jobs (as designated by the State in writing) shall be printed and sent (through mail Services or electronically) to the requestor within four (4) Days of the request date and as scheduled for each type of publication regardless of volume. The State may perform independent audits per the terms of the Agreement and of publication print processing times to help confirm information provided by the Contractor. Publications consist of printing of Notices, forms, letters, postcards, flyers, brochures, enrollment packages, and ad hoc mass mailings. Printed documents shall mean basic black printing on white paper to full-color glossy multi-fold brochures and presentation materials, alternate format (e.g. braille) and forms as defined in the Detailed System Design Deliverable.

Title	Description
Measurement Process	The Publications Print SLA shall be calculated as follows: • (Data Element A) / (Data Element B) • Data Element A: (Publication Print Requests mailed on time during the reporting period) – (State approved excluded Publications) • Data Element B: (Publication Print Requests requested during the reporting period) – (State approved excluded Publications)
Liquidated Damages	For each month the Contractor's performance falls below the Minimum Service Level Agreement, the monthly fixed cost SDMO fees shall be reduced by \$50,000 per Business Day.
Minimum Event Quantity	Does not apply
Expected Service Level Agreement	99.0%
Minimum Service Level	97.5%
Measurement Period	Monthly
Exceptions	None, except as defined in the Measurement Process.
Reporting	The Contractor shall report on the Publications that were not sent within the Monthly Service Level Management Report, as described in the Operations Manual Deliverable.

L. SLA- IMAGE AVAILABILITY

Table 12: Image Availability SLA

Title	Description
SLA Name	Image Availability
Performance Standard	Online images of all documents shall be made available for immediate viewing and retrieval within one (1) Day of documents being scanned and submitted to the imaging system.
Measurement Process	Online images of all incoming scanned documents shall be made available for immediate viewing and retrieval within one (1) Day of documents being scanned and submitted to the imaging System.
Liquidated Damages	For each month the Contractor's performance falls below the Minimum Service Level Agreement, the monthly fixed cost SDMO fees shall be reduced by \$50,000 per Day.
Expected Service Level Agreement	95.0%
Minimum Service Level Agreement	90.0%
Measurement Period	Monthly
Escalation	If the Image Availability falls below 95.0% during the month, the Contractor shall conduct the following: • The Contractor's management is notified. • The Contractor notifies the State Project Director or designee
Exceptions	Any System Downtime that has been accepted by the State Project Director or designee.

Title	Description
Reporting	The Contractor shall report all occurrences of images unavailable within the Monthly Service Level Management Report, as described in the Operations Manual Deliverable.

M. SLA- FINANCIAL MANAGEMENT – CARRIER INVOICING

Table 13: Financial Management – Carrier Invoicing SLA

Title	Description
SLA Name	Financial Management – Carrier Invoicing
Performance Standard	The System shall properly invoice carriers for per member per month (PMPM) assessment fees within a 99.9% accuracy rating, providing that billing information and data supplied by the State and external parties is accurate.
Measurement Process	The Financial Management – Invoicing SLA shall be calculated as follows: • (Data Element A) / (Data Element B) • Data Element A: (Total Number of Members Invoiced During the Reporting Period) – (Total Number of Members Invoiced Reported by the State to be Inaccurate and Verified by the Contractor During the Reporting Period) • Data Element B: (Total Number of Members Invoiced During the Reporting Period) • The Total Number of Members Invoiced Reported by the State to be Inaccurate and Verified by the Contractor shall be provided by the State to the Contractor before the end of the reporting period, as described in the Operations Manual Deliverable.
Liquidated Damages	For each month the Contractor's performance falls below the Minimum Service Level Agreement set forth below, the monthly fixed cost SDMO fees shall be reduced by \$50,000 per Day per Carrier.
Minimum Event Quantity	Does not apply
Expected Service Level Agreement	99.9%
Minimum Service Level Agreement	99.0%
Measurement Period	Monthly
Exceptions	None, except as identified in the Measurement Process.
Reporting	The Contractor shall include this SLA Metric in the Monthly Service Level Management Report, as described in the Operations Manual Deliverable.

N. SLA- SYSTEM DEFICIENCY

The Contractor shall adhere to the System Deficiency standards which include Deficiency Resolution Expectations (Figure 2) as follows:

1. The Contractor shall maintain deficiencies by priority below the thresholds identified in the Minimum and Expected Service Level Agreements.
2. Priority of the defect specifies the order in which the defect should be fixed in both Production and Non-Production processes.
3. The priority of the defect is updated based on Figure 1 - Defect Priority heatmap as follows:

Figure 1: Defect Priority (Severity-by-Impact)

		IMPACT				
		1	2	3	4	5
SEVERITY	1	Priority 1	Priority 1	Priority 1	Priority 1	Priority 1
	2	Priority 2	Priority 2	Priority 2	Priority 3	Priority 3
	3	Priority 2	Priority 2	Priority 3	Priority 3	Priority 3
	4	Priority 3	Priority 4	Priority 4	Priority 4	Priority 4

Deficiency Priority is defined in accordance with the heatmap above which correlates between Severity and Impact. Severity and Impact are currently defined in SOW 4 Section 4.9 DEFECT MANAGEMENT.

The Contractor shall identify and report all System Defects according to the criteria defined in Figure 2: Deficiency Resolution Expectations as follows:

Figure 2: Deficiency Resolution Expectations

Priority	Defect Identification	Triage & RCA Submission Timeframe	RCA Expectations	Defect Correction Period
1	15 Minutes - 1 Hour	No later than 1 business day	Production Defects: As defined in SLA Table 3: Root Cause Analysis Submission SLA and processed in the CalHEERS Defect Management tool(s) Non-Production Defects: Processed in the CalHEERS Defect Management tool(s)	48 hours
2	1 Hour	No later than 2 business days	Production Defects: As defined in SLA Table 3: Root Cause Analysis Submission SLA and processed in the CalHEERS Defect Management tool(s) Non-Production Defects: Processed in the CalHEERS Defect Management tool(s)	7 calendar days
3	2 Hours	No later than 10 business days	Processed in the CalHEERS Defect Management tool(s)	Production Defects: no more than 40 calendar days Non-Production Defects: Within one-week post defect prioritization date, implies agreement on proposed FDD date • If defect is identified close to code freeze, the fix will be delivered in the earliest build possible • Exceptions could be case on case basis where-in the fix might need additional time/confirmation from a trading partner
4	2 Business Hours	Per mutual agreement between the SI and the State	Processed in the CalHEERS Defect Management tool(s)	Production Defects: no more than 65 calendar days Non-Production Defects: Within two weeks post defect prioritization date, implies agreement on proposed FDD date

The information in the following table is unique to the aspects of System Deficiency defined in Table 14: System Deficiency Correction

Table 14: System Deficiency Correction SLA

Title	Description
SLA Name	System Deficiency Correction
Performance Standard	The Contractor shall report to the State on Deficiency correction as follows: 1. The Contractor shall maintain deficiencies by priority below the thresholds identified in the Minimum and Expected Service Level Agreements. 2. Priority of the defect specifies the order in which the defect should be corrected in both Production and Non-Production processes. 3. The priority of the defect is updated based on the Figure 1 - Defect Priority heatmap and Figure 2: Deficiency Resolution Expectations Priority table in Section N, SLA-System Deficiency, above.
Measurement Process	The Contractor shall maintain the correction of Deficiencies by Priority below the thresholds identified in the Minimum and Expected Service Level Agreements. On the last Day of every month, the Contractor shall measure all Deficiencies by Priority that have not reached the Passed Test, Passed User Acceptance Testing (UAT), or Rejected state. If the deficiencies in any of the Priority categories are above the Expected threshold, the SLA as a whole shall be defined as not meeting the Expected Performance Standard. Further, if deficiencies in any Priority category is above the Minimum threshold, the SLA as a whole shall be defined as not meeting the Minimum Performance Standard.
Liquidated Damages	For each month the Contractor's performance falls below the Minimum Service Level Agreement, the monthly fixed cost SDMO fees shall be reduced as identified by Priority below per Defect per Day: • Priority 1 = \$1,200 • Priority 2 = \$1,000 • Priority 3 = \$800 • Priority 4 = \$600
Minimum Event Quantity	Does not apply
Expected Service Level Agreement	Priority 1 Deficiencies: Deployed within 24 Hours Maximum number of Priority 2 Deficiencies: Deployed within five (5) Days Maximum number of Priority 3 Production Deficiencies: No more than 40 Days old Maximum number of Priority 3 Non-Production Deficiencies: No more than 5 Days post defect prioritization date Maximum number of Priority 4 Production Deficiencies: No more than 65 Days old Maximum number of Priority 4 Non-Production Deficiencies: No more than 10 Days post defect prioritization date
Minimum Service Level Agreement	Priority 1 Deficiencies: Deployed within 48 Hours Maximum number of Priority 2 Deficiencies Deployed within seven (7) Days Maximum number of Priority 3 Production Deficiencies: No more than 65 Days old Maximum number of Priority 3 Non-Production Deficiencies: No more than 7 Days post defect prioritization date Maximum number of Priority 4 Production Deficiencies: No more than 125 Days old Maximum number of Priority 4 Non-Production Deficiencies: No more than 14 Days post defect prioritization date

Title	Description
Measurement Period	Monthly
Exceptions	None, except as documented in the Measurement Process.
Reporting	The Contractor shall report, at a minimum, within the Monthly Status Report and Defect Management tool(s): • All System Deficiencies (The State may limit environments or status or type as needed.) • Number • Current Status • Priority • Impact

O. SLA- N-1 COMPLIANCE

Table 15: N-1 Compliance SLA

Title	Description
SLA Name	N-1 Compliance
Performance Standard	The Contractor shall ensure that ~~software~~ Software is maintained at current or N-1 versions as defined in the Hardware and Software Inventory Management Plan Deliverable.
Measurement Process	Measured by evaluation of content in Artifact N-1 Compliance Maintenance.
Liquidated Damages	For each month the Contractor's performance falls below the Minimum Service Level Agreement, the monthly fixed cost SDMO fees shall be reduced \$25000.00 per ~~software~~ Software not in compliance.
Expected Service Level Agreement	100%
Minimum Service Level Agreement	99.9%
Measurement Period	Monthly
Exceptions	None, except as documented in the Measurement Process.
Reporting	The Contractor shall include this SLA Metric in the Monthly Service Level Management Report, as described in the Operations Manual Deliverable.

P. SLA- DATA WAREHOUSE AVAILABILITY

Table 16: Data Warehouse Availability SLA

Title	Description
SLA Name	Data Warehouse Availability

Title	Description
Performance Standard	The Contractor shall ensure that Production Subject Area Tables are updated and available by ~~6:00 a.m. Pacific time (PT)~~<u>6 AM PST</u> Monday through Friday. Subject Area Tables include at a minimum the follow and as otherwise requested by the State Project Director or designee: • Application (DM_APP_DETL) • Delegation (DM_DELGTN_DETL) • Eligibility (DM_ELIG_DETL) • Enrollee (DM_ENRLEE_DETL) • Enrollment (DM_ENRLMNT_DETL) • DM_ENROLLEE • DM_APS_ENRL
Measurement Process	(The number of Subject Area Tables scheduled for update and completed on time) / (The number of Subject Area Tables scheduled) per month
Liquidated Damages	For each month the Contractor's performance falls below the Performance Standard set forth above, the monthly fixed cost SDMO fees shall be reduced by \$50,000 per month.
Minimum Event Quantity	(The number of Subject Area Tables) * (The number of Business Days per month)
Expected Service Level Agreement	99.0% of deficiencies resolved within Performance Standard
Minimum Service Level Agreement	96.0% of deficiencies resolved within Performance Standard
Measurement Period	Monthly
Reporting	The Contractor shall include this SLA Metric in the Monthly Service Level Management Report, as described in the Operations Manual Deliverable.

Q. SLA- DATA AVAILABILITY

Table 17: Data Availability SLA

Title	Description
SLA Name	Data Availability
Performance Standard	The Contractor shall ensure that critical data required for the continued analysis of performance and adherence to State and federal regulations be available as per the requirements of the Technology Recovery Plan Deliverable. The State and the Contractor shall jointly determine what constitutes critical operations. The agreed-upon critical data shall be documented in the Technology Recovery Plan Deliverable.
Measurement Process	The availability of data shall be measured as per the requirements of the Technology Recovery Plan Deliverable.
Liquidated Damages	For each instance that the data availability is delayed the Contractor's total monthly fixed cost SDMO fees for the month the instance occurred shall be reduced by \$50,000 per 24 hour period.
Minimum Event Quantity	Does not apply

Title	Description
Minimum Service Level Agreement	100%
Measurement Period	Per month
Reporting	The Contractor shall provide a detailed report of the Technology Recovery outcomes, as specified in the Technology Recovery Plan Deliverable, within 30 Days of the disaster event. The Contractor shall report all disaster events within the Monthly Service Level Management Report, as described in the Operations Manual Deliverable.

R. SLA- TECHNOLOGY RECOVERY

Table 18: Technology Recovery SLA

Title	Description
SLA Name	Technology Recovery
Performance Standard	The Contractor shall restore critical System operations per the requirements of the Operations Manual Deliverable within four (4) hours of the declaration of the disaster and resume all remaining critical operations. Disaster declaration is a process defined in the Operations Manual Deliverable. The State and the Contractor shall jointly determine what constitutes critical operations. The agreed-upon critical operations shall be documented in the Operations Manual Deliverable.
Measurement Process	The recovery time of a disaster shall be measured from the time of the declaration of the disaster until restoration of the critical Systems per the requirements of the Operations Manual Deliverable.
Liquidated Damages	For each instance that the recovery takes: • More than four (4) hours but less than 12 hours, 10% of the Contractor's total monthly fixed cost SDMO fees for the month the instance occurred shall be reduced as damages. • More than 12 hours but less than 24 hours, 10% (for a total of 20%) of the Contractor's total monthly fixed cost SDMO fees for the month the instance occurred shall be reduced as damages. • More than 24 hours but less than 48 hours, an additional 20% (for a total of 40%) of the Contractor's total monthly fixed cost SDMO fees for the month the instance occurred shall be reduced as damages. • More than 48 hours but less than 72 hours, an additional 20% (for a total of 60%) of the Contractor's total monthly fixed cost SDMO fees for the month the instance occurred shall be reduced as damages. • More than 72 hours, an additional 20% (for a total of 80%) of the Contractor's total monthly fixed cost SDMO fees for the month the instance occurred shall be reduced as damages.
Minimum Event Quantity	Does not apply
Minimum Service Level Agreement	100%
Measurement Period	Per declared disaster

Title	Description
Reporting	The Contractor shall provide a detailed report of the Technology Recovery outcomes, as specified in the Operations Manual, within 30 Days of the disaster event. The Contractor shall report all disaster events within the Monthly Service Level Management Report, as described in the Operations Manual Deliverable.

S. SLA- SERVICE CENTER AVAILABILITY

Table 19: Service Center Availability

Title	Description
SLA Name	Service Center Availability
Performance Standard	The Contractor shall ensure that the service center is available 99.9% of the time, excluding scheduled maintenance. The Contractor shall notify the State within fifteen (15) minutes of detecting a critical outage and resolve such outages within four (4) hours. ~~If the Contractor fails to meet the 99.9% uptime, the State is entitled to service credits as specified. The Contractor shall provide real-time monitoring, monthly performance reports, and maintain a disaster recovery plan to restore services within four (4) hours in case of a major outage.~~
Measurement Process	Availability percentage will be calculated monthly based on the accumulated total of all unavailable time derived from submitted tickets. Scheduled uptime is based on 24 hours x the number of Days in the month.
Liquidated Damages	For each month the Contractor's performance falls below the Minimum Service Level Agreement, the monthly fixed cost SDMO fees shall be reduced by \$50,000 per Day.
Expected Service Level Agreement	99.9%
Minimum Service Level Agreement	99.5%
Measurement Period	Monthly
Escalation	If the Service Center Availability falls below 99.5% during the month, the Contractor shall notify the Contractor's management and the State.
Exceptions	Any Service Center downtime that has been accepted by the State.
Reporting	The Contractor shall report all occurrences of service center unavailability to the State.

T. SLA- SERVICE CENTER CALL RECORDINGS

Table 20: Service Center Call Recordings

Title	Description
SLA Name	Service Center Call Recordings

Title	Description
Performance Standard	The Contractor shall ensure the capture and storage of one-hundred percent (100%) of all inbound and outbound call recordings for the Service Center. Any failure to capture a call recording shall be detected, logged, and resolved within one (1) Day. The Contractor shall provide monthly reports detailing call recording capture performance and <u>the State may</u> apply <u>Liquidated Damages credits</u> as outlined below for any non-compliance. All call recordings shall be securely stored and retained as defined in SOW Section 6.19 – SERVICE CENTER SERVICES.
Measurement Process	The failure to meet the daily recording percentage begins when the Contractor receives an alarm or fault indicator, when the State performs a manual system check revealing an outage, or when a ticket is submitted by either the Contractor or the State, whichever occurs first. Upon notification, receipt of the daily call recording percentage report, or a network alarm, the Contractor shall compile a list of affected end-user seats and service features for tracking and reporting SLA rights and remedies. Outage duration is measured per end-user seat and service feature from the first notification until confirmed restoration.
Liquidated Damages	For each month the Contractor's performance falls below the Minimum Service Level Agreement, the monthly fixed cost SDMO fees shall be reduced by \$50,000 per Business Day.
Expected Service Level Agreement	100%
Minimum Service Level Agreement	99%
Measurement Period	Monthly
Escalation	If the Service Center Systems Availability falls below 99% during the month, the Contractor shall notify the Contractor's management and the State.
Exceptions	Any Service Center call recordings unavailability that has been accepted by the State.
Reporting	The Contractor shall report all occurrences of service center call recording unavailability to the State.

APPENDIX A-3 CALHEERS ADDITIONAL FEDERAL PROVISIONS

ADDITIONAL FEDERAL PROVISIONS

The Contractor must comply with the following provisions:

1. Executive Order 11246, entitled "Equal Employment Opportunity," as amended by Executive Order 11375, and as supplemented by the Department of Labor Regulations (41 CFR Part 60): The Executive Order prohibits federal contractors and federally assisted construction contractors and subcontractors who do over \$10,000 in Government business in one year from discriminating in employment decisions on the basis of race, color, religion, sex, or national origin. The Executive Order also requires Government contractors to take affirmative action to ensure that equal opportunity is provided in all aspects of their employment.
2. The Clean Air Act, Section 306:
 - a. No Federal agency may enter into any contract with any person who is convicted of any offense under section 113(c) for the procurement of goods, materials, and services to perform such contract at any facility at which the violation which gave rise to such conviction occurred if such facility is owned, leased, or supervised by such person. The prohibition in the preceding sentence shall continue until the Administrator certifies that the condition giving rise to such a conviction has been corrected. For convictions arising under section 113(c)(2), the condition giving rise to the conviction also shall be considered to include any substantive violation of this Act associated with the violation of 113(c)(2). The Administrator may extend this prohibition to other facilities owned or operated by the convicted person.
 - b. The Administrator shall establish procedures to provide all Federal agencies with the notification necessary for the purposes of subsection (a).
 - c. In order to implement the purposes and policy of this Act to protect and enhance the quality of the Nation's air, the President shall, not more than 180 days after enactment of the Clean Air Amendments of 1970 cause to be issued an order (1) requiring each Federal agency authorized to enter into contracts and each Federal agency which is empowered to extend Federal assistance by way of grant, loan, or contract to effectuate the purpose and policy of this Act in such contracting or assistance activities, and (2) setting forth procedures, sanctions, penalties, and such other provisions, as the President determines necessary to carry out such requirement.
 - d. The President may exempt any contract, loan, or grant from all or part of the provisions of this section where he determines such exemption is necessary in the paramount interest of the United States and he shall notify the Congress of such exemption.
 - e. The President shall annually report to the Congress on measures taken toward implementing the purpose and intent of this section, including but not limited to the progress and problems associated with implementation of this section. [42 U.S.C. 7606]
3. The Clean Water Act:
 - a. No Federal agency may enter into any contract with any person who has been convicted of any offense under Section 309(c) of this Act for the procurement of goods, materials, and services if such contract is to be performed at any facility at which the violation which gave rise to such conviction occurred, and if such facility is owned, leased, or supervised by such person. The prohibition in preceding sentence shall continue until the Administrator certifies that the condition giving rise to such conviction has been corrected.

- b. The Administrator shall establish procedures to provide all Federal agencies with the notification necessary for the purposes of subsection (a) of this section.
 - c. In order to implement the purposes and policy of this Act to protect and enhance the quality of the Nation's water, the President shall, not more than 180 days after the enactment of this Act, cause to be issued an order:
 - (1) requiring each Federal agency authorized to enter into contracts and each Federal agency which is empowered to extend Federal assistance by way of grant, loan, or contract to effectuate the purpose and policy of this Act in such contracting or assistance activities, and
 - (2) setting forth procedures, sanctions, penalties, and such other provisions, as the President determines necessary to carry out such requirement.
 - d. The President may exempt any contract, loan, or grant from all or part of the provisions of this section where he determines such exemption is necessary in the paramount interest of the United States and he shall notify the Congress of such exemption.
 - e. The President shall annually report to the Congress on measures taken in compliance with the purpose and intent of this section, including, but not limited to, the progress and problems associated with such compliance.
 - f. (1) No certification by a contractor, and no contract clause, may be required in the case of a contract for the acquisition of commercial items in order to implement a prohibition or requirement of this section or a prohibition or requirement issued in the implementation of this section.
 - (2) In paragraph (1), the term "commercial item" has the meaning given such term in section 4(12) of the Office of Federal Procurement Policy Act (41 U.S.C. 403(12)).
4. The Anti-Lobbying Act: This Act prohibits the recipients of federal contracts, grants, and loans from using appropriated funds for lobbying the Executive or Legislative Branches of the federal government in connection with a specific contract, grant, or loan. As required by Section 1352, Title 31 of the U.S. Code and implemented at 34 CFR Part 82 for persons entering into a grant or cooperative agreement over \$100,000, as defined at 34 CFR Part 82, Section 82.105 and 82.110, the applicant certifies that:
- a. No federal appropriated funds have been paid or will be paid, by or on behalf of the undersigned, to any person for influencing or attempting to influence an officer or employee of any agency, a member of Congress, an officer or employee of Congress, or an employee of a member of Congress in connection with the making of any federal grant, the entering into of any cooperative agreement, and the extension, continuation, renewal, amendment, or modification of any federal grant or cooperative agreement;
 - b. If any funds other than federal appropriated funds have been paid or will be paid to any person for influencing or attempting to influence an officer or employee of any agency, a member of Congress, an officer or employee of Congress, or an employee of a member of Congress in connection with this federal grant or cooperative agreement, the undersigned shall complete and submit Standard Form – LLL, "Disclosure Form to Report Lobbying," in accordance with its instructions;
 - c. The undersigned shall require that the language of this certification be include in the award documents for all sub-awards at all tiers (including sub-grants, contracts under grants and cooperative agreements, and subcontracts) and that all sub-recipients shall certify and disclose accordingly.

5. Americans with Disabilities Act: This Act (28 CFR Part 35, Title II, Subtitle A) prohibits discrimination on the basis of disability in all services, programs, and activities provided to the public by State and local governments, except public transportation services.
6. Executive Order N-6-22 – Russia Sanctions: On March 4, 2022, Governor Gavin Newsom issued Executive Order N-6-22 (the EO) regarding Economic Sanctions against Russia and Russian entities and individuals. “Economic Sanctions” refers to sanctions imposed by the U.S. government in response to Russia’s actions in Ukraine, as well as any sanctions imposed under state law. The EO directs state agencies to terminate contracts with, and to refrain from entering any new contracts with, individuals or entities that are determined to be a target of Economic Sanctions. Accordingly, should the State determine a Contractor is a target of Economic Sanctions or is conducting prohibited transactions with sanctioned individuals or entities, that shall be grounds for termination of this Contract. The State shall provide the Contractor advance written notice of such termination, allowing the Contractor at least 30 calendar days to provide a written response. Termination shall be at the sole discretion of the State.
7. Drug Free Workplace Statement: The Federal government implemented the Drug Free Workplace Act of 1988 in an attempt to address the problems of drug abuse on the job. It is a fact that employees who use drugs have less productivity, a lower quality of work, and a higher absenteeism, and are more likely to misappropriate funds or services. From this perspective, the drug abuser may endanger other employees, the public at large, or themselves. Damage to property, whether owned by this entity or not, could result from drug abuse on the job. All these actions might undermine public confidence in the services this entity provides. Therefore, in order to remain a responsible source for government contracts, the following guidelines have been adopted:
 - a. The unlawful manufacture, distribution, dispensation, possession or use of a controlled substance is prohibited in the workplace.
 - b. Violators may be terminated or requested to seek counseling from an approved rehabilitation service.
 - c. Employees must notify their employer of any conviction of a criminal drug statute no later than five days after such conviction.
 - d. Contractors of federal agencies are required to certify that they will provide drug-free workplaces for their employees.
8. Debarment, suspension, and other responsibility matters: As required by Executive Order 12549, Debarment and Suspension, and implemented at 34 CFR Part 85, for prospective participants in primary covered transactions, as defined at 34 CFR Part 85, Sections 85.105 and 85.110.
 - a. The applicant certifies that it and its principals:
 - (1) Are not presently debarred, suspended, proposed for debarment, declared ineligible, or voluntarily excluded from covered transactions by any federal department or agency;
 - (2) Have not within a three-year period preceding this application been convicted of or had a civil judgment rendered against them for commission of fraud or a criminal offense in connection with obtaining, attempting to obtain, or performing a public (federal, state, or local) transaction or contract under a public transaction; violation of federal or state antitrust statutes or

- commission of embezzlement, theft, forgery, bribery, falsification or destruction of records, making false statements, or receiving stolen property;
- (3) Are not presently indicted for or otherwise criminally or civilly charged by a governmental entity (federal, state, or local) with commission of any of the offenses enumerated in paragraph (1)(b) of this certification; and
 - (4) Have not within a three-year period preceding this application had one or more public transactions (federal, state, or local) terminated for cause or default.
- b. Where the applicant is unable to certify to any of the statements in this certification, he or she shall attach an explanation to this application.
9. The federal government reserves a royalty-free, non-exclusive, and irrevocable license to reproduce, publish, or otherwise use, and to authorize others to use, for federal government purposes, the copyright in any work developed under a grant, sub-grant, or contract under a grant or sub-grant or any rights of copyright to which a contractor purchases ownership.

SOW SECTION 1 INTRODUCTION & ORGANIZATION

SOW SECTION 1 – INTRODUCTION & ORGANIZATION

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1 INTRODUCTION AND ORGANIZATION

The Statement of Work (SOW), hereinafter referred to as SOW, defines the services required to maintain and operate the California Healthcare Eligibility, Enrollment, and Retention System (CalHEERS).

Please note that this section of the SOW references multiple sets of standards, which are subject to change over time. Please refer to Appendix A-2, SPECIAL PROVISIONS, Section 7.7, UDPATES TO STANDARDS, REGULATIONS, AND CODES, regarding project processes around standard updates.

1.1 TERM

The initial term shall begin on the date the Contract is signed by both parties (effective date) and shall continue for five (5) years thereafter, unless terminated earlier or extended as provided herein. At the expiration of the five (5) year term, the State reserves the option to extend the term for five (5) additional periods of one (1) year each or any combination of years up to and including all (5) extension years, at the cost for each year as specified in the Appendix D, COST WORKBOOK, upon one hundred and eighty (180) days prior Notice to Contractor.

The Contractor shall not be authorized to deliver goods or commence performance of services described in this Contract prior to the effective date. Any delivery of goods or performance of services by the Contractor that is commenced prior to the effective date shall be considered gratuitous on the part of the Contractor.

1.2 COST

The total cost of this Contract is “Enter Dollar Value”. Budget details are located in Appendix D, COST WORKBOOK. Financial details are located in Appendix A-2, SPECIAL PROVISIONS.

1.3 POINTS OF CONTACT

The points of contact for the Contractor and State once the Contract has been executed is as follows:

Contractor – Contract Manager: (To be completed upon Contract award)

Name, Title:

Address:

Telephone Number:

E-mail address:

State – Contract Manager: (To be completed upon Contract award)

Name, Title:

Address:

Telephone Number:

E-mail address:

1.4 WORK LOCATION

The Contractor will be required to perform services under this Contract both onsite, at the CalHEERS Project Office, and at various Contractor locations to be determined at Contract execution. The State will provide space, furniture, utilities, and telephones at the CalHEERS Project Office for Contractor Staff as agreed upon by the State and the Contractor.

Table 1-1: Co-Location of Contractor Core Staff

Req #	SOW Requirement
1.4-01 (existing)	The Contractor Key Staff and designated Contractor support Staff, as agreed upon by the State and Contractor, shall be co-located with the State staff at the CalHEERS Project Office within fifteen (15) Business Days of the Contract execution, unless otherwise approved by the State Project Director or designee.

1.5 GENERAL INFORMATION

The CalHEERS is governed by Covered California, OTSI and DHCS. While the Project will have a single point of management, it will be guided by the Sponsors and its programmatic objectives. As described below, the Project Sponsors, Program Partners, Oversight Agencies, and other stakeholders have been involved throughout the CalHEERS Project.

1.6 ORGANIZATION

In addition to the Contractor (and its Subcontractors), the project organization includes the following Project Sponsors, Program Partners, and Oversight Agencies involved with the Project.

- Covered California (also known as the California Health Benefit Exchange)
- Department of Health Care Services (DHCS)
- Office of Technology & Solutions Integration (OTSI)
- CalHEERS Project Office
- Department of Managed Health Care (DMHC)
- California Department of Insurance (CDI)
- California Technology Agency (CTA)
- California Department of Social Services (CDSS)
- Centers for Medicare and Medicaid Services (CMS)
- California Health and Human Services (CalHHS) Agency
- California Department of Finance (DOF)
- County Welfare Directors Association (CWDA)
- California Statewide Automated Welfare System (CalSAWS)
- California County Welfare Departments
- Business Partners/Interface Agencies
- CalHEERS end users

The following provide a broad overview of the Project Sponsors, Program Partners, Oversight Agencies and Stakeholder engagement.

1.6.1 Contractor

The Contractor is the System Integrator (SI) for CalHEERS and is responsible for operating and maintaining the system. The Contractor coordinates and collaborates with the Project Sponsors as well as interacts with the Program Partners, State and county offices, control agencies who provide oversight, advisory/advocacy groups who represent special interests and agencies that

interface with the system.

1.6.2 Covered California

Covered California is a Project Sponsor and has the authority over all aspects of the Health Benefit Exchange development and operations, including the IT Services required to support it. Its roles include:

- Establish and implement many aspects of the Federal Affordable Care Act (ACA) regulations and policies
- Provide a high-quality experience for individuals seeking health care coverage, as well as participants in the Exchange
- Screen for and enroll individuals
- Certify qualified health plans (QHPs) and negotiating with health plans on products to be offered in the Exchange
- Coordinate with the DHCS and California counties to ensure that individuals are seamlessly enrolled and transitioned between coverage programs if their eligibility changes
- Work with small employers on the choices and collection of payments for their employees

1.6.3 California Department of Health Care Services (DHCS)

The California Department of Health Care Services (DHCS) is also an authority holding Project Sponsor. DHCS is the single State agency responsible for effective administration and operation of the California Medicaid Program, known as Medi-Cal. DHCS will actively participate in the CalHEERS Project and will continue to administer and oversee its program and ensure Medi-Cal determinations are consistent with federal and state requirements.

- Establish and implement many aspects of the Federal Affordable Care Act (ACA) regulations and policies
- Provide a high-quality experience for individuals seeking health care coverage, as well as participants in the Exchange
- Screen for and enroll individuals
- Coordinate with California counties to ensure that individuals are seamlessly enrolled and transitioned between coverage programs if their eligibility changes

1.6.4 Office of Technology & Solutions Integration (OTSI)

The Office of Technology & Solutions Integration (OTSI) provides project management, oversight, procurement, and support services for large IT Projects for the California Health and Human Services Agency.

1.6.5 CalHEERS Project Office

The CalHEERS Project Office is part of OTSI and provides project management and oversight, including status reporting, assessing and mitigating risk, facilitating communications and teamwork among stakeholders, resolving issues, and managing resources. The CalHEERS Project Office oversees activities associated with the CalHEERS System/Software Development Life Cycle (SDLC) activities, and Maintenance and Operation (M&O). The Project Management Office (PMO) verifies and validates the Contractor's processes and deliverables.

1.6.6 Department of Managed Health Care (DMHC)

The California Department of Managed Health Care (DMHC) is a Program Partner. The DMHC is a regulatory body governing managed health care in California and a consumer rights organization that helps California consumers resolve problems with their health plan and works to provide a more stable and financially solvent managed health care System.

1.6.7 California Department of Insurance

The California Department of Insurance (CDI) is a Program Partner. The CDI is a regulatory and oversight agency that is responsible for enforcing many of the State's insurance-related laws.

1.6.8 California Department of Social Services (CDSS)

The California Department of Social Services is a Program Partner. CDSS provides administration and oversight of programs that affect nearly three million of California's most vulnerable residents-foster children and youth, children and families receiving aid through the California Work Opportunities and Responsibility to Kids (CalWorks) and CalFresh programs, adults and elderly in licensed community care Facilities, and aged, blind and disabled recipients requiring In-Home Supportive Services or Supplementary Security Income/State Supplementary Payment (SSI-SSP) assistance.

1.6.9 County Welfare Directors Association

The County Welfare Directors Association (CWDA) is a nonprofit association representing the human services directors from each California County. The association's mission is to promote a human services system that encourages self-sufficiency of families and communities.

1.6.10 California Counties

California Counties are Program Partners. The California Counties are responsible for implementing and administering welfare programs in accordance with state and federal regulations.

1.6.11 Statewide Automated Welfare System (CalSAWS)

CalSAWS is the Statewide Automated Welfare System (SAWS) used by the counties to administer the welfare and Medi-Cal programs.

1.6.12 Centers for Medicare and Medicaid Services

The Centers for Medicare and Medicaid Services (CMS) is an Oversight Agency. The CMS is the federal agency responsible for overall oversight of Affordable Care Act Implementation including the Federal and State Exchanges. CMS approves Exchange Establishment Grant proposals, Project approval documents, Solicitation documents and final contracts. Within CMS, the Center for Consumer Information and Insurance Oversight (CCIIO) is charged with helping implement many provisions of the Affordable Care Act. CCIIO oversees the Implementation of the provisions related to private health insurance. The Center for Medicaid and CHIP Services within CMS is responsible for oversight of California's Medi-Cal and CHIP programs.

1.6.13 California Health and Human Services (CalHHS) Agency

The California Health and Human Services Agency (CalHHS) is an Oversight Agency. The CalHHS oversees twelve departments that provide a range of health care and social Services, including programs managed by DHCS.

1.6.14 California Department of Finance (DOF)

The California Department of Finance (DOF) is an Oversight Agency. The DOF monitors and reviews State Projects' direction and progress and ensures appropriate funding for acquisition, development, and implementation activities. The DOF has funding approval of all automated System Projects developed or contracted by state departments.

1.6.15 Business Partners/Interface Agencies

The CalHEERS System shares information and data with other agencies. Each agency has authority to set interface standards for their systems. These agencies report any changes in interface requirements to the CalHEERS Project Office.

1.6.16 CalHEERS End Users

The primary end users of the CalHEERS are the Consumers, the Certified Enrollers, the Service Center staff, and the County Eligibility Workers.

1.7 RESPONSIBILITIES OF PARTIES

1.7.1 State Responsibilities

The State Contract Manager or authorized designee, referenced in SOW Section 1.3, POINTS OF CONTACT, will receive all project communications and has the authority to act on all aspects of the services. This person will review the Contract and associated Contract documents with the Contractor authorized designee, referenced under SOW Section 1.3, POINTS OF CONTACT, to ensure understanding of the responsibilities of both parties.

The State will provide timely review and approval of the information and documentation provided in order for the Contractor to perform its obligations under this Contract.

1.7.2 Contractor Responsibilities

The Contractor is responsible for operating and maintaining the CalHEERS System. The Contractor Project Manager or authorized designee (s) will receive all project communications and has the authority to act on all aspects of the ~~services~~Services.

The Contractor will review the Contract and associated Contract documents with the State Contract Manager or authorized designee to ensure understanding of the responsibilities of both parties. The Contractor is responsible for meeting all requirements in this Contract.

In addition, the Contractor is responsible to ensure the following:

- That all State property, including security badges is returned to the State Contract Manager prior to expiration of the Contract.
- That all electronic files stored on the removable media storage device used to store State information are encrypted using a commercial third-party encryption software (If the Contractor use of removable media storage devices (e.g., Universal Serial Bus [USB] thumb drives, disk tapes, micro Secure Digital (SD), SD cards, and CD/DVD) is allowed by the State Contract Manager).
- That information/data stored on approved removable storage devices will not be copied to any unencrypted computer (e.g., desktop or laptop) not connected to the State network.
- That any ~~personally~~Personally identifiable-Identifiable information-Information (PII), ~~Protected personal health~~Health information-Information (PHI), or other ~~confidential~~

- ~~Confidential information~~ Information must be encrypted when stored on State network file shares or document repositories.
- That if allowed by the State Contract Manager, all the Contractor owned or managed laptops, ultra-books, net books, tablets, smart phones and similar devices, will be encrypted using commercial third party encryption software.
 - That encryption software meets the level of standards set by the National Institute of Standards and Technology (NIST) 800-53 Rev 5 or latest, Federal Information Processing Standards (FIPS) Publication 140-3 or later, Security Requirements for Cryptographic Modules.
 - That anti-virus, anti-malware software will be used and kept up to date along with Software patches and supported versions.
 - The Office of Technology & Solutions Integration (OTSI) Information Security Office has the right to audit the Contractor owned devices connected to State networks to ensure compliance with these responsibilities.

SOW SECTION 2 CONTRACTOR PERSONNEL REQUIREMENTS

SOW SECTION 2 – CONTRACTOR PERSONNEL REQUIREMENTS
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2 CONTRACTOR PERSONNEL REQUIREMENTS

The Contractor shall provide all necessary Staff to successfully perform all services and meet all the requirements set forth in the Statement of Work (SOW). There are 17 Key Staff identified as part of this Contract by which the State has qualifications for each assignment. There are 38 Non-Key (System Change) Staff positions/roles identified that also have associated qualifications. The Contractor shall comply with all staffing requirements identified within this Contract.

Please note that this section of the SOW references multiple sets of standards, which are subject to change over time. Please refer to Appendix A-2, SPECIAL PROVISIONS, Section 7.7, UPDATES TO STANDARDS, REGULATIONS, AND CODES, regarding project processes around standard updates.

2.1 KEY STAFF REQUIREMENTS

The Contractor's Key Staff are expected to function as trusted advisors to the State in their respective roles. The California Healthcare Eligibility, Enrollment, and Retention System (CalHEERS), Covered California, DHCS or other Project Sponsors and Program Partners interact with the Contractor's Key Staff on a day-to-day basis for the term of the Contract. For these reasons, the State places a great deal of emphasis on the expertise, experience and capabilities of the Key Staff.

2.1.1 Contractor Key Staff

Table 2-1: Key Staff General Requirements

Req #	SOW Requirement																																																						
2.1.1-01 (modified)	The Contractor shall have the following Key Staff dedicated to the CalHEERS Project throughout the term of the Contract, as specified within the table below. Key Staff shall be onshore and be located “Onsite,” which means co-located with State staff; “Offsite/Local,” which means within 50 miles of downtown Sacramento, CA; or “Offsite”, which means within the United States, subject to the requirements or constraints within the Contract: <table><tr><th>Key Staff</th><th>Location</th><th>% of Time</th></tr><tr><td>Project Manager</td><td>(Onsite)</td><td>100%</td></tr><tr><td>Deputy Project Manager</td><td>(Onsite)</td><td>100%</td></tr><tr><td>Technical Manager</td><td>(Onsite)</td><td>100%</td></tr><tr><td>Project Management Office Manager</td><td>(Onsite)</td><td>100%</td></tr><tr><td>Schedule Management Lead</td><td>(Onsite)</td><td>100%</td></tr><tr><td>Operations Manager</td><td>(Onsite or Offsite/Local)</td><td>100%</td></tr><tr><td>Applications Maintenance Manager</td><td>(Onsite or Offsite/Local)</td><td>100%</td></tr><tr><td>Enterprise Architect</td><td>(Onsite or Offsite/Local)</td><td>100%</td></tr><tr><td>Release Manager</td><td>(Onsite)</td><td>100%</td></tr><tr><td>Transition Manager</td><td>(Onsite)</td><td>100% (Year 1, 2 & Final Year)</td></tr><tr><td>Quality Assurance Manager</td><td>(Offsite allowed)</td><td>100%</td></tr><tr><td>Agile Manager</td><td>(Onsite)</td><td>100%</td></tr><tr><td>Data Scientist</td><td>(Onsite/Offsite)</td><td>100%</td></tr><tr><td>Data Analytics Expert</td><td>(Onsite/Offsite)</td><td>100%</td></tr><tr><td>Security Officer</td><td>(Onsite)</td><td>100%</td></tr><tr><td>Organizational Change Manager (OCM)</td><td>(Onsite)</td><td>100%</td></tr><tr><td>Consumer Experience Lead</td><td>(Onsite)</td><td>100%</td></tr></table>	Key Staff	Location	% of Time	Project Manager	(Onsite)	100%	Deputy Project Manager	(Onsite)	100%	Technical Manager	(Onsite)	100%	Project Management Office Manager	(Onsite)	100%	Schedule Management Lead	(Onsite)	100%	Operations Manager	(Onsite or Offsite/Local)	100%	Applications Maintenance Manager	(Onsite or Offsite/Local)	100%	Enterprise Architect	(Onsite or Offsite/Local)	100%	Release Manager	(Onsite)	100%	Transition Manager	(Onsite)	100% (Year 1, 2 & Final Year)	Quality Assurance Manager	(Offsite allowed)	100%	Agile Manager	(Onsite)	100%	Data Scientist	(Onsite/Offsite)	100%	Data Analytics Expert	(Onsite/Offsite)	100%	Security Officer	(Onsite)	100%	Organizational Change Manager (OCM)	(Onsite)	100%	Consumer Experience Lead	(Onsite)	100%
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Project Management Office Manager	(Onsite)	100%																																																					
Schedule Management Lead	(Onsite)	100%																																																					
Operations Manager	(Onsite or Offsite/Local)	100%																																																					
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Consumer Experience Lead	(Onsite)	100%																																																					

Req #	SOW Requirement
2.1.1-02 (existing)	The Contractor shall not concurrently fill multiple Key Staff positions with a single Key Staff member.
2.1.1-03 (existing)	The Contractor shall obtain written approval from the State Project Director or designee prior to the start of any Key Staff on the Contract.
2.1.1-04 (new)	The Contractor shall have Key Staff work and be available within the Project's normal business hours on Pacific Standard Time.
2.1.1-05 (new)	The Contractor shall have Key Staff available during Feature and Priority Releases, and Open Enrollment barring emergency time off that is communicated to the State Project Director or designee.

2.1.1.1 Attributes of a Large and Complex Information Technology (IT) System

The Key Staff must meet all staffing requirements set forth in this SOW. If the requirement indicates that the experience must be on a Large and Complex Information Technology (IT) System or project, the Contractor must use the following attributes to meet the definition of Large and Complex IT System:

- A solution that integrates at least two applications, one of which is a Commercial-Off-the-Shelf (COTS) application.
- A solution that interfaces with at least five external systems, at least one (1) of which is real-time.
- A solution that is accessed by at least one thousand (1,000) end users at multiple locations.
- A solution that has a dollar value of at least ten million (\$10,000,000) dollars.
- A solution that includes multi-tiered processing, including a consumer or user facing front-end optimized for multiple user interface platforms.

2.1.2 Project Manager

The duties and responsibilities of the Project Manager include, but are not limited to:

- Responsible for the execution and overall management of the Contract.
- Engages with the CalHEERS stakeholder organizations and executives on a day-to-day basis to ensure the project receives stakeholder commitment and support.
- Possess signature authority to commit the Contractor to all Contracts with the State for this project.
- Provide direction to ensure that all Contractor staffing and project resources are met, as required, and maintain accountability for Staff and resource performance.
- Collaboratively manage contractual relationships to ensure that terms and conditions are met.
- Communicate and report on project matters on an ongoing basis.
- Act as a liaison with the State Project Director or designee.
- Ensure the State receives timely responses specified for applicable requirements and Service Level Agreements (SLAs) from all Contractors (and Subcontractors).
- Possess authority to make decisions and execute Change Requests (CRs).
- Prepare, and assist the State Project Director or designee in preparing, special reports and presentations related to the Project.
- Work cooperatively with the CalHEERS Project Office, the Department of Health Care Services (DHCS), and Covered California to resolve escalated CalHEERS issues including, but not limited to, contractual requirements, risk mitigation, system enhancements, and any other issue that requires executive management attention.

- Identify and bring forward options that will provide the highest values to the Covered California, DHCS, and the Office of Technology & Solutions Integration (OTSI).

Table 2-2: Project Manager Mandatory Qualifications (MQs)

Req #	Mandatory Qualification
2.1.2-01 (existing)	The Project Manager shall have a minimum of five (5) years' experience within the past ten (10) years, supervising teams of 50 people or greater on projects that involved large and complex IT systems.
2.1.2-02 (existing)	The Project Manager shall possess and maintain a valid Project Management Institute (PMI) Project Management Professional (PMP) certification throughout the term of this Contract.
2.1.2-03 (existing)	The Project Manager shall have a minimum of three (3) years of experience within the past ~~fifteen~~ <u>(4015)</u> years, on a project that implemented, or performed the maintenance and operations on, a health care eligibility or health care enrollment system meeting the definition of Large and Complex IT System.

2.1.3 Deputy Project Manager

The duties and responsibilities of the Deputy Project Manager include, but are not limited to:

- Monitor Project progress and performance.
- Communicate and report on project matters on an ongoing basis.
- Manage issues between Contractor and State staff.
- Ensure that all Contractor Staff/resources work cooperatively and collaboratively with the CalHEERS PMO and all other State staff.
- Manage and lead the Project and Project Team.
- Manage coordination and collaboration of the Project Sponsors, Program Partners, and stakeholders engaged in the Project work.
- Be the primary point of contact, in matters of Project Management, to the State Assistant Project Director or designee.
- Collaborate with Transition Manager on CalHEERS transition activities.
- Identify and proactively bring forward options that will provide the highest values to Covered California, DHCS, and OTSI.

Table 2-3: Deputy Project Manager MQs

Req #	Mandatory Qualification
2.1.3-01 (existing)	The Deputy Project Manager shall have a minimum of five (5) years' experience within the past ten (10) years, in Business or Information Technology (IT) Project Management.
2.1.3-02 (existing)	The Deputy Project Manager shall have a minimum of five (5) years' experience within the past ten (10) years, managing/co-managing a project, including but not limited to, experience managing Contract requirements and deliverables on large and complex IT projects; and have experience with human services systems and programs with emphasis on healthcare.
2.1.3-03 (existing)	The Deputy Project Manager shall possess and maintain a valid Project Management Institute (PMI) Project Management Professional (PMP) certification throughout the term of this Contract.

2.1.4 Technical Manager

The duties and responsibilities of the Technical Manager include, but are not limited to:

- Lead the day-to-day activities of the Contractor technical Staff who are engaged in the technical management aspects of the project.
- Lead the technical disciplines of the project, unlike the Project Manager and Project Management Office Manager, who will focus on the overall project management of the project.
- Work with the State and project Staff to ensure the timely request and implementation for infrastructure (hardware/software) upgrades.
- Establish and execute technical policies, processes, and procedures.
- Partition large systems into subsystems and components that may be handled by a single individual or team.
- Manage technical resources to ensure that all technical issue resolutions are addressed.
- Assess proposed system enhancements for design alternatives based on all identified constraints, such as cost, schedule, usability, and reliability.
- Ensure that all system enhancement design, development, and testing activities comply with Contract and system requirements.
- Ensure on-schedule delivery of system enhancements and associated deliverables.
- Manage meetings or walkthroughs of CalHEERS Contractor deliverables as requested by the State.
- Resolve all system defects and report the resolution to the CalHEERS Project Office.
- Identify and proactively bring forward options that will provide the highest values to Covered California, DHCS, and OTSI.

Table 2-4: Technical Manager MQs

Req #	Mandatory Qualification
2.1.4-01 (existing)	The Technical Manager shall have a minimum of five (5) years' experience within the past ten (10) years, managing a system development life cycle (SDLC), including business and system requirement specification, design, development, testing, and implementation, on projects involving Large and Complex IT Systems.
2.1.4-02 (existing)	The Technical Manager shall have a minimum of five (5) years' experience within the past ten (10) years, performing oversight of technical resources, resolving system defects and reporting resolutions.
2.1.4-03 (existing)	The Technical Manager shall have a minimum of five (5) years' experience within the past ten (10) years, managing the system development life cycle (SDLC) on maintenance and operations projects which involved Large and Complex IT Systems.

2.1.5 Project Management Office Manager

The duties and responsibilities of the Project Management Office (PMO) Manager include, but are not limited to:

- Provide day-to-day management and direction of Contractor resources assigned to the project throughout the life of the Contract.
- Create, manage and maintain, in conjunction with the scheduler, the Master Project Work Plan.
- Coordinate the availability of scheduled Contractor resources for the project.
- Establish and maintain regular communications with the CalHEERS Project Management Office regarding project status.

- Provide weekly written project status reports as required to the CalHEERS Project Management Office.
- Manage issue reporting, tracking, escalation, and resolution procedures.
- Work with sponsors and management staff on budget fiscal duties.
- Knowledge and experience of Asset Management tools (e.g., Flexera, EWM, Service Now [SNOW]).
- Conduct ongoing reviews with State and sponsors and ensure issue escalation procedures are followed, and issues are resolved.
- Oversee and manage change management controls and procedures in coordination with the State and as required in established project plans.
- Assist the State as needed in the preparation of State and federal approval and reporting documents.
- Manage the project System Development Maintenance and Operations Contract and associated subcontracts.
- Ensure the timely development and delivery of quality project deliverables.
- Monitor, maintain, and update the project schedules.
- Oversee preparation of all documents, correspondence, meeting agendas, and minutes.
- Identify and proactively bring forward options that will provide the highest values to Covered California, DHCS, and OTSI.

Table 2-5: PMO Manager MQs

Req #	Mandatory Qualification
2.1.5-01 (existing)	The PMO Manager shall have a minimum of five (5) years' project management experience within the past ten (10) years, managing and supervising PMO teams on projects involving Large and Complex IT Systems.
2.1.5-02 (existing)	The PMO Manager shall have a minimum of five (5) years' experience within the past ten (10) years, managing a PMO, in accordance with industry best practices, including experience managing Contract requirements and deliverables on projects involving Large and Complex IT Systems.
2.1.5-03 (existing)	The PMO Manager shall possess and maintain a valid Project Management Institute (PMI) Project Management Professional (PMP) certification throughout the term of this Contract.

2.1.6 Schedule Management Lead

The duties and responsibilities of the Schedule Management Lead include, but are not limited to:

- Create, manage and maintain, in conjunction with the Project Manager, the Master Project Work Plan.
- Coordinate the availability of scheduled Contractor resources for the project.
- Work with sponsors and management staff on schedule duties.
- Facilitate the Weekly Software Release Work Plan meeting with State Staff and Sponsor representatives.
- Manage all aspects of the schedule as outlined in the contract and requested by the State.
- Advanced knowledge and experience of MS Project and Project Web Application to create, maintain, and archive the project schedule and schedule templates.
- Adhere to the Project's Release Guidelines as they apply to release schedules.
- Facilitate the incorporation of multiple work plans into one comprehensive Project Schedule.

Table 2-6: Schedule Management Lead MQs

Req #	Mandatory Qualification
2.1.6-01 (new)	The Schedule Management Lead shall have a minimum of five (5) years' experience within the past ten (10) years, <u>supervising schedule management teams on projects involving Large and Complex IT Systems, as the Schedule Management Lead on Large and Complex IT Systems.</u>
2.1.6-02 (new)	The Schedule Management Lead shall have a minimum of five (5) years' experience within the past ten (10) years, <u>managing project schedules, including an integrated master schedule (multiple schedules merged into a single master schedule), on projects involving Large and Complex IT Systems, implementing automated schedule update processes on projects involving Large and Complex IT Systems.</u>
2.1.6-03 (new)	The Schedule Management Lead shall possess and maintain a valid, <u>in good standing,</u> Project Management Institute (PMI) Project Management Professional (PMP) certification throughout the term of this Contract.
~~2.1.6-04 (new)~~	~~The Schedule Management Lead shall have a minimum of five (5) years of demonstrated experience scheduling change management and/or work authorization changes on a large and complex IT project in excess of ten (10) million dollars and integrates at least two (2) applications.~~

2.1.7 Operations Manager

The duties and responsibilities of the Operations Manager include, but are not limited to:

- Manage all Contractor Operations Staff.
- Manage all ongoing CalHEERS operations including, but not limited to, planning, certification, batch processes, transaction processing, reporting, performance monitoring, and capacity planning/sizing.
- Ensure the system operates in compliance with the Contract service level requirements.
- Work with the State and project Staff to resolve all CalHEERS issues related to ongoing systems operations including but not limited to system outages.
- Work with the State and project Staff to ensure the timely request and implementation for infrastructure (hardware/software) upgrades.
- Work with State and project Staff to ensure the continuity of computer services including the wide area network.
- Ensure the timely development and delivery of operations deliverables.
- Act as a liaison between the State, Project Sponsors, Program Partners and the Contractor in regard to System Development Maintenance and Operations (SDMO) activities and associated issue and risk management activities.
- Identify and proactively bring forward options that will provide the highest values to Covered California, DHCS, and OTSI.
- Participate in the Defect Management Meetings (i.e. the Production Triage Meeting) to ensure SI attendance and support as requested by the State Project Director or designee.
- Oversees Carrier Support Activities

Table 2-7: Operations Manager MQs

Req #	Mandatory Qualification
2.1.7-01 (existing)	The Operations Manager shall have a minimum of five (5) years' experience within the past ten (10) years, supervising teams of 20 people or greater on maintenance and operations projects involving Large and Complex IT Systems.

Req #	Mandatory Qualification
2.1.7-02 (existing)	The Operations Manager shall have a minimum of five (5) years' experience within the past ten (10) years, ensuring the continuity of IT operations services, including both local and wide area networks and cloud based services on projects involving Large and Complex IT Systems.
2.1.7-03 (existing)	The Operations Manager shall have a minimum of three (3) years' experience within the past ten (10) years, <u>on maintenance and operations projects involving Large and Complex IT Systems which were hosted at in the cloud, on maintenance and operations projects involving Large and Complex IT Systems which were hosted at a Tier 3 data center or better.</u>

2.1.8 Applications Maintenance Manager

The duties and responsibilities of the Applications Maintenance Manager include, but are not limited to:

- Manage all aspects of the application development team and its Staff (including Subcontractors and resources).
- Plan, coordinate, and monitor the progress of development activities to ensure their ongoing alignment with business goals.
- Ensure on-schedule delivery of change requests including system enhancements and defect fixes.
- Ensure that design sessions and walkthroughs are planned, executed, and delivered on schedule.
- Ensure the on-schedule delivery of Change Requests (CRs) including System Development Lifecycle (SDLC) and defect fixes.
- Identify changes in the scope or work effort that could result in changes to the work plan or defect fix/release.
- Document and communicate issues related to development/defect fix activities.
- Oversee and monitor the analysis, design, development, unit testing, system testing, integration testing, migration to production, as needed, to produce fixes and enhancements.
- Oversee and monitor the Development and updating of regression test scripts.
- Ensure that documentation of defect fixes, CRs or any SDLC is reflected accurately in the appropriate deliverables' documentation. This also includes providing documentation to training staff and State support staff for each change/modification (CR) as applicable.
- Identify and proactively bring forward options that will provide the highest values to Covered California, DHCS, and OTSI.
- Facilitate Defect Management Meetings (i.e. the Release and Defect Triage Meeting) to ensure SI attendance and support as requested by the State Project Director or designee.

Table 2-8: Applications Maintenance Manager MQs

Req #	Mandatory Qualification
2.1.8-01 (existing)	The Applications Maintenance Manager shall have a minimum of five (5) years' experience within the past ten (10) years, as the application manager or lead on projects involving Large and Complex IT Systems.
2.1.8-02 (existing)	The Applications Maintenance Manager shall have a minimum of four (4) years' experience within the past ten (10) years, on projects involving Large and Complex IT Systems that integrated one (1) or more COTS applications.

Req #	Mandatory Qualification
2.1.8-03 (existing)	The Applications Maintenance Manager shall have a minimum of five (5) years' experience, within the past ten (10) years, managing application maintenance resources, scope, and prioritizing applications maintenance activities within the project work plan.

2.1.9 Enterprise Architect

The duties and responsibilities of the Enterprise Architect include, but are not limited to:

- Lead the effort to maintain and update the Architectural Design Document.
- Ensure that established program and project standards and practices are met and ensure quality of end products.
- Identify, monitor, and manage risks within recognized constraints.
- Recommend architecture strategy and provide planning consultation to the core team, with a focus on innovation options, particularly to leverage Artificial Intelligence (AI).
- Alignment of IT strategy and planning with CalHEERS business goals.
- Ensure that projects do not duplicate functionality or diverge from each other or from business and IT strategies.
- Risk management of information and IT assets through appropriate standards and security policies.
- Assist with the development of policies, standards, and guidelines that directs the selection, development, implementation, and use of Information Technology within the organization.
- Work with the Technical Manager, Applications Maintenance Manager, and/or Release Manager to provide a consensus based enterprise solution that is scalable, adaptable and in synchronization with changing business needs.
- Ensure seamless integration between any and all architectures that interact and/or interface with CalHEERS.
- Actively participate in all aspects of SDLC, defect fixes, and/or CR process from requirements, design, and build through deployment.
- Translate business requirements into working foundational components for platform, thus ensuring functional and nonfunctional aspects are met.
- Work with Application Manager and/or teams to provision platform components.
- Oversee and ensure the documentation of key information such as system architectural standards are reflected and documented accurately in the appropriate deliverables documentation (formal and informal).
- Identify and proactively bring forward options that will provide the highest values to Covered California, DHCS, and OTSI.

Table 2-9: Enterprise Architect MQs

Req #	Mandatory Qualification
2.1.9-01 (existing)	The Enterprise Architect shall have a minimum of five (5) years' experience within the past ten (10) years as an Enterprise Architect on projects involving Large and Complex IT Systems.
2.1.9-02 (existing)	The Enterprise Architect shall have a minimum of five (5) years' experience within the past ten (10) years in architecting and building high performance internet scale distributed systems and/or in architecting and building enterprise scale distributed systems, on projects involving Large and Complex IT Systems; and have experience with human services systems and programs with emphasis on healthcare. ~~Additionally, the candidate should have experience with systems and programs related to healthcare services and/or human services.~~

Req #	Mandatory Qualification
2.1.9-03 (existing)	The Enterprise Architect shall have a minimum of five (5) years' experience within the past ten (10) years of advanced technical expertise in at least one (1) of the following core areas:~~following technologies and technical/architecture areas~~: • Service Oriented Architecture (SOA) • Data Architecture and Data Warehousing • Security/Identity Management • Cloud Computing • Infrastructure Architecture ~~• Web and Application Servers~~ ~~• Customer Relationship Management (CRM)~~ ~~• Customized Off-the-shelf Software (COTS)~~ ~~• Service Oriented Architecture (SOA)~~ ~~• Modeling skills/Unified Modeling Language (UML)~~ ~~• SharePoint, Data Architecture~~ ~~• Data Warehousing~~ ~~• Security/Identity Management~~ ~~• Cloud~~ ~~• Mobile~~ ~~• Desktop/Client Server~~ ~~• Network solutions~~

2.1.10 Release Manager

The duties and responsibilities of the Release Manager include, but are not limited to:

- Manage risks and resolve issues that affect release scope, schedule, and quality
- Communicate all key project plans, commitments, and changes including requirements, Quality Assurance (QA) plans, schedule, and scope changes across business portfolios.
- Coordinate work between different teams.
- Negotiate, plan, and manage all release activities.
- Work with release team to understand impacts of branches and code merges.
- Review and maintain the release schedule for all core services.
- Lead and coordinate the Go-Live activities including the execution of the deployment Plans.
- Research configuration management methodologies and technologies and analyzes an application to current configuration management needs.
- Oversee and monitor the Development and updating of regression test scripts.
- Oversee and conduct Release Readiness reviews, Milestone Reviews, and Business Go/No-Go reviews.
- Participate in the Release and Defect Triage Meeting.
- Coordinate release content and effort based on the service request backlog, pending service requests, third party applications and /or operating system updates.
- Oversee and ensure the documentation of key information such as build and release procedures, dependencies, defect fixes, Change Requests (CRs) or any SDLC is reflected and documented accurately in the appropriate deliverables' documentation (Formal and Informal).

- Present readiness status and issues to CalHEERS Project Management team, Executive Steering Committee, and stakeholders.
- Identify and proactively bring forward options that will provide the highest values to Covered California, DHCS, and OTSI.

Table 2-10: Release Manager MQs

Req #	Mandatory Qualification
2.1.10-01 (existing)	The Release Manager shall have a minimum of five (5) years' experience within the past ten (10) years as the release manager or lead on projects involving Large and Complex IT Systems.
2.1.10-02 (existing)	The Release Manager shall have a minimum of five (5) years' experience within the past ten (10) years, on projects involving Large and Complex IT Systems, that manage, plan, schedule and control software build through different stages and environments; including testing and deploying software releases.
2.1.10-03 (existing)	The Release Manager shall have a minimum of five (5) years' experience within the past ten (10) years, working with project management principles and best practices in an information systems operations environment, within systems analysis or in the system development life cycle (SDLC).

2.1.11 Transition Manager

The duties and responsibilities of the Transition Manager include, but are not limited to:

Transition-In Responsibilities:

- Manage all CalHEERS Transition-In activities and provide a weekly status report on these activities.
- Develop, maintain, and deliver a CalHEERS Transition-In Master Plan (TIMP).
- Work collaboratively with the incumbent contractor to ensure a smooth transition of all components of CalHEERS.
- Ensure minimal impact to CalHEERS end users during Contractor transition.
- Assist State, Project Sponsors, and Program Partners in understanding transition-in activities.
- Identify and communicate with external stakeholders on transition activities.
- Identify and proactively bring forward options that will provide the highest values to Covered California, DHCS, and OTSI.

Transition-Out Responsibilities:

- Manage all CalHEERS Transition-Out activities and provide a weekly status report on these activities.
- Develop, maintain, and deliver a CalHEERS Contract Closeout Plan.
- Work collaboratively with the new Contractor to ensure a smooth transition of all components of CalHEERS.
- Ensure minimal impact to CalHEERS end users during Contractor transition.
- Assist State, Project Sponsors, and Program Partners in understanding Transition-Out activities.
- Identify and communicate with external stakeholders on transition activities.
- Identify and proactively bring forward options that will provide the highest values to Covered California, DHCS, and OTSI.

Table 2-11: Transition Manager MQs

Req #	Mandatory Qualification
2.1.11-01 (existing)	The Transition Manager shall have a minimum of three (3) years' experience within the past ten (10) years, performing operational transition and the related organization change management activities on projects involving Large and Complex IT Systems.
2.1.11-02 (existing)	The Transition Manager shall have a minimum of two (2) years' experience within the past ten (10) years, managing the successful transition of Large and Complex IT Systems from one (1) company to another on at least two (2) separate projects. The Transition Manager's experience shall have been for a minimum duration of three (3) months for each project.
2.1.11-03 (existing)	The Transition Manager shall have a minimum of five (5) years' experience within the past ten (10) years building and maintaining strong working relationships with clients, key internal and external stakeholders; Conveying relevant information to an executive-level audience, ensuring client (internal management or customer) is aware of assignment progress/service status; And building credibility and fostering business-partnering relationships.

2.1.12 Quality Assurance Manager

The duties and responsibilities of the Quality Assurance Manager include, but are not limited to:

- Develop, implement, and maintain quality assurance processes to ensure all objectives are met, milestones are achieved, and stakeholders are satisfied.
- Reports to the Contractor Project Manager and must appear on the Contractor's Organization Chart with a direct relationship to the Contractor Project Manager.
- Develop, implement, and execute a Quality Assurance Plan to verify and validate all processes and deliverables.
- Ensure the timely development and delivery of deliverables, ensure deliverables satisfy the business and technical requirements, and ensure deliverables possess no errors or defects.
- Report the Quality Assurance activities as part of the Project Status Report.
- Work collaboratively and cooperatively with the CalHEERS Project Office and State to ensure all production, quality, and customer service standards are satisfactory and customer expectations are being met and improved when needed.
- Develop and maintain a repository for all project plans, schedules, deliverables, and project working papers, and project artifacts.
- Collaborate with the State, Independent Verification & Validation (IV&V) contractor, and audit personnel on day-to-day activities.
- Identify and proactively bring forward options that will provide the highest values to Covered California, DHCS, and OTSI.

Table 2-12: Quality Assurance Manager MQs

Req #	Mandatory Qualification
2.1.12-01 (existing)	The Quality Assurance Manager shall have a minimum of five (5) years of lead experience within the past ten (10) years, applying quality assurance principles, methods, and techniques to processes on projects involving Large and Complex IT Systems.
2.1.12-02 (existing)	The Quality Assurance Manager shall have at least five (5) years of lead experience within the past ten (10) years, applying quality assurance principles, methods, and techniques to the development of project deliverables on projects involving Large and Complex IT Systems.
2.1.12-03 (existing)	The Quality Assurance Manager shall have a minimum of five (5) years' experience within the past ten (10) years, supervising QA staff on projects that involved Large and Complex IT Systems.

2.1.13 Agile Manager

The duties and responsibilities of the Agile Manager include, but are not limited to:

- Responsible for providing direction that optimize the value of the Agile Teams, ensuring the execution of Product Owner visions and goals.
- Possesses a thorough understanding of the different Agile frameworks (e.g. SAFe, Kanban, Extreme Programming, and combined frameworks)
- Ensure the team adheres to its processes (and all that entails in terms of artifacts and meetings).
- Ensure requirements are addressed through the use of user stories and implement processes or mechanisms to validate requirements are met within the delivered working software.
- Help to identify obstacles for the Scrum Masters.
- At an enterprise level, lead and manage large, complex enterprise-level projects consisting of multiple agile teams and/or requiring integration with other activities outside the scope of the agile teams.
- At a team level, play a consultative role to help put in place the appropriate people, process, and tools and coach members of the team as needed to optimize the efficiency of the project team.
- In situations that require a hybrid Agile approach, use good judgment and skill to develop a project management approach that is suitable for planning and managing the effort to achieve the project goals within designated project constraints.
- Provide status reports.
- Ensure business stakeholder communication.
- Identify and proactively bring forward options that will provide the highest values to Covered California, DHCS, and OTSI.

Table 2-13: Agile Manager MQs

Req #	Mandatory Qualification
2.1.13-01 (existing)	The Agile Manager shall have a minimum of five (5) years' lead experience within the past ten (10) years, applying agile principles, methods, and techniques to processes on projects involving Large and Complex IT Systems.
2.1.13-02 (existing)	The Agile Manager shall have a minimum of two (2) years' experience within the past five (5) years <u>assisting IT projects with the transition from Waterfall to Agile methodology supporting the technical implementation of agile solutions.</u>
~~2.1.13-03 (existing)~~	~~The Agile Manager shall have two (2) years' experience managing teams that wrote the back-ends of modern web applications (e.g. using frameworks such as Ruby on Rails, Django, Flask, or Express) and front-ends of modern web applications (e.g., using a modern JavaScript front-end framework such as React, Vue, Ember, or Backbone; using modern web standards-compliant CSS and HTML).~~

2.1.14 Data Scientist

The duties and responsibilities of the Data Scientist includes, but is not limited to:

- Identifies opportunities to leverage data through advanced analytics, machine learning, and emerging AI technologies, and other data science techniques to generate new insights and develop new products for CalHEERS.
- Coordinates with data teams at CalHEERS, Covered California, and DHCS to advance the use of data science, analytical experiments, and hypothesis testing to improve learnings and quantify impacts for CalHEERS customers.

- Responsible to identify new kinds, types and sources of data to drive business innovation throughout CalHEERS that could improve business processes and define processes for the effective, integrated introduction of new data.
- Devises and utilizes algorithms and models to analyze large structured and unstructured data stores; perform data and error analysis to improve models; cleans and validates data for uniformity and accuracy.
- Analyzes data for trends and patterns and interprets data with rigorous research strategies, informed by training in behavioral economics, causal inference, program evaluation, biostatistics or related disciplines.
- Defines, manages and advances enterprise information management principles, policies and programs for stewardship and custodianship of data and analytics, in concert with legal, information security, risks and audit compliance requirements.
- Acts as subject matter expert on data science, and analysis of CalHEERS data, for other CalHEERS data users.

Table 2-14: Data Scientist MQs

Req #	Mandatory Qualification
2.1.14-01 (new)	The Data Scientist must have a minimum of 5 years' experience within the past ten (10) years of leading teams of programmers that develop machine learning algorithms or design predictive modeling processes.
2.1.14-02 (new)	The Data Scientist must have a minimum of 10 years' experience within the past fifteen (15) years in sorting, analyzing, and managing large amounts of data (commonly referred to as "big data").
2.1.14-03 (new)	The Data Scientist must have a minimum of 10 years' experience within the past fifteen (15) years writing high-quality machine learning models and algorithms required to support statistics and probability. The ability to collect, interpret, organize, and present data, and an advanced degree in applied statistics, economics, epidemiology, biostatistics, or a related field, with at least a concentration in quantitative methods relevant to work described for CalHEERS.
2.1.14-04 (new)	The Data Scientist must have a minimum of 10 years' experience within the past fifteen (15) years providing services in support of data wrangling including cleaning and organizing complex data sets to make them easier to access and analyze. Manipulating the data to categorize it by patterns and trends to assist in making data-driven decisions. A solid understanding of database management, with proven experience extracting data from different sources and transforming it into a suitable format for query and analysis, and then load it into a data warehouse system is required.

2.1.15 Data Analytics Expert

The duties and responsibilities of the Data Analytics Expert includes, but is not limited to:

- Responsible for all enterprise analytics, decision making affecting analytics, directing analytics processes, and for using analytics to drive innovation and enterprise objectives.
- Lead strategy and the development of data and analytics products, including identifying opportunities to improve methods, toolsets, infrastructure, team and staffing approach, and presentation of analyses (e.g. visualizations, etc.).
- Proposes and implements alternative analytics approaches to meet business objectives (such as encouraging the use of agile development approach to analytics resources and reporting).
- Identify and standardize the use and governance of data and analytics in support of the CalHEERS strategic plan and roadmap.

- Identify new kinds, types and sources of data to drive business innovation throughout CalHEERS that could improve business processes and define processes for the effective, integrated introduction of new data.
- Implement strategies to improve storing, organizing, cleansing, and enriching data, as well as ensuring optimized performance and data integrity throughout all data analytics resources and activities.
- Define, manage and advance enterprise information management principles, policies and programs for stewardship and custodianship of data and analytics, in concert with legal, information security, risks and audit compliance requirements.
- Innovate and expand the CalHEERS' research and analytics offerings via introducing emerging analytical approaches and technologies, with an emphasis on opportunities with the highest values to Covered California, DHCS, and OTSI.
- In collaboration with the Data Scientist, ensure that any new proposed CalHEERS functionality is assessed for how CalHEERS can quantitatively evaluate and measure the change's desired impacts. This shall include creating a plan for the needed data enhancements or resources to allow desired evaluation and measurement and ensuring that the plan be considered as a part of proposed CalHEERS functional changes.
- Ensures that data analytics and reporting resources at CalHEERS are integrated with and have access to any needed CalHEERS application subject matter experts (e.g. Portal developers) to ensure that analytics reflect the latest understanding of the CalHEERS functionality.

Table 2-15: Data Analytics Expert MQs

Req #	Mandatory Qualification
2.1.15-01 (existing)	The Data Analytics Expert shall have a minimum of ten (10) years' lead experience within the past fifteen (15) years', developing, implementing, and improving data analytics strategies and solutions on projects involving Large and Complex IT Systems.
2.1.15-02 (existing)	The Data Analytics Expert shall have a minimum of five (5) years' experience within the past ten (10) years' leading a team of data architects, data scientists, report developers, or related analytics staff resources on projects involving Large and Complex IT Systems.
2.1.15-03 (existing)	The Data Analytics Expert shall have a minimum of three (3) years' experience/knowledge within the past seven (7) years in business processes including research and data analysis, application of statistical research techniques, report or application development.

2.1.16 Security Officer

The duties and responsibilities of the Security Officer include, but are not limited to:

- Serve as the focal point for security compliance related activities and responsibilities.
- Maintain, enforce and document State information and security policies and procedures that align with current industry standards.
- Provide oversight of those assigned to specific security duties, as well as administer reviews relating to the overall security program.
- Serve as a resource regarding matters of information security and reports status of ongoing information security activities to State Project Director or designee(s).
- Lead in the development/adoption and enforcement of Information Security policies, procedures and standards.
- Coordinate with the Project to develop document, implement, and maintain a Project/ State Agency-wide information security programs to protect information and information systems.

- Coordinate with Contractor/Subcontractor and State in responding to information security data calls, audit requests, and reporting.
- Collaborates with Covered California Chief Information Security Officer on material security enhancements and modifications.
- Maintain appropriate security measures and mechanisms to guard against unauthorized access to electronically stored and /or transmitted patient data and protect against reasonably anticipated threats and hazards.
- Oversee and/or assist in performing on-going security monitoring of information systems.
- Work to identify all weaknesses and vulnerabilities in all operational entities including, but not limited to Operations, Network Management, Database and Program Management.
- Test and conducts exercises on the security incidents response capabilities for CalHEERS, analyses and simulation to determine the incidents response effectiveness and document results.
- Implement and enforce policies and procedures, which include standards for incident handling (FTI, PHI, etc.).
- Identify and proactively bring forward options that will provide the highest values to Covered California, DHCS, and OTSI.

Table 2-16: Security Officer MQs

Req #	Mandatory Qualification
2.1.16-01 (existing)	The Security Officer shall have a minimum of ten (10) years' lead experience within the past fifteen (15) years', developing, implementing, improving and monitoring industry standard Security strategies, solutions, and processes on projects involving Large and Complex IT Systems.
2.1.16-02 (existing)	The Security Officer shall have a minimum of five (5) years' experience within the past ten (10) years' applying Information Security principles, methods, and techniques in the development of project security deliverables on projects involving Large and Complex IT Systems.
2.1.16-03 (existing)	The Security Officer shall have a (ISC) ²⁰ Certified Information Systems Security Professional (CISSP) certification, or equivalent, including experience in Healthcare, Business Administration and Information Technology.

2.1.17 Organizational Change Management (OCM) Manager

The duties and responsibilities of the OCM Manager include, but are not limited to:

- Lead and single point of contact for the OCM effort, facilitate working sessions with Change Agents from Covered California, DHCS, and California counties to finalize OCM work products or artifacts.
- Review, approve and maintain OCM Deliverables, work products, work plan, schedules and activities associated with OCM.
- Align stakeholders, increase awareness and adoption of the changes, provide opportunities for Staff involvement in the change, and provide opportunities for change leadership.
- Understand the scope of the As-Is analysis and To-Be activity required for the CalHEERS System/Application.
- Monitor transition to the To-Be environment CalHEERS Change Request (CR) releases.
- Document and assess current and future business processes and roles in order to facilitate the identification of significant differences between the current and future business processes and roles; analyze and identify significant gaps.

- Help prepare Covered California, DHCS, and California counties for the significant changes introduced by the CalHEERS application.
- Leverage existing CalHEERS communication protocols to contact the SAWS Consortia and share information to gain the required understanding of the user interfaces between the SAWS and CalHEERS systems.
- Create communication material to encourage executive sponsorship, provide internal OCM communication, and encourage Staff involvement in the coming change.
- Collaboratively work to engage the counties at an earlier stage in the project on OCM communication activities.
- Document a list of processes for the To-Be and As-Is modeling activities and validate the processes in scope for OCM with the State's CalHEERS project team.
- Understand and provide clarity on the roles of the CalHEERS users, what business processes these roles perform, and in which organizations these roles reside.
- Understanding the scope of the changes for the Exchange, DHCS, and the California counties, understand their different communication and the best way to share information and gain the required understanding of the user interfaces between the SAWS and CalHEERS System and Subsystems.
- Oversee specific actions required to implement solutions to the impacts/changes as part of the gap analysis effort.
- Identify and document the changes that need to be made to accommodate the difference between the As-Is and future To-Be business processes.
- Validate, implement and document resolutions to resolve identified business impacts to the CalHEERS Project/System/Application.
- Identify and proactively bring forward options that will provide the highest values to Covered California, DHCS, and OTSI.

Table 2-17: OCM Manager MQs

Req #	Mandatory Qualification
2.1.17-01 (existing)	The OCM Manager shall have a minimum of ten (10) years' lead experience within the past fifteen (15) years', developing, implementing, and improving change management, gap analysis strategies and solution implementation on projects involving Large and Complex IT Systems.
2.1.17-02 (existing)	The OCM Manager shall have a minimum of five (5) years' experience within the past ten (10) years' leading a team of change management agents on projects involving Large and Complex IT Systems.
2.1.17-03 (existing)	The OCM Manager shall have a minimum of five (5) years' experience within the past ten (10) years' working with human services systems and programs with an emphasis on healthcare; ~~and~~ experience building and maintaining strong working relationships with clients, key internal and external stakeholders; ~~communicating~~ ~~Conveying~~ relevant information to an executive-level audience, ensuring ~~the~~ client (internal management or customer) is aware of the impact of impending changes.

2.1.18 Consumer Experience Lead

The duties and responsibilities of the Consumer Experience Lead include, but are not limited to:

- Support and engage product development teams in user and consumer research activities during problem discovery, including facilitation of Covered California-inspired activities that promote design thinking and alignment on the team.

- Work closely with product and design teams to identify research questions, build a research plan that will answer them, and communicate the insights to shape the user and consumer experiences of Covered California.
- Conduct research that maps the users' and consumers' latent needs to new strategic initiatives and opportunities for product innovation.
- Translate qualitative and quantitative data into compelling stories to build enduring empathetic connections.
- Provide rich context for both product and research backlogs that helps inform prioritization and aligns with the overall business strategy.
- Actively participate in the evolving UX strategy, discover and pilot new tools and resources that promote agile and lean methodologies.
- Continuously provide leadership in creating a highly engaged user and consumer base, including continued development of the platform that hits specific engagement KPIs.
- Oversee the product strategy and execution for a specific category and roadmap. Champion product initiatives and business cases to the executive team for prioritization.
- Provide product development support to consumer lifecycle marketing to create fantastic consumer engagement experiences.
- Coordinate with sponsors to leverage existing design systems and branding guidelines in new developments, ensuring a consistent consumer experience across all touchpoints.
- Encourage a fast-paced approach within a cross functional team / culture to create prototype, test and release products and features.
- Oversee the design and usability of a product category. Impact the UX of the product development by creating and advising on updates, releases, or modifications.
- Leverage consumer feedback and integrate into a continuously improving Covered California experience.
- Identify and proactively bring forward options that will provide the highest values to Covered California, DHCS, and OTSI.
- Comply with and integrate accessibility standards, including ADA and WCAG compliance, into the design and development of all consumer-facing products and experiences to ensure equitable access for users with disabilities.
- Partner with product owners, UX, and HCD teams across sponsor organizations to align consumer experience initiatives with product objectives and organizational priorities.

Table 2-18: Consumer Experience Lead

Req #	Mandatory Qualification
2.1.18-01 (existing)	The Consumer Experience Lead shall have a minimum of seven (7) years' experience within the past ten (10) years, in marketing analytics, customer experience/customer insights and/or customer strategy; and have experience with human services systems and programs with emphasis on healthcare.
2.1.18-02 (existing)	The Consumer Experience Lead shall have a minimum of five (5) years' experience within the past ten (10) years, gathering consumer and user business data, analyzing of the data, to quantify and inform User Experience (UX) strategies.
2.1.18-03 (existing)	The Consumer Experience Lead shall have a minimum of five (5) years' experience within the past ten (10) years, applying UX Design, implementing UX methodologies and best practices, and designing wireframes or prototypes for research validation.

2.2 NON-KEY STAFF PERSONNEL

The following are Non-Key Staff (also referred to as System Change Staff) roles that the State identifies as needed to accomplish the activities related to Change Requests, as defined in SOW Section 4, SYSTEM CHANGE & ENHANCEMENTS REQUIREMENTS. These Non-Key (System Change) Staff qualifications apply to both the Contractor's onshore and offshore Staff/resources.

2.2.1 Contractor Non-Key Staff

Table 2-19: Non-Key Staff General Requirements

Req #	Mandatory Qualification										
2.2.1-01 (new)	The Contractor shall staff the following Non-Key Staff as specified within the table below. • “Onsite” means co-located with CalHEERS State staff. • “Offsite/Local” means within 50 miles of downtown Sacramento, CA. • “Offsite” means within the United States, subject to the requirements or constraints within the Contract. • “Offshore” means outside the United States, subject to the requirements or constraints within the Contract. <table> <tr> <th>Team</th><th>Location & Time %</th></tr> <tr> <td>Development Manager</td><td>Onsite (100%)</td></tr> <tr> <td>Developer Lead</td><td>Onsite (100%)</td></tr> <tr> <td>Tools Manager</td><td>Onsite (100%)</td></tr> <tr> <td>Tools Lead</td><td>Onsite (100%)</td></tr> </table>	Team	Location & Time %	Development Manager	Onsite (100%)	Developer Lead	Onsite (100%)	Tools Manager	Onsite (100%)	Tools Lead	Onsite (100%)
Team	Location & Time %										
Development Manager	Onsite (100%)										
Developer Lead	Onsite (100%)										
Tools Manager	Onsite (100%)										
Tools Lead	Onsite (100%)										
2.2.1-02 (new)	The Contractor shall staff teams, considering both onshore/offshore mix and work schedules, to ensure adequate coverage/support during the business hours of project staff, sponsors, stakeholders and CalHEERS end-users.										
2.2.1-03 (new)	The Contractor shall not concurrently fill multiple Non-Key Staff positions with a single Non-Key Staff member.										

2.2.2 Non-Key (System Change) Staff Personnel Mandatory Qualifications (MQs)

Table 2-20: Non-Key (System Change) Staff Personnel MQs

Req #	Non-Key (System Change) Staff Personnel
2.2.2-01 (existing)	System Architect/Engineer: Five (5) years of experience aligning IT systems with organizational business processes. At least three (3) years of that experience in a lead capacity in systems analysis, design, and architecture.
2.2.2-02 (existing)	Usability Expert: Five (5) years of experience applying User-Centered Design (UCD) processes and User Experience (UX) activities (such as usability reviews, studies, and testing) on IT projects.
2.2.2-03 (existing)	Security Analyst: Five (5) years of experience applying analytical processes on IT projects. At least three (3) years of experience in systems security.
2.2.2-04 (existing)	Senior Programmer/Developer: Five (5) years of experience in electronic data processing systems study, design, and programming. At least four (4) years of that experience must have been in a lead capacity.

Req #	Non-Key (System Change) Staff Personnel
2.2.2-05 (existing)	Programmer/Developer: Five (5) years of experience in electronic data processing systems study, design, and programming. At least three (3) years of experience developing software solutions.
2.2.2-06 (existing)	Senior System Administrator: Five (5) years of experience as a Systems Administrator.
2.2.2-07 (existing)	System Administrator: Three (3) years of experience as a Systems Administrator.
2.2.2-08 (existing)	Senior Database Administrator: Five (5) years of experience as a Database Administrator.
2.2.2-09 (existing)	Database Administrator: Three (3) years of experience as a Database Administrator.
2.2.2-10 (existing)	Senior Database Analyst: Five (5) years of experience as a Database Analyst.
2.2.2-11 (existing)	Database Analyst: Three (3) years of experience as a Database Analyst.
2.2.2-12 (existing)	Senior System Tester: Five (5) years of experience conducting systems testing, which includes but not limited to validating User Stories/Scenarios and cross referencing to Business Requirements.
2.2.2-13 (existing)	System Tester: Three (3) years of experience conducting systems testing, which includes but not limited to validating User Stories/Scenarios and cross referencing to Business Requirements.
2.2.2-14 (existing)	Senior Trainer: Five (5) years of experience in developing and updating online training material and conducting user training on IT projects.
2.2.2-15 (existing)	Trainer: Three (3) years of experience in developing and updating online training material and conducting user training on IT projects.
2.2.2-16 (existing)	Senior Technical Analyst: Seven (7) years of experience applying analytical processes on IT projects. At least five (5) years of that experience must have been in system analysis and design.
2.2.2-17 (existing)	Technical Analyst: Five (5) years of experience applying analytical processes on IT projects. At least three (3) years of that experience must have been in system analysis and design.
2.2.2-18 (existing)	Senior Business Analyst: Seven (7) years of experience applying analytical processes on IT projects. At least five (5) years of that experience must have been in developing and documenting business and system requirements. A minimum of two (2) years' experience in facilitation of requirement solicitation sessions involving multiple stakeholder organizations.
2.2.2-19 (existing)	Business Analyst: Five (5) years of experience applying analytical processes on IT projects. At least three (3) years of that experience must have been in developing and documenting business and system requirements.
2.2.2-20 (existing)	Senior Technical Writer: Five (5) years of experience on IT projects. At least three (3) years of experience must have been spent developing and editing technical documentation, which includes but is not limited to, the ability to translate complex technical concepts both verbally and in writing between technical experts and nontechnical team members.
2.2.2-21 (existing)	Technical Writer: Three (3) years of experience on IT projects. At least one (1) year of experience must have been spent developing and editing technical documentation, which includes but is not limited to, the ability to translate complex technical concepts both verbally and in writing between technical experts and nontechnical team members.

Req #	Non-Key (System Change) Staff Personnel
2.2.2-22 (existing)	Reports Developer: Five (5) years of experience working with report development on IT projects. At least three (3) years of that experience must have been spent developing and editing technical documentation.
2.2.2-23 (existing)	Senior Scrum Master: Three (3) years of experience as a Senior Scrum Master on IT projects.
2.2.2-24 (existing)	Scrum Master: One (1) year experience as a Scrum Master on IT projects.
2.2.2-25 (existing)	Joint Application Development (JAD) Facilitator: Three (3) years of experience facilitating JAD sessions on IT projects. Possesses a Certified Business Analysis Professional (CBAP) Certification (desirable).
2.2.2-26 (existing)	Data Analytics Architect: Three (3) years of experience making architecture decisions, developing standards and operating models that support advanced analytics.
2.2.2-27 (existing)	Data Analytics Analyst: Three (3) years of experience accessing, manipulating and making sense of large amounts of structured and unstructured data.
2.2.2-28 (existing)	Data Analyst and Visualization Expert: Three (3) years of experience with data management, pattern recognition and visualization experience.
2.2.2-29 (new)	Senior Data Warehouse Developer: Three (3) years of experience with data modeling, ETL, data warehouse technologies, optimizing queries, and data integration tools.
2.2.2-30 (new)	Data Warehouse Developer: One (1) year of experience with data modeling, ETL, data warehouse technologies, optimizing queries, and data integration tools.
2.2.2-31 (new)	GenAI Analyst / Specialist: Two (2) years' experience in utilizing Generative AI technologies to enhance data analysis, requirement gathering, and decision-making processes.
2.2.2-32 (new)	GenAI Data Analyst: Two (2) years' experience in utilizing Generative AI technologies to enhance data analysis, requirement gathering, and decision-making processes.
2.2.2-33 (new)	GenAI User Researcher: Two (2) years' experience as a user experience (UX) researcher focused on understanding how users interact with and perceive generative AI products (e.g., chatbots, text-to-image tools, or creative writing platforms), conducting research to identify user needs, pain points, and opportunities for improvement, ultimately informing the design and development of AI-powered features and products.
2.2.2-34 (new)	GenAI Program Lead: Two (2) years' experience overseeing the planning, execution, and delivery of generative AI (GenAI) initiatives, collaborating with cross-functional teams to identify opportunities, develop strategies, and ensure successful implementation of GenAI technologies across the project.
2.2.2-35 (new)	GenAI Engineer: Two (2) years' experience leveraging deep learning and machine learning techniques to design, develop, and implement generative AI models on large data sets.
2.2.2-36 (new)	GenAI Equity Officer / Executive: Two (2) years' experience ensuring that the development and implementation of generative AI technologies was done fairly, equitably, avoiding bias, and actively monitored for potential disparities, working to mitigate them across all aspects of GenAI usage on the project.

Req #	Non-Key (System Change) Staff Personnel
2.2.2-37 (new)	GenAI Data Scientist: Two (2) years' experience utilizing generative AI (GenAI) technologies to enhance data analysis workflows, leveraging AI to automate repetitive tasks, generate synthetic data, and assist in data exploration. Focusing on complex problem-solving and results interpretation.
2.2.2-38 (new)	EDI Specialist: Five (5) years of experience on IT projects developing, implementing, managing, and supporting Electronic Data Interchange (EDI) systems.
2.2.2-39 (new)	Google Analytics & Tagging Specialist: Five (5) years of experience with Google Analytics, data analysis, and data tagging with the application of data privacy regulations pertaining to data collection and reporting.

2.3 GENERAL STAFFING REQUIREMENTS

2.3.1 Organizational Chart

The Contractor shall provide to the State, within one (1) Business Day of a State request, the current organization chart of the Contractor's Project team, including the names of all Key Staff, or maintain the current organization chart in a location (e.g., SharePoint) accessible by the State.

2.3.2 Approval of Staff

During the Contract term, the State reserves the right to approve or disapprove the Contractor's Staff, including, but not limited to, any Subcontractor Staff assigned to this Contract, or to approve or disapprove any proposed changes in Staff or staffing levels. The State may request, and the Contractor will remove from work on the Project, the Contractor employees or Subcontractors who the State identifies as being incompetent, careless, insubordinate, unsuitable, or otherwise unacceptable, or whose continued employment on the Project is deemed to be contrary to the public interest or not in the best interest of the State, provided that such request will be based solely on nondiscriminatory reasons and the Contractor shall have the right to request the withdrawal of any such request upon the Contractor showing to the State that the concern is unfounded. Upon request of the State Project Director or designee, the Contractor shall provide the State with the required documentation (e.g., resume, experience that meets or exceeds the mandatory qualifications, etc.) of any member of its Staff or a Subcontractor's Staff assigned to or proposed to be assigned to any aspect of the performance of this Contract prior to commencing any Services.

2.3.3 Staff Competence and Compliance

All Staff proposed by the Contractor must have the following minimum requirements to be considered for assignment on this project.

Table 2-21: Staff Competence and Compliance

Req #	SOW Requirement
2.3.3-01 (new)	The Contractor Staff shall demonstrate technical competence with the skills necessary to perform that Staff member's project activities, including having experience equivalent to that of the person holding that position in the Contractor's Proposal, throughout the term of the Contract, inclusive of any optional extensions.
2.3.3-02 (new)	The Contractor Staff shall demonstrate the ability to engage in the activities and perform the services required under this Contract.

Req #	SOW Requirement
2.3.3-03 (new)	The Contractor Staff shall comply with all applicable licensing and operating requirements imposed or required under federal, state, or county law, and other standards of quality generally accepted in the field of the activities of such Staff.

2.4 CONTRACTOR STAFF ASSIGNMENT/REPLACEMENT

2.4.1 Key Staff Assignment

Subject to the provisions of Appendix A-2, SPECIAL PROVISIONS, the Key Staff identified in the Contractor's Proposal shall be the Key Staff assigned to this Project as of the effective date of this Contract.

2.4.2 Key Staff Replacement by Contractor

To facilitate Project progress and avoid time and effort associated with retraining Contractor Personnel, it is important to the CalHEERS Project to minimize Contractor Staff turnover to the extent possible, particularly for Key Staff.

The Contractor must assure the State that, wherever possible, Key Staff will be retained until their assignments are completed. When an unplanned, early employee or Subcontractor departure from the Project is unavoidable, the Contractor must notify the State Project Director or designee as soon as reasonably possible and develop and complete transition and training requirements for the new or reassigned replacement Key Staff.

In the event replacement of Key Staff is required the Contractor shall provide the State Project Director or designee with the proposed replacement candidate's resume, a completed KEY STAFF QUALIFICATIONS FORM, a completed STAFF REFERENCE FORM(s), and a side-by-side comparison of the Key Staff vs. proposed Key Staff experience that meets or exceeds the Mandatory Qualifications and Desirable Qualifications of the Key Staff in the role within thirty (30) calendar days of the date the State is notified that Key Staff member is going to become unavailable and allow the State Project Director or designee the opportunity to interview and approve the candidate. If the Contractor fails to submit a resume as required in this section or does not provide a suitable replacement candidate who is accepted by the State within thirty (30) calendar days after the interview, unless a longer time period is approved in writing by the State Project Director, or designee, liquidated damages as provided in Appendix A-2, SPECIAL PROVISIONS, shall be assessed by the State.

All new, reassigned, or substitute Key Staff must meet all the Contract requirements and shall be approved in writing by the State Project Director or designee prior to beginning work. Consent shall not be unreasonably withheld.

2.4.3 Reassignment of Key Staff (Stop Work)

During the term of this Contract, including any period of time for which a Stop Work Order is issued pursuant to Paragraph 45 of Appendix A-1, GENERAL PROVISIONS, the Contractor shall not make changes in the assignment of its Key Staff except in the event of death, illness, retirement, disability, termination, or leaving the Contractor's employment and not serving as a consultant or Contractor to the Contractor, or subject to mutual agreement by the parties to allow for removal. If a member of the Contractor's Key Staff is unable to perform due to factors beyond the Contractor's reasonable control (e.g., illness, resignation), the Contractor will use its best efforts in promptly providing suitable substitute personnel, subject to the State approval at its sole discretion. The Contractor shall submit a plan that addresses how a Key Staff member's responsibility will be reassigned when the Key Staff members is absent for more than five (5)

Business Days. Any such plan to reassign responsibilities shall receive prior approval from the State Project Director or designee.

2.4.4 Other Key Staff Replacement Requirements

When Key Staff is replaced by the Contractor or by the State, the State shall have the right to contact references and evaluate information provided and determine if the Key Staff substitution or replacement is acceptable. Any substitution or replacement of Key Staff shall have equal or better qualifications when compared to the Key Staff that is being replaced. The candidate, having received acceptance by the State, shall be available to start immediately unless otherwise agreed to by the State.

Table 2-22: Key Staff Changes, Termination or Replacement

Req #	SOW Requirement
2.4.4-01 (existing)	Except as provided in preceding SOW Subsections 2.4.2 through 2.4.4, the Contractor shall not substitute, reassign, or replace Key Staff during the term of this Contract without the prior written approval from the State Project Director or designee, which will be provided in writing prior to Contractor Staff beginning work.
2.4.4-02 (existing)	The Contractor shall submit to the State Project Director or designee, the proposed replacement candidate's resume, completed Appendix B-22, KEY STAFF QUALIFICATIONS FORM, associated Appendix B-23, STAFF REFERENCE FORM(s), and a side-by-side comparison of the Key Staff vs. proposed Key Staff experience that meets or exceeds the Mandatory Qualifications and Desirable Qualifications of the Key Staff in the role within 30 calendar days of the date the Key Staff member becomes unavailable. No amendment shall be required to make this change to the Contract.
2.4.4-03 (existing)	The Contractor shall notify the State within 48 hours of any unplanned departure or vacancy of Key Staff. For planned departures/vacancies and leaves of absences extending 14 calendar days or more, the Contractor shall notify the State at the time it becomes known to the Contractor.
2.4.4-04 (existing)	The Contractor shall ensure that all proposed replacement Key Staff have comparable or greater skills, as reasonably determined by the State, for performing the activities as performed by the Staff being replaced.

2.5 MISCELLANEOUS

2.5.1 Harmony Clause and Labor Contracts

Consistent with the applicable collective bargaining Contract, the Contractor shall attempt to resolve any dispute it may have with labor organizations so that any dispute will not adversely affect the Contractor's performance of this Contract. The Contractor shall employ personnel who can work in harmony with State employees as well as other contractors.

2.5.2 State Ethics Training

The Contractor Staff shall complete the State's online Ethics Training Course and submit the certificate of completion within five (5) Business Days upon Contractor start date and every two (2) years thereafter to the State Project Director or designee.

2.5.3 Form 700

All Contractor's Staff, unless otherwise approved by the State, shall complete and submit within five (5) Business Days upon Contractor start date, and annually thereafter, the State's Statement of Economic Interests (Form 700) to the State Project Director or designee. Additional information about the Form 700 can be found at the link below:

<http://www.fppc.ca.gov/Form700.html>

The Contractor understands that the Contractor's Key Staff (defined for purposes of this Section as those individuals who fall within the definition of "consultant" pursuant to 2 CCR Section 18700.3(a)) performing work under this Agreement may be designated by the State as required to file a Form 700, Statement of Economic Interest with the State. If, during the term of this agreement, any Key Staff are added to work on this Agreement, such Staff must file the Form 700 with the State.

The Contractor understands that the Contractor's Key Staff performing work under this Agreement may be required to file a Form 700 Statement of Economic Interest with the State as follows:

1. Within five (5) Business Days of commencing work on the Contract;
2. Annually thereafter while remaining a consultant as defined in the regulations cited above (usually by April 1 of each subsequent year); and
3. Within 30 days of ceasing to be such a consultant to the State.

2.5.4 Acceptable Use Security Policy

The Contractor's Staff who are authorized to use State government owned or leased equipment or facilities shall read and sign the Acceptable Use Security Policy form.

2.5.5 Insurance Coverage Requirements

Prior to commencing performance under the Contract and during the term of the Contract, and including any optional extensions, the Contractor shall maintain in full force and effect, the insurance coverage described in this Section, with an insurance carrier approved to do business in the California.

2.5.5.1 Commercial General Insurance

The Contractor shall maintain Commercial General Liability Insurance with limits of not less than \$1,000,000 per occurrence and \$2,000,000 aggregate for bodily injury property damage combined. The policy shall include coverage for liabilities arising out of premises, operations, independent contractors, products, completed operations, personal and advertising injury, and liabilities assumed under this Contract. The insurance shall apply separately for each insured against whom claim is made or suit is brought subject to the Contractor's limit of liability. This requirement may be met through the use of blanket additional insured endorsements.

2.5.5.2 Motor Vehicle Liability Insurance

The Contractor shall maintain motor vehicle liability insurance with limits of not less than \$1,000,000 per accident. Such insurance shall cover liability arising out of a motor vehicle including owned, long-term hired, and non-owned motor vehicles.

2.5.5.3 Workers' Compensation Insurance

The Contractor shall maintain Worker's Compensation coverage for all employees who will engaged in the performance of this Contract, including special coverage extensions, where applicable. The policy shall have a coverage of not less than \$1,000,000. The Contractor shall provide or purchase worker's compensation coverage for Contractor's employees, as may be required under applicable law during the term of this Contract. A certificate of such insurance policy, or a certificate of self-insurance carried or maintained by the Contractor, shall be furnished to the State upon request. Should the Contractor fail to secure such coverage or fail to pay premiums, as may be required under applicable law, the State may deduct the amount of premiums and any penalties owing from the amounts payable to Contractor under this Contract and transmit the same to the appropriate State agency providing Worker's Compensation coverage. This provision does not waive any right to collect from Contractor amounts paid by the State.

The State shall not be responsible for payment of worker's compensation premiums or for any other claim or benefit for Contractor, or any Subcontractor or employee of Contractor, which might arise under the worker's compensation laws during performance of duties and services under this Contract. If the State determines at any time that worker's compensation payments are due and owing as a result of work performed under this Contract, those payments shall be made by the Contractor.

When work is performed on State owned or controlled property, the Worker's Compensation policy shall be endorsed with a waiver of subrogation in favor of the State.

2.5.5.4 Technology Professional Liability/Errors and Omissions

The Contractor shall maintain appropriate coverage to the Contractor's profession and work hereunder, on a claims-made form covering any damages caused by a negligent error, act, or omission with a limit of not less than \$5,000,000. Coverage shall be sufficiently broad to respond to the duties and obligations as is undertaken by the Contractor in this Agreement and shall include, but not be limited to, claims involving infringement of intellectual property, copyright, trademark, invasion of privacy violations, information theft, intentional and/or unintentional release of private information, extortion, and network security. The policy shall provide coverage for breach response costs, regulatory fines and penalties, and credit monitoring expenses, with limits sufficient to respond to these obligations.

The policy shall include, or be endorsed to include property damage liability coverage for damage to, alteration of, loss of, or destruction of electronic data and/or information "property" of the State in the care, custody, or control of the Contractor. If not covered under the Contractor's professional liability policy, such "property" coverage of the Contractor may be endorsed onto the Contractor's cyber liability policy as covered property in Section 2.5.5.5 CYBER LIABILITY INSURANCE:

If policies provide claims-made coverage:

- The retroactive date must be shown and must be before the Effective Date of the Agreement.
- Insurance must be maintained, and evidence of insurance must be provided, for at least five (5) years after completion of the Agreement or as otherwise agreed to in writing by the State in its sole discretion.
- If coverage is canceled or non-renewed, and not replaced with another claims-made policy form with a retroactive date prior to the Effective Date of the Agreement, the Contractor must purchase "extended reporting" coverage for a minimum of five (5) years

after completion of the Agreement or as otherwise agreed to in writing by the State in its sole discretion.

2.5.5.5 Cyber Liability Insurance

Contractor shall maintain Cyber Liability insurance with limits of not less than \$4,000,000 for each occurrence and an annual aggregate of \$8,000,000 covering claims involving privacy violations, information theft, damage or destruction of electronic information, intentional and/or unintentional release of State and or private information, alteration of electronic information, extortion and network security. The policy must name The State of California, its officers, agents, and employees as additional insured with respect to work performed under the contract. Claims involving privacy violations, information theft, damage or destruction of electronic information, intentional and/or unintentional release of State and or private information, alteration of electronic information, extortion and network security. The policy must name The State of California, its officers, agents, and employees as additional insured with respect to work performed under the contract.

If not covered under the Contractor's professional liability policy, such "property" coverage of the Contractor may be endorsed onto the Contractor's cyber liability policy as covered property as follows:

- ~~_____~~ Cyber liability coverage on a claims-made form with a limit of not less than \$85,000,000 covering damage to, alteration of, loss of, or destruction of electronic data and/or information "property" of the State that will be in the care, custody, or control of Contractor caused by a negligent error, act, or omission.

2.5.5.6 Professional Liability Fidelity Bond

The Contractor shall maintain Professional Liability Insurance or a Fidelity Bond, of not less than \$2,000,000 per claim and in annual aggregate, covering, among other matters, errors and omissions of Contractor in performing the Service.

2.5.5.7 Addition Coverage Requirements

The Contractor is responsible for any deductible or self-insured retention contained within their insurance program. Any required insurance contained in this Contract shall be primary, and not excess or contributory to any other insurance carried by the State. Coverage needs to be in force for the complete term of the Contract. If insurance expires during the term of the Contract, a new certificate must be received by the State at least ten (10) days prior to the expiration of this insurance. Any new insurance must still comply with the original terms of the Contract. Inadequate or lack of insurance does not negate the Contractor's obligations under this Contract.

2.5.5.8 Endorsements

All policies shall be endorsed to include the State of California, its officers, agents, employees as additional insured, but only with respect to work performed under this Contract. The additional insured endorsement must be provided. The State must be named as an additional insured to all policies. Any required endorsements requested by the State must be physically attached to all requested certificates of insurance and not substituted by referring to such coverage on the certificate of insurance. Any required endorsements requested by the State must be physically attached to all requested certificates of insurance and not substituted by referring to such coverage on the certificate of insurance.

2.5.5.9 Premiums

Premiums on all insurance policies shall be paid by the Contractor or its Subcontractors. Such insurance policies provided for the State pursuant to this Section, shall expressly provide therein that the State be named as additional insured, and that it shall not be revoked by the insurer until 30 days' notice of intended revocation thereof shall have first been given to the State by such insurer. Inadequate or lack of insurance does not negate the Contractor's obligations under this Contract.

2.5.5.10 Subcontractors

The Contractor shall require any and all of its Subcontractors to obtain and maintain identical policies of compensation insurance as described in this Section or be properly certified under applicable State law as self-insured. A certificate of such insurance policy carried shall be furnished to the State upon request. If Subcontractors performing the work under this Contract do not have insurance equivalent to the above, Contractor liability shall provide such coverage for the Subcontractor, except for coverage for error, mistake omissions, or malpractice, which shall be provided by the Subcontractor if such insurance is required by the State.

2.5.5.11 Notices

The Contractor shall provide to the State within five (5) Business Days a copy of any notice of Cancellation/Termination or Nonrenewal received by the Contractor for any of the required insurances. In the event the Contractor fails to keep in effect, always, the specified insurance coverage, the State may, in addition to any other remedies it may have, terminate this Contract upon the occurrence of such event, subject to the provisions of this Contract.

2.5.5.12 Certificates

The Contractor shall furnish to the State copies of certificates of all required insurance within 30 days of the Execution Date. Coverage needs to be in force for the complete term of the Contract. If insurance expires during the term of the Contract, a new certificate must be received by the State at least ten (10) days prior to the expiration of this insurance. Any new insurance must still comply with the original terms of the Contract.

2.5.6 Hybrid Work from Home /In-Office Work Conditions

Since the COVID Public Health Emergency, policies around work from home have become more common place within the State of California. Hybrid forms of work from home will be included under this contract.

The Contractor shall work with the State as part of the onboarding planning and processing to determine which employees will be required to work at the CalHEERS office(s) or if they will be required to participate in a hybrid work from home / work at office model.

SOW Section 3

Project Management Requirements

SOW SECTION 3 – PROJECT MANAGEMENT REQUIREMENTS

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3 PROJECT MANAGEMENT REQUIREMENTS

The Contractor, at the direction of the State, will provide Project Management activities to manage and maintain the CalHEERS System. The following project management requirements must be integrated into the existing project management infrastructure.

Please note that this section of the statement of work (SOW) references multiple sets of standards, which are subject to change over time. Please refer to Appendix A-2, SPECIAL PROVISIONS, Section 7.7, UPDATES TO STANDARDS, REGULATIONS, AND CODES, regarding project processes around standard updates.

3.1 PROJECT MANAGEMENT

Project management is an integral tool used by the State to proactively keep abreast of the fast-paced challenges during the SDMO life cycle. The framework in which the CalHEERS Project Office and the Contractor will manage the day-to-day activities are outlined in the sections below.

3.1.1 Project Management Plan

Table 3-1: Project Management Plan (CD-3.1-1)

Req #	SOW Requirement
3.1.1-01 (modified)	The Contractor shall adopt, enhance, deliver, and maintain the CD-3.1-1 - Project Management Plan, which includes but is not limited to: 1. INTRODUCTION 1.1 Purpose 1.2 SOW Section Overview and Leading Plans 1.2.1 SOW 2 Contract Personnel Requirements (CD-3.1-1 PM Plan) 1.2.2 SOW 3 Project Management Requirements (CD-3.1-1 PM Plan) 1.2.3 SOW 4 System Change & Enhancements (CD-4.1-1 SDLC Plan) 1.2.4 SOW 5 Program Support Requirements (CD-5.1-1 Program Support Plan) 1.2.5 SOW 6 Operations Requirements (CD-6.1-1 Ops Plan) 1.2.6 SOW 7 Transition (CD-7.1-1 Transition-In & Transformation Master Plan and CD-7.3-2 Transition-Out Plan - Final Year Update) 1.3 High Level Deliverable Hierarchy Tree 1.4 List of Reference Documents 1.5 Audience 2. SUMMARY 2.1 Scope 2.2 Update Frequency 3. APPROACH 3.1 PMP Approach and Methodology 3.2 Project Management Overview 3.3 Governance and Escalation Process 3.4 Project Management Deliverables 3.4.1 Hierarchy Diagram for Project Management 3.4.2 Project Management Related Deliverable 4. ASSUMPTIONS, CONSTRAINTS AND RISKS 4.1 Assumptions 4.2 Constraints 4.3 Risks 5. REQUIREMENTS 6. ROLES AND RESPONSIBILITIES 6.1 Project Management Roles & Responsibilities (Contractor and State Teams)

Req #	SOW Requirement
	6.2 Independent Verification & Validation (IV&V) Roles and Responsibilities 7. SCHEDULE MANAGEMENT 8. COST MANAGEMENT 9. STAFFING MANAGEMENT 9.1 Contractor Organizational Chart 9.2 Contractor Key Staff Roles and Responsibilities 9.3 CalHEERS Project State Team Organizational Chart 9.4 Contractor Org Chart to State Org Chart Cross Over 9.4.1 Responsible, Accountable, Consulted, Informed (RACI) Chart 10. RISK, ISSUE, ACTION ITEM AND DECISION ITEM MANAGEMENT 10.1 Risk and Issue Management 10.1.1 Risk and Issue Escalation Process 10.2 Action Items and Decision Items Management 11. COMMUNICATION MANAGEMENT 12. DOCUMENT MANAGEMENT 13. QUALITY MANAGEMENT 13.1 Process Assurance Plan 13.2 Verification and Validation (V&V) Plan 13.3 Process Improvement Plan 13.4 Metrics Plan 13.5 Project Management Maturity (PMM) Plan 13.6 Capability Maturity Model Integration (CMMI) 14. SOW REQUIREMENTS MANAGEMENT 15. CONTRACTOR/SUBCONTRACTOR MANAGEMENT 15.1 Communication and Onboarding 15.2 Oversight 15.3 Quality 15.4 Performance 15.5 Subcontractor Overview 15.6 Corrective Action Plan 16. CONTRACT CHANGE MANAGEMENT 17. ENTERPRISE TOOLS 17.1 Enterprise Tools Management 18. PROJECT PROCESS GUIDE/INVENTORY 19. PROJECT WORKSITE MAINTENANCE 20. TRANSITION-OUT AND CONTRACT CLOSE OUT 21. GLOSSARY AND ACRONYMS 21.1 New Acronyms and Terms APPENDIX 1: SOW TO DELIVERABLE TRACEABILITY CHECKLIST APPENDIX 2: DELIVERABLE COMPLIANCE AND VALIDATION CHECKLIST APPENDIX 3: ASSOCIATED ARTIFACTS APPENDIX 4: PROJECT MANAGEMENT INSTITUTE (PMI ®) STANDARDS MAPPING APPENDIX 5: IEEE STD 12207-2017 STANDARDS MAPPING APPENDIX 6: I ISO/IEC/IEEE STANDARD 16326-2019 STANDARDS MAPPING APPENDIX 7: CONTRACTOR KEY STAFF APPENDIX 8: CALHEERS STATE KEY STAFF APPENDIX 9: ADDITIONAL CALHEERS MEMBERS – CWDA AND SAWS LIAISONS
3.1.1-02 (new)	The Contractor shall only alter or modify this Deliverable's structure or content with the approval of the State Project Director or designee.

Req #	SOW Requirement
3.1.1-03 (existing)	The Contractor shall develop and maintain the CalHEERS Project Management Plan in compliance with the ISO/IEC/IEEE 16326:2009 - Systems and Software Engineering—Life Cycle Processes—Project Management (Section 6.1—Project planning process), ISO/IEC 12207, IEEE Std 12207-2008—Systems and Software Engineering—Software Life Cycle Processes (Section 6.3—Project Processes).
3.1.1-04 (modified)	The Contractor shall also develop and maintain the CalHEERS Project Management Plan in accordance with the State-approved version of the Project Management Institute (PMI®), A Guide to the Project Management Body of Knowledge (PMBOK® Guide), Develop Project Management Plan Section. Refer to Appendix A-2, SPECIAL PROVISIONS, 7.7, <u>UPDATES TO STANDARDS, REGULATIONS, AND CODES.</u>
3.1.1-05 (existing)	The Contractor shall provide and employ a Project Management methodology consistent with the Project Management Institute (PMI) Project Management Body of Knowledge (PMBOK®).
3.1.1-06 (existing)	The Contractor shall update and maintain the CalHEERS SDMO Project Management Plan to include descriptions of the Contractor's processes and activities for executing, monitoring, controlling, project plan maintenance, and Transition-Out/Contract Closeout Services.
3.1.1-07 (existing)	The Contractor shall develop and maintain the CalHEERS SDMO Project Management Plan to include descriptions of the methods, tools, techniques, and assumptions used to estimate the Contract costs and associated confidence levels for planned activities as well as changes to scope.
3.1.1-08 (existing)	The Contractor shall develop and maintain the CalHEERS SDMO Project Management Plan to include a plan for business processes and System migration at transition, Contract termination or at the end of the Contract.
3.1.1-09 (existing)	The Contractor shall develop and maintain the CalHEERS SDMO Project Management Plan to include a plan that ensures the successful Closeout of the Contract by the Contractor, including all hardware, software, source code, data, services, staffing, deliverables and archived project materials.
3.1.1-10 (existing)	The Contractor shall develop and maintain the CalHEERS SDMO Project Management Plan to include tasks for the preparation of a final report. The final report includes but is not limited to lessons learned and an analysis of objectives achieved.
3.1.1-11 (existing)	The Contractor shall develop and maintain the CalHEERS SDMO Project Management Plan to include activities for conducting debriefings with the State in the event of Contract termination or Contract expiration.
3.1.1-12 (modified)	The Contractor shall attach to the Project Management Plan the following appendices: Appendix 1—SOW to Deliverable Traceability Checklist Description: A table that identifies the SOW requirements for this Deliverable, as specified within SOW Section 8, DELIVERABLES, and includes but is not limited to: 1. SOW Requirement ID # 2. SOW Requirement Text 3. Requirement Traceability (Define traceability of the requirements to the Deliverable) 4. Requirement Fulfillment (Define how the SOW requirements have been fulfilled by this Deliverable) Appendix 2—Deliverable Compliance and Validation Checklist Description: A QA Checklist that includes, but is not limited to: 1. Deliverable Section Number and Title 2. Deliverable Requirement Statement(s) 3. Requirement Completion (How the Contractor will comply with or has complied with the requirement statements within the plan) 4. Validation Method (The method the Contractor used to validate Deliverable)

Req #	SOW Requirement
	compliance) 5. The Contractor's QA Manager sign-off on compliance Appendix 3—Associated Artifacts Description: An extract from the Project Artifact Inventory List of artifacts associated with this Deliverable, and will include but is not limited to the following examples: 1. Artifact Name 2. Associated Parent DEL 3. State Approver 4. SI Point of Contact 5. Review Frequency 6. Submission Frequency 7. Artifact File Format 8. Artifact Location (e.g., SharePoint breadcrumb) 9. Link to artifact

3.1.2 Project Management Execution

Table 3-2: Project Management Execution

Req #	SOW Requirement
3.1.2-01 (new)	The Contractor shall staff, manage, lead and execute Project Management on the CalHEERS as defined in this Statement of Work and in accordance with the CD-3.1-1 – Project Management Plan.
3.1.2-02 (new)	The Contractor shall collaborate with the State to develop and maintain any new Project Artifacts necessary to support this section. New artifacts shall be added to the Project Artifacts Repository and managed in accordance with the Project Artifact process.
3.1.2-03 (existing)	Upon Contract award, the Contractor shall conduct a review of all existing project management plans.
3.1.2-04 (modified)	The Contractor Project Management Office (PMO) shall align with the Office of Technology & Solutions Integration (OTSI) PMO structure and conforms to the OTSI best practices for the development of large-scale information technology (IT) systems.
3.1.2-05 (existing)	The Contractor PMO shall be responsible for all required CalHEERS Project Management functions, including the planning, scheduling, administering, controlling, tracking, and reporting of all Project activities during the term of the Contract in coordination with the State's PMO and State Fiscal & Administrative teams.
3.1.2-06 (existing)	The Contractor shall manage and execute the CalHEERS Project in accordance with the State approved Project Management Plans.
3.1.2-07 (existing)	The Contractor shall develop and submit a written Project Management Update and Rollout Schedule to modify and update plans before the end of the Transition-In period.

3.1.3 Contract Closeout

The State utilizes Contract Closeout to ensure that the Contractor identifies all the outstanding activities required to fully close-out Contract obligations at the end of the Contract. It is important that the Contractor and the State work collaboratively to establish the remaining activities for this final stage of the Contract. The following requirements identify the expectations for Contract Closeout.

Note: Contract Closeout is not to be confused with Transition Out, which occurs concurrently with Contract Closeout, and is discussed in SOW Section 7.3, TRANSITION-OUT.

Table 3-3: Contract Closeout Plan (CD-3.1-2)

Req #	SOW Requirement
3.1.3-01 (modified)	The Contractor shall develop, deliver, and implement a CalHEERS Contract Closeout Plan to that includes but is not limited to: 1. The overall strategy for closing out the Contract. 2. The incorporation of requirements spelled out in Section 3.2, SCHEDULE MANAGEMENT. 3. The overall strategy and approach to complete other schedule-related tasks (related to Closeout) identified in any of the other work plans developed by the Contractor under this Contract. 4. List of deficiency items (logged by both the State and Contractor) from the Deficiency & Issue tracking systems that will be updated by the Contractor as condition for completion for Contract Closeout. 5. List of outstanding action items or tasks from meeting minutes or other Management tracking systems. 6. List of any other items deemed relevant to the clarification of expectations for Contractor Closeout. 7. The overall structure of the plan shall address, but not be limited to, the following: a. Contract Closeout Planning b. SOW 3, PROJECT MANAGEMENT PROCESSES c. SOW 4, SYSTEM CHANGE & ENHANCEMENT PROCESS d. SOW 5, PROGRAM SUPPORT PROCESSES e. SOW 6, OPERATION PROCESSES f. SOW 7, TRANSITION-OUT PROCESSES
3.1.3-02 (new)	The Contractor shall only alter or modify this Deliverable's structure or content with the approval of the State Project Director or designee.
3.1.3-03 (modified)	The Contractor shall attach to the Contract Closeout Plan the following appendices: Appendix 1—SOW to Deliverable Traceability Checklist Description: A table that identifies the SOW requirements for this Deliverable, as specified within SOW Section 8, DELIVERABLES, and includes but is not limited to: 1. SOW Requirement ID # 2. SOW Requirement Text 3. Requirement Traceability (Define traceability of the requirements to the Deliverable) 4. Requirement Fulfillment (Define how the SOW requirements have been fulfilled by this Deliverable) Appendix 2—Deliverable Compliance and Validation Checklist Description: A QA Checklist that includes, but is not limited to: 1. Deliverable Section Number and Title 2. Deliverable Requirement Statement(s) 3. Requirement Completion (How the Contractor will comply with or has complied with the requirement statements within the plan) 4. Validation Method (The method the Contractor used to validate Deliverable compliance) 5. The Contractor's QA Manager sign-off on compliance Appendix 3—Associated Artifacts Description: An extract from the Project Artifact Inventory List of artifacts associated with this Deliverable, and will include but is not limited to the following examples: 1. Artifact Name 2. Associated Parent DEL 3. State Approver

Req #	SOW Requirement
	4. SI Point of Contact 5. Review Frequency 6. Submission Frequency 7. Artifact File Format 8. Artifact Location (e.g., SharePoint breadcrumb) 9. Link to artifact
3.1.3-04 (new)	The State identifies and associates the following artifacts to the Contract Closeout Plan. The Contractor shall adopt, update, maintain, and deliver these artifacts in accordance with Appendix 3 of this deliverable including, but not limited to: • Contract Closeout Work Plan
3.1.3-05 (new)	The Contractor shall adopt and maintain all Project Artifacts that are associated with this Deliverable in the Project Artifact Inventory and manage them in accordance with the Project Artifact process.

3.1.4 Contract Closeout Execution

Table 3-4: Contract Closeout Execution

Req #	SOW Requirement
3.1.4-01 (new)	The Contractor shall staff, manage, lead and execute Contract Closeout on the CalHEERS as defined in this Statement of Work and in accordance with the CD-3.1-2 – Contract Closeout Plan.
3.1.4-02 (existing)	The Contractor shall resolve all Contract Closeout expectations which includes, but is not limited to the following: 1. The resolution of all documented Contractor responsible deficiencies associated with the present and any prior deliverables as stipulated through the approved deficiency process. 2. Successful completion of all other work breakdown structure elements, tasks, and deliverables for this milestone as specified in the Contract Closeout work plan schedule. 3. The successful completion of all other contractual obligations that were identified in the Closeout Plan.
3.1.4-03 (new)	The Contractor shall collaborate with the State to develop and maintain any new Project Artifacts necessary to support this section. New artifacts shall be added to the Project Artifacts Repository and managed in accordance with the Project Artifact process.

3.2 SCHEDULE MANAGEMENT

Schedule management is critical to the successful completion of a project. The State expects the Contractor to transparently develop and manage the schedule, and to consistently meet Project milestones.

Schedule management includes but is not limited to:

- Approach, processes, and procedures to manage the schedule
- Schedule Management Plan
- Development and management of detailed Contractor project work plans
- Transparent estimating methods
- Master Work Plan
- Contractor schedule processing infrastructure
- Schedule processing
- Schedule change control

3.2.1 Schedule Management Plan

The Schedule Management Plan documents the approach, processes, and procedures for schedule management activities for the Transition Phase, and the SDMO Phase of the Contract. The Schedule Management Plan aids the State and Contractor to ensure the timely execution and delivery of project activities. The following requirements identify the expectations related to the Schedule Management Plan.

Table 3-5: Schedule Management Plan (CD-3.2-1)

Req #	SOW Requirement
3.2.1-01 (modified)	The Contractor shall adopt, enhance, deliver, and maintain a CalHEERS Schedule Management Plan, which includes but is not limited to: 1. INTRODUCTION 1.1 Purpose 1.2 List of Reference Documents 1.3 Audience 2. SUMMARY 2.1 Scope 3. APPROACH 3.1 Schedule Management Approach 3.2 Deliverable Maintenance and Revisions Approach 4. ASSUMPTIONS, CONSTRAINTS AND RISKS 4.1 Assumptions 4.2 Constraints 4.3 Risks 5. REQUIREMENTS 6. ROLES AND RESPONSIBILITIES 7. SCHEDULE MANAGEMENT TOOLS 7.1 Schedule Tools 7.2 Solution Architecture and Processing Infrastructure 7.2.1 Publishing Project Work Plans 7.2.2 Retaining Project Work Plans 7.2.3 Backup/Recover 7.2.4 Technical Support 7.3 Tools Specifications 7.3.1 Project Field Tracking List 7.3.2 Project Reports, Views, and Meeting 7.3.3 Task usage View 7.3.4 MS Project Online Web API Reporting 7.3.5 MS Project Professional Application 8. SCHEDULE MANAGEMENT CONCEPTS AND STANDARDS 8.1 Develop and Baseline 8.1.1 Milestone Definitions 8.1.2 Project Calendar 8.1.3 Work Breakdown Structure (WBS) 8.1.4 Baseline Log 8.2 Track Progress and Maintain 8.2.1 Percent Complete Standard Definitions 8.3 Refine and Revise (Rolling Wave) 8.4 Re-plan and Re-baseline 8.5 Task Standards and Enterprise Fields 8.6 Resource Management Standards 8.6.1 Resource Management Standards 8.6.2 Enterprise Resource Pool (ERP) 8.6.2.1 Overview

Req #	SOW Requirement
	8.6.2.2 ERP Fields 8.6.2.3 Roll-Ons 8.6.2.4 Roll-Offs 8.6.3 Resource Balancing and Resource Reporting 8.7 Critical Path and Critical Resource Path Analysis 8.8 Quality Assurance 8.8 Schedule Metrics 8.10 Schedule Meetings Overview 8.11 Schedule Views and Reports Overview 8.12 Schedule Management Documentation 9. CALHEERS MASTER WORK PLAN (MWP) 9.1 MWP Overview and Scope 9.2 MWP Development Methodology and Approach 9.3 MWP Schedule Maintenance 9.4 MWP Schedule Meetings 9.5 MWP Schedule Views and Reports 9.5.1 Master Work Plan Key Milestone Report 9.5.2 Enterprise Resource Balancing View 10. SYSTEM DEVELOPMENT, MAINTENANCE AND OPERATIONS (SDMO) WORK PLAN 10.1 SDMO Work Plan Overview and Scope 10.2 SDMO Work Plan Development Methodology and Approach 10.2.1 SDOO Deliverable Tracker 10.2.2 SDMO Work Plan WBS 10.2.3 Baseline New Tasks 10.3 SDMO Schedule Maintenance 10.4 SDMO Schedule Meetings 10.4.1 SDMO Work Plan Task Update Meetings 10.4.2 SDMO Work Plan Weekly Review Meeting 10.4.3 Monthly Plan 60-Day Look Ahead Meeting 10.5 SDMO Schedule Views and Reports 10.5.1 Director's Report Gantt View 10.5.2 SDMO Deliverable Burn-Up Chart 10.5.3 The Deliverables Time Frame 10.5.4 SDMO Annual Review Burn-Up Chart 11. SOFTWARE RELEASE WORK PLANS (SRWP) 11.1 SRWP Overview and Scope 11.2 SRWP Development Methodology and Approach 11.2.1 Feature Release 11.2.2 Priority release 11.2.3 Data Warehouse Release 11.2.4 SRWP WBS 11.2.5 CR Basis of Estimate (CD-4.2-2) 11.3 SRWP Schedule Maintenance 11.3.1 Integrated Change Request Schedule (ICRS) 11.3.2 CRs Moving Between Releases 11.3.3 SRWP Weekly Review Meeting 11.4 SRWP Schedule Views and Reports 12. NON-RELEASE WORK PLAN 12.1 Non-Release Work Plan Overview and Scope 12.2 Non-Release Work Plan Development Methodology and Approach 12.2.1 Non-Release Work Plan Reasonability Test 12.3 Non-Release Schedule Maintenance 12.4 Non-Release Schedule Meetings

Req #	SOW Requirement
	12.5 Non-Release Schedule Views and Reports 13. TECHNOLOGY REFRESH WORK PLAN (TRWP) 13.1 TRWP Overview and Scope 13.2 TRWP Plan Development Methodology and Approach 13.3 TRWP Schedule Maintenance 13.4 TRWP Schedule Meetings 13.5 TRWP Schedule Views and Reports 14. PLAN CHOICE AND ASSISTER PORTAL WORK PLAN (PCAP) 14.1 PCAP Overview and Scope 14.2 PCAP Plan Development Methodology and Approach 14.3 PCAP Schedule Maintenance 14.4 PCAP Schedule Meetings 14.5 PCAP Schedule Views and Reports 15. FAMILY PLANNING, ACCESS, CARE, & TREATMENT (FPACT) 15.1 FPACT Overview and Scope 15.2 FPACT Plan Development Methodology and Approach 15.3 FPACT Schedule Maintenance 15.4 FPACT Schedule Meetings 15.5 FPACT Schedule Views and Reports 16. TRANSITION WORK PLANS 16.1 Transition-In Work Plan (TIWP) 16.2 Transition-Out Work Plan (TOWP) 17. SPECIAL PROJECT WORK PLANS 18. CONTRACT CLOSEOUT WORK PLAN 19. SCHEDULE CHANGE CONTROL 19.1 Schedule Change Control Overview 19.2 Schedule Change Control Process (SCCP) 19.2.1 What Constitutes a Schedule Change Request? 19.2.2 SCCP Roles and Responsibilities 19.2.3 Schedule Change Request Initiation 19.2.3.1 Schedule Change Request Form 19.2.4 Schedule Change Request Impact Analysis 19.2.5 Schedule Change Control Board (SCCB) 19.2.6 Schedule Change Request Implementation 20. GLOSSARY AND ACRONYMS 20.1 New Acronyms and Terms APPENDIX 1: SOW TO DELIVERABLE TRACEABILITY CHECKLIST APPENDIX 2: DELIVERABLE COMPLIANCE AND VALIDATION CHECKLIST APPENDIX 3: ASSOCIATED ARTIFACTS
3.2.1-02 (new)	The Contractor shall only alter or modify this Deliverable's structure or content with the approval of the State Project Director or designee.
3.2.1-03 (existing)	The Contractor shall develop the Schedule Management Plan by adding Contractor specific details into the Schedule Management Plan Template provided by the State.
3.2.1-04 (existing)	The Contractor shall develop the finalized Schedule Management Plan from the template provided by the State. The Contractor shall not add or modify in the approved Schedule Management Plan, any section numbers or content that was included in the template without pre-approval from the State Project Director or designee.
3.2.1-05 (existing)	The Contractor shall execute and maintain the Schedule Management Plan for both the Transition Phase and M&O Phase of the Contract, including Transition-Out.
3.2.1-06 (existing)	The Contractor shall update the approved Schedule Management Plan upon the direction of the State Project Director or designee, or as required to implement project work plan modifications under direction of the Change Control Board (CCB).
3.2.1-07 (existing)	The Contractor shall submit the revised Schedule Management Plan to the State Project Director or designee for review and approval in accordance with the deliverable review

Req #	SOW Requirement
	processes defined within the Document Management Plan.
3.2.1-08 (existing)	If during the course of the Contract, the Contractor identifies the need to change schedule management processes or procedures, the Contractor shall: 1. Submit to the State Project Director or designee a request to make changes to the schedule management processes or procedures, including a description of the required changes. 2. Update the Schedule Management Plan with approved schedule management process and procedure changes. 3. Submit the updated Schedule Management Plan to the State Project Director or designee for review and approval in accordance with the deliverable review processes defined within the Document Management Plan.
3.2.1-09 (New)	The State identifies and associates the following artifacts to the Schedule Management Plan. The Contractor shall adopt, update, maintain, and deliver these artifacts in accordance with Appendix 3 of this deliverable including, but not limited to: • SDMO Work Plan (~~D-3.2-3~~) • Software Release Work Plan (~~D-3.2-4~~) • Master Work Plan (~~D-3.2-7~~) • Schedule Progress Analysis Report (~~D-3.2-8~~) • Master Milestone Schedule Summary (~~D-3.2-2~~) • Schedule Change Request Form (~~D-3.2-9~~) • Master Milestone View Process Guide for Project • Master Milestone View Process Guide for Project Center • Master Work Plan in MS Project Procedure • Master Work Plan in Project Center Procedure • Master Work Plan Schedule Look Ahead Report Procedure • Resource Analysis Procedure • Other Work Plans at the request of the State
3.2.1-10 (New)	The Contractor shall adopt and maintain all Project Artifacts that are associated with this Deliverable in the Project Artifact Inventory and managed in accordance with the Project Artifact process.
3.2.1-11 (New)	The Contractor shall incorporate a new subsection - Schedule Basis of Estimate (BOE) into the Schedule management Plan, addressing requirements 3.2.1-11 - 3.2.1-17 (below), which were previously part of another Deliverable (CD-4.2-2 – CR Basis of Estimate Deliverable).
3.2.1-12 (modified)	The Contractor shall develop, and incorporate as part of the Schedule Management Plan, deliver, and maintain a Schedule Basis of Estimate, which must include a description of the rational for estimating schedule, effort (onshore and offshore breakout), and cost for the activities and tasks defined within the Software Release work plans developed by the Contractor.
3.2.1-13 (modified)	The Contractor shall develop and maintain the Basis of Estimate content in accordance with the State approved version of the Project Management Institute (PMI ®), A Guide to the Project Management Body of Knowledge (PMBOK ® Guide), pertaining to Project Schedule Management. Refer to Appendix A-2, SPECIAL PROVISIONS, Section 7.7, UPDATES TO STANDARDS, REGULATIONS, AND CODES.
3.2.1-14 (modified)	The Contractor shall incorporate the Schedule Basis of Estimate at the Change Request (CR) level and at the Release level for each change and each release.
3.2.1-15 (modified)	The Contractor shall incorporate the Schedule Basis of Estimate into the Contractor's estimation tool(s).
3.2.1-16 (modified)	The Contractor shall provide the State with access to the Contractor's estimation tool(s), supporting schedule development, data and analytical reports.
3.2.1-17 (modified)	The Contractor shall submit the Schedule Basis of Estimate content, within the Schedule Management Plan, to the State Project Director or designee in accordance with the

Req #	SOW Requirement
	approved Transition Plan, as part of every change request and release, or as requested by the State Project Director or designee.
3.2.1-18 (modified)	The Contractor shall update the Schedule Management Plan the following appendices: Appendix 1—SOW to Deliverable Traceability Checklist Description: A table that identifies the SOW requirements for this Deliverable, as specified within SOW Section 8, DELIVERABLES, and includes but is not limited to: 1. SOW Requirement ID # 2. SOW Requirement Text 3. Requirement Traceability (Define traceability of the requirements to the Deliverable) 4. Requirement Fulfillment (Define how the SOW requirements have been fulfilled by this Deliverable) Appendix 2—Deliverable Compliance and Validation Checklist Description: A QA Checklist that includes, but is not limited to: 1. Deliverable Section Number and Title 2. Deliverable Requirement Statement(s) 3. Requirement Completion (How the Contractor will comply with or has complied with the requirement statements within the plan) 4. Validation Method (The method the Contractor used to validate Deliverable compliance) 5. The Contractor's QA Manager sign-off on compliance Appendix 3—Associated Artifacts Description: An extract from the Project Artifact Inventory List of artifacts associated with this Deliverable, and will include but is not limited to the following examples: 1. Artifact Name 2. Associated Parent DEL 3. State Approver 4. SI Point of Contact 5. Review Frequency 6. Submission Frequency 7. Artifact File Format 8. Artifact Location

3.2.2 Schedule Management Execution

Schedule Management uses the approach, processes, and procedures in the Schedule Management Plan to plan, supervise, coordinate, and track the work of project resources in accomplishing the goals, objectives, and milestones of the project. CalHEERS Project Management uses the schedule to monitor the project status at various levels and helps to make management-level decisions regarding the priority, importance, focus, and sequencing of short- and long-term project activities.

Table 3-6: Schedule Management Execution

Req #	SOW Requirement
3.2.2-01 (new)	The Contractor shall staff, manage, lead and execute Schedule Management on the CalHEERS as defined in this Statement of Work and in accordance with the CD-3.2-1 – Schedule Management Plan.

Req #	SOW Requirement
3.2.2-02 (New)	The Contractor shall collaborate with the State to develop and maintain any new Project Artifacts necessary to support this section. New artifacts shall be added to the Project Artifacts Repository and managed in accordance with the Project Artifact process.
3.2.2-03 (existing)	The Contractor shall perform all scheduling responsibilities assigned to the Contractor's Staff in the approved Schedule Management Plan, Roles and Responsibilities section, including but not limited to: 1. Providing scheduling leadership for the CalHEERS Project Office. 2. Developing and maintaining project work plans assigned to the Contractor (Contractor Project work plans). 3. Consolidating and integrating into a weekly Master work plan, all project work plans selected by the State including, but not limited to, Contractor, incumbent Contractor and State work plans. 4. Performing weekly schedule processing from the Master work plan and all project work plans included in the Master work plan.
3.2.2-04 (existing)	The Contractor shall ensure that all scheduling products, processes and activities provided by or performed by the Contractor for CalHEERS are in accordance with the approved Schedule Management Plan.
3.2.2-05 (existing)	The Contractor shall conduct a weekly work plan review meeting with the CalHEERS team. Attendees may include but not be limited to the CalHEERS PMO, Covered California (CovCA), Department of Health Care Services (DHCS), quality assurance (QA), Independent Verification and Validation (IV&V) and Program oversight staff.
3.2.2-06 (existing)	For the life of the Contract, the Contractor shall produce and submit to the State Project Director or designee, updated versions of the Master Milestone Schedule Summary when Master Milestone Schedule milestones are completed or when project work plan baselines are added or changed.
3.2.2-07 (existing)	The Contractor shall provide the Master Work Plan and the most current versions of the project work plans included in the Master Work Plan, to the State Project Director or designee each week as described in the approved Schedule Management Plan, Schedule Maintenance Process. All work plans shall be submitted in a Microsoft Project format and in the same Microsoft Project version used by the State. The Microsoft Project files must include progress to date for all tasks, subtasks and resource assignments.
3.2.2-08 (existing)	The Contractor shall clearly convey Schedule and work plan information to a diverse group of management stakeholders as well as more detailed information to QA, IV&V and oversight consultants.
3.2.2-09 (existing)	The Contractor shall develop and maintain all Contractor project work plans using Microsoft Project® 2010 or later version, that are identified in SOW Section 3.2.1, SCHEDULE MANAGEMENT PLAN, Work Plan Structure, and in accordance with the project work plan timeframes in Create Work Plans.
3.2.2-10 (existing)	The Contractor shall develop the project work plans to be a direct representation of the entire work and product scope defined in this Appendix A-4, STATEMENT OF WORK.
3.2.2-11 (existing)	The Contractor shall develop and maintain project work plans based on the following sections of the approved Schedule Management Plan: 1. Work Plan Structure 2. Work Breakdown Structure Outline Structure 3. Logical Work Plan Structure 4. Define Project Resource Structure and Build Global Resource Pool

Req #	SOW Requirement
3.2.2-12 (modified)	The Contractor shall develop and maintain project work plans at a level of detail in accordance with the approved Schedule Management Plan, Schedule Development Process, that includes, but is not limited to the following: 1. Summary tasks, tasks, and subtasks with clear and meaningful task names 2. Tasks or subtasks for Contractor development of each Contract Deliverable 3. Tasks or subtasks for State review of each Contract Deliverable 4. Tasks or subtasks for Contractor revision of each Contract Deliverable after State review of each Contract Deliverable 5. State review of each Contract Deliverable after Contractor revision of each Contract Deliverable 6. State approval of each Contract Deliverable 7. Predecessor and successor dependencies for tasks without subtasks 8. Predecessor and successor dependencies for subtasks 9. Resource assignments for tasks without subtasks 10. Resource assignments for subtasks 11. Estimated hours and durations for tasks without subtasks 12. Estimated hours and durations for subtasks 13. Key M&O Phase milestones including Transition milestones 14. Key software release milestones 15. Custom task fields and custom resource fields as specified in the approved Schedule Management Plan.
3.2.2-13 (modified)	The Contractor shall develop the project work plans in accordance with the sequence and timeframes specified in the approved Schedule Management Plan, that includes but is not limited to: 1. The Contractor's review of requirements and specifications in the RFP, Contract, and Appendix A-4, STATEMENT OF WORK. 2. The Contractor's development of work plan templates with Work Breakdown Structure (WBS) Outline Structure level 1 summary tasks (subproject), WBS Outline Structure level 2 summary tasks (milestone) and WBS Outline Structure level 3 summary tasks (Deliverable). 3. The Contractor's submission of work plan templates to the State Project Director or designee for review and approval. 4. The Contractor's finalization of all applicable project work plans by adding the following to approved work plan templates: a. WBS Outline Structure level 4 summary tasks (activity) b. WBS Outline Structure level 5 tasks without subtasks (task) c. Optional WBS Outline Structure level 5 summary tasks with subordinate WBS Outline Structure level 6 subtasks (subtask) 5. The Contractor's submission of finalized work plans to the State Project Director or designee for review and approval. 6. The Contractor's baselining of approved project work plans developed by the Contractor.
3.2.2-14 (modified)	The Contractor shall develop the project work plans that include tasks, summary tasks and activities. In addition, the project plans must specify task start and completion dates that are consistent with high level milestones. This content includes but is not limited to, the following project plans: 1. CalHEERS Project Management Plan 2. Document Management Plan 3. Staffing Management Plan 4. Risk and Issue Management Plan 5. Schedule Management Plan 6. CAP (if executed)

Req #	SOW Requirement
	7. Operations Plan 8. Customer Service Plan 9. Program Support Plan 10. Project Maintenance Plan 11. Capacity Management Plan 12. System Security Plan 13. Technology Recovery Plan 14. Change Management Plan 15. Configuration Management Plan 16. Release Management Plan 17. Release Back-Out Plan (if executed) 18. Requirements Management Plan 19. Test and Evaluation Master Plan 20. Installation Verification Test Plan 21. Communication Management Plan 22. Quality Management Plan 23. SDLC Plan 24. Organization and Business Change Management Plan 25. Training Plan 26. Transition-Out Plan 27. Contract Closeout Plan
3.2.2-15 (existing)	The Contractor shall develop and maintain project work plans in accordance with the instructions, best practices, guidelines and standards specified in the following sections of the approved Schedule Management Plan: 1. Define Project Resource Structure and Build Global Resource Pool 2. Create and Integrate Work Plans and Generate Schedule
3.2.2-16 (existing)	The Contractor shall develop project work plans that identify deliverables, activities, and tasks, including expected durations and completion dates, which are expected to be completed by the Contractor, State, and county staff in order to meet the Project Schedule and accomplish the Project milestones.
3.2.2-17 (existing)	The Contractor shall develop project work plans that contain tasks without subtasks and/or subtasks, that have appropriate Contractor, State, county and incumbent Contractor resource assignments and estimated hours. Near term tasks without subtasks (scheduled to start within 120 calendar days) and near-term subtasks (scheduled to start within 120 calendar days) shall have actual resource names assigned. Long term tasks without subtasks (scheduled to start after 120 calendar days) and long-term subtasks (scheduled to start after 120 calendar days) may have assigned generic resource titles i.e., a role, classification or vacant position) rather than actual resource names.
3.2.2-18 (existing)	The Contractor shall ensure that durations of near-term tasks without subtasks and near-term subtasks do not exceed 20 Business Days without prior approval of the State Project Director or designee.
3.2.2-19 (existing)	The Contractor shall ensure that near term tasks without subtasks, and near-term subtasks are resource leveled with a maximum of 50 hours of assigned work per week for Contractor Staff and 35 hours per week maximum for State, county and incumbent Contractor Staff.
3.2.2-20 (existing)	The Contractor shall ensure that tasks without subtasks and subtasks, which are assigned to Contractor's Staff in the Contractor project work plans, shall be started and completed according to the scheduled start and finish dates of those tasks and subtasks.

Req #	SOW Requirement
3.2.2-21 (modified)	All project work plans developed by the Contractor shall be: 1. Maintained and updated by the Contractor during the project work plan timeframes specified in the approved Schedule Management Plan. 2. Maintained and updated in accordance with the approved Schedule Management Plan.
3.2.2-22 (existing)	On Monday and Tuesday of each week, the Contractor shall: 1. Analyze all “estimated hours to complete” items submitted by Contractor Staff in the previous week’s task lists. 2. Update the “remaining work” fields of tasks without subtasks, and subtasks according to the analysis of the “estimated hours to complete” items submitted by Contractor Staff.
3.2.2-23 (existing)	The Contractor shall perform weekly elaboration of near-term tasks without subtasks, and near term subtasks in accordance with the approved Schedule Management Plan and Schedule Elaboration Process.
3.2.2-24 (existing)	The Contractor shall use work packages to identify the scope of tasks, anticipated levels of efforts, and preliminary timelines, which upon approval by the State Project Director or designee will be reflected in the Reports Management sub-project schedule. Work will not begin until each work package is approved and no work can be billed to a change request (CR) without an approved work package. Work Package parameters include, but are not limited to: 1. Overall time, cost and scope defined. 2. Using a flow approach (as detailed work is defined, a work package will be drafted) 3. The inclusion of a schedule, Full-Time Employee (FTE) hours needed and a description of the expected results of the effort (artifact). 4. The burn rate for time and cost will be tracked as work packages are completed. 5. A standing meeting to review / approve work packages.
3.2.2-25 (existing)	The Contractor shall use a standard template to develop work packages. The template shall include the scope of work effort (e.g., easy, moderate, difficult), and priority to facilitate expediting approval processes based on the business priorities.
3.2.2-26 (existing)	The Contractor shall ensure that the work plan is inclusive of the mutual expectations of the State and Contractor for completion of the Project in accordance with requirements described in this Contract.
3.2.2-27 (existing)	The Contractor shall present the updated work plan at a time agreed to by the parties in writing, and the updated work plan will highlight changes made from the prior work plan.
3.2.2-28 (existing)	The Contractor shall allow the State adequate time, in State’s reasonable judgement, for the State to review and comment on the updates, as well as any new or modified Project Deliverables.
3.2.2-29 (existing)	The Contractor shall obtain approval in writing from the State Project Director or designee prior to the final incorporation of any updates or changes to the work plan.
3.2.2-30 (existing)	In addition to the work plan, the Contractor shall provide a separate summary of tasks requiring CalHEERS, Covered California, DHCS or other stakeholder resources. The Contractor must estimate these resources by stakeholder, and provide any assumptions regarding anticipated involvement of these resources.
3.2.2-31 (existing)	The Contractor shall develop the M&O Work Plan which identifies deliverables, activities, and tasks, including expected durations and completion dates, which are expected to be completed by Contractor, State, and county staff in order to accomplish the M&O milestones.
3.2.2-32 (existing)	The Contractor shall ensure that tasks without subtasks and subtasks, which are assigned to the Contractor’s Staff in the Maintenance & Operations Work Plan, shall be started and completed by the Contractor according to the scheduled start and finish dates of those tasks and subtasks.

Req #	SOW Requirement
3.2.2-33 (existing)	The Contractor shall maintain and update the Maintenance & Operations Work Plan for the life of the Contract in accordance with the following sections of the approved Schedule Management Plan: 1. Schedule Maintenance Process 2. Schedule Elaboration Process
3.2.2-34 (existing)	The Contractor shall submit the updated Maintenance & Operations Work Plan to the State Project Director or designee on Wednesday of each week, at or before 12:00 p.m., Pacific time (PT) for the life of the Contract.
3.2.2-35 (existing)	The Contractor shall develop a Software Release Work Plan, based on the Release Management Plan, for each software release approved by the State. The Software Release Work Plan shall be managed as described in the approved Schedule Management Plan. The Software Release Work Plan shall include, but not be limited to: 1. Software maintenance design, development, testing, installation, implementation and back out activities and tasks. 2. Change request planning (Discovery/Pre-JAD), impact assessment, design, development, testing activities, and tasks pertaining to each change request prioritized for the software release.
3.2.2-36 (existing)	The Contractor shall develop Software Release Work Plans that identify deliverables, activities, and tasks, including expected durations and completion dates, which are expected to be completed by the Contractor, State, and county staff in order to accomplish the software release milestones.
3.2.2-37 (existing)	The Contractor shall develop Software Release Work Plans that include tasks without subtasks and/or subtasks, which are assigned to the Contractor's Staff, which must be started and completed by the Contractor's Staff according to the scheduled start and finish dates of those tasks and subtasks.
3.2.2-38 (existing)	The Contractor shall maintain and update each Software Release Work Plan through completion of implementation of the software release in accordance with the following sections of the approved Schedule Management Plan: 1. Schedule Maintenance Process 2. Schedule Elaboration Process
3.2.2-39 (existing)	The Contractor shall submit each updated Software Release Work Plan to the State Project Director or designee on Wednesday of each week, at or before 12:00 p.m., PT, until implementation of the software release is completed.
3.2.2-40 (modified)	The Contractor shall develop a Contract Closeout Work Plan as described in the approved Schedule Management Plan. The Contract Closeout Work Plan must include, but not be limited to: 1. All activities and tasks for successful transition of the State and counties to a new service provider. 2. All other Closeout activities and tasks described within the Contract Closeout Plan.
3.2.2-41 (existing)	The Contractor shall develop the Contract Closeout Work Plan, which identifies deliverables, activities, and tasks, including expected durations and completion dates, which are expected to be completed by the Contractor, State, and county staff in order to accomplish the Closeout milestones.
3.2.2-42 (existing)	The Contractor shall develop a Contract Closeout Work Plan that includes tasks without subtasks and/or subtasks, which are assigned to the Contractor's Staff, and started and completed according to the scheduled start and finish dates of those tasks and subtasks.
3.2.2-43 (existing)	The Contractor shall maintain and update the Contract Closeout Work Plan through the end of the Contract in accordance with the following sections of the approved Schedule Management Plan: 1. Schedule Maintenance Process 2. Schedule Elaboration Process

Req #	SOW Requirement
3.2.2-44 (existing)	The Contractor shall submit the updated Contract Closeout Work Plan to the State Project Director or designee, in accordance with initial submission timeframe specified in the Schedule Management Plan, and on Wednesday of each week thereafter, at or before 12:00 p.m. PT, until the end of the Contract.

3.2.3 Baselining Contractor Project Work Plans

Maintaining schedule baselines is an essential part of good schedule management. The specific requirements related to schedule baseline maintenance are described below.

Table 3-7: Baselining Contractor Project Work Plans

Req #	SOW Requirement
3.2.3-01 (existing)	The Contractor shall submit each completed project work plan to the State Project Director or designee for approval. Upon approval, the Contractor shall baseline the project work plan in accordance with the approved Schedule Management Plan.
3.2.3-02 (modified)	The Contractor shall not add to, change or reset the baseline of any Contractor project work plan without prior approval from the State Project Director or designee. Contractor additions or changes to existing baselines in the Contractor's project work plans must be performed in accordance with the approved Schedule Management Plan. Contractor resetting of existing baselines in the Contractor project work plans must be performed in accordance with the approved Schedule Management Plan.
3.2.3-03 (existing)	The Contractor shall develop and maintain a baseline log for the life of the Contract in accordance with the approved Schedule Management Plan.
3.2.3-04 (existing)	In accordance with the approved Schedule Management Plan, the Contractor shall record in the baseline log an entry for: 1. The initial baselining of each project work plan, including key milestones, developed by the Contractor 2. Each subsequent addition, change or resetting of key milestone baselines within any project work plan developed by the Contractor.
3.2.3-05 (existing)	The Contractor shall consolidate and integrate into a weekly Master work plan Schedule all project work plans selected by the State, including, but not limited to, Contractor, incumbent Contractor, and State work plans, in accordance with the approved Schedule Management Plan, Integrate Work Plan, and Generate Schedule.
3.2.3-06 (modified)	The Contractor shall perform weekly processing of the Master work plan Schedule during the SDMO Phase of the Contract including Transition, in accordance with the approved Schedule Management Plan. Weekly processing of the Master work plan Schedule by the Contractor shall be used to plan, manage and report on CalHEERS subprojects, milestones, deliverables, activities, and tasks.

Req #	SOW Requirement
3.2.3-07 (existing)	Weekly processing of the Master work plan Schedule by the Contractor shall provide organizations and persons selected by the State, including, but not limited to, Contractor, incumbent Contractor, State and county staffs and stakeholders, with visibility of, but not limited to, the following: 1. Schedule and status of all key SDMO Phase milestones including Transition milestones 2. Schedule and status of all key software release milestones 3. Schedule and status of all Contract deliverables 4. Schedule and status of all key process areas, including but not limited to: a. Requirements Gathering b. System Requirements Validation c. Design d. Coding and Documentation e. System Test f. System Performance Test g. Training h. Process Assurance i. Quality Assurance j. Release Management k. Change Management l. Software Maintenance Updates m. Configuration Management n. Verification and Validation o. Contract Closeout p. Project critical path activities, tasks and subtasks q. External dependencies between tasks and subtasks in project work plans r. Estimated, actual and remaining hours and durations for subprojects, milestones, deliverables, activities, tasks, and subtasks s. Percentage complete for subprojects, milestones, deliverables, activities, tasks, and subtasks t. Gantt Charts showing planned and actual start and finish dates for milestones and deliverables, and percentages complete
3.2.3-08 (existing)	The Contractor shall use all project work plans included in the Master work plan Schedule for tracking and control of CalHEERS activities, tasks and subtasks for the life of the Contract, including but not limited to: 1. The Transition work plan for tracking and control during Transition. 2. The SDMO work plan for tracking and control of non-release specific activities, tasks and subtasks during Maintenance & Operations. 3. The Software Release work plans for tracking and control of release and change request specific activities, tasks and subtasks during planning, development, testing and implementation of software releases. 4. The Transition Out work plan for tracking and control during Closeout.
3.2.3-09 (existing)	The Contractor shall submit the updated Master work plan and all project work plans included in the Master work plan, to the State Project Director or designee each week on a day and time of the State Project Director's, or designee's choosing, for the life of the Contract.
3.2.3-10 (existing)	The Contractor shall develop the Master Milestone Schedule Summary View, within the Master Work Plan, after all project work plans included in the Master Work Plan have been baselined for review by the State Project Director or Designee.
3.2.3-11 (existing)	The Contractor shall provide the Schedule Processing Infrastructure on which all CalHEERS project schedule management activities described in this Statement of Work or in the approved Schedule Management Plan, will be performed for the life of the Contract.

Req #	SOW Requirement
3.2.3-12 (existing)	The Contractor shall provide Schedule Processing Infrastructure that includes, but is not limited to: 1. Hardware 2. Hardware Maintenance 3. Software 4. Software Licensing 5. Software Maintenance 6. Software Programming and Configuration 7. Communications Equipment 8. Communications Services 9. Report Setup
3.2.3-13 (existing)	The Contractor shall be responsible for acquiring, licensing, installing, programming, configuring, operating, and maintaining the Schedule Processing Infrastructure for the life of the Contract.
3.2.3-14 (existing)	The Contractor shall be responsible for all costs associated with the acquisition, licensing, installation, programming, configuration, operations, and maintenance of the Schedule Processing Infrastructure for the life of the Contract.
3.2.3-15 (modified)	The Contractor shall use the Schedule Processing Infrastructure to perform: 1. Weekly automated schedule updates (task list processing) for organizations and persons selected by the State, including, but not limited to, Contractor, incumbent Contractor, State and county staffs, in accordance with the approved Schedule Management Plan. 2. Weekly progress analysis processing, reporting, and automated updating of project work plans selected by the State, including, but not limited to, Contractor, incumbent Contractor and State work plans, based on weekly automated schedule updates (task list updates) collected and processed in accordance with the approved Schedule Management Plan. 3. Weekly production and distribution of schedule reports for organizations and persons selected by the State, including, but not limited to, Contractor, incumbent Contractor, State and county staffs and stakeholders, in accordance with the approved Schedule Management Plan. At the request of the State, ad hoc schedule reports may be requested by the State Project Director or designee.
3.2.3-16 (existing)	The Contractor shall ensure and support the use of the Schedule Processing Infrastructure by the State, to perform the following schedule processing activities: 1. Receive and view the current, updated and final versions of the Master Work Plan each week 2. Receive and view the current, updated and final versions of all project work plans included in the Master Work Plan each week
3.2.3-17 (modified)	The Contractor shall ensure and support the use of the Schedule Processing Infrastructure by the State and persons selected by the State, including, but not limited to, Contractor, State, county and Incumbent Contractor Staff and stakeholders, to perform the following schedule processing activities: 1. Submit the current, updated and final versions of project work plans for inclusion in the Master Work Plan each week 2. Receive, view, update and submit weekly individual resource task lists via the automated solution. 3. Receive and view progress analysis reports, draft schedule reports and final schedule reports

Req #	SOW Requirement
3.2.3-18 (modified)	The Contractor shall perform for the term of the Contract, all weekly processing of the Master work plan required to perform automated schedule updates (task list processing) for organizations and persons selected by the State, including, but not limited to, Contractor, State, county and incumbent Contractor Staff in accordance with the following sections of the approved Schedule Management Plan
3.2.3-19 (existing)	The Contractor shall provide weekly processing of the Master work plan for task list processing that includes, but is not limited to: 1. Production, distribution and collection of individual weekly State and county resource task lists that are based on: a. Percentage of work completed for individual resource assignments b. Actual start date for individual resource assignments c. Actual finish date for individual resource assignments 2. Production, distribution and collection of individual weekly resource task lists for organizations and persons selected by the State, including, but not limited to, incumbent Contractor resources, that are based on: a. Either percentage of work completed for individual resource assignments or actual hours worked, actual overtime hours worked and estimated hours to complete for individual resource assignments (as selected by the State Project Director or designee) b. Actual start date for individual resource assignments c. Actual finish date for individual resource assignments 3. Production, distribution and collection of individual weekly Contractor resource task lists that are based on: a. Actual hours worked, actual overtime hours worked and estimated hours to complete for individual resource assignments b. Actual start date for individual resources assignments c. Actual finish date for individual resource assignments
3.2.3-20 (existing)	The Contractor shall perform, for the term of the Contract, automated updating of each project work plan selected by the State. This shall include, but not limited to: 1. Contractor and State project work plans based on weekly task list updates collected and processed in accordance with the approved Schedule Management Plan 2. Collect status of work plan assignments from resources 3. Progress Updates to Project work plans.

Req #	SOW Requirement
3.2.3-21 (existing)	The Contractor shall provide Progress Updates that include, but not be limited to: - Automatic updates to State resource assignments as reported on their task lists: - Percentage of work completed - Actual start date - Actual finish date - Automatic updates to resource assignments of organizations and persons selected by the State, including, but not limited to, incumbent Contractor resources, as reported on their task lists: - Either percentage of work completed for individual resource assignments or actual hours worked, and actual overtime hours worked for individual resource assignments (as selected by the State Project Director or designee) - Actual start date - Actual finish date - Automatic updates to Contractor resource assignments as reported on their task lists: - Actual hours worked - Actual overtime hours worked - Actual start date - Actual finish date
3.2.3-22 (modified)	The Contractor shall perform, during the Transition Phase, automated updating of the incumbent Contractor project work plan based on Incumbent Contractor Staff updates to identified in their automated schedule updates (task lists)
3.2.3-23 (existing)	The Contractor shall complete this effort in accordance with the approved Schedule Management Plan, Collect Status of work plan Assignments from Resources, and Progress Updates to Project work plans, and the work plans must include, but not be limited to: - Automatic updates to incumbent Contractor resource assignments as reported on their task lists: - Percentage of work completed - Actual start date - Actual finish date (If the State Project Director or designee approved the incumbent Contractor's Staff to be tracked by percentage of work completed) - Automatic updates to incumbent Contractor resource assignments as reported on their task lists: - Actual hours worked - Actual overtime hours worked - Actual start date - Actual finish date (If the State Project Director or designee approved the incumbent Contractor's Staff to be tracked by actual hours worked)
3.2.3-24 (existing)	During the term of the Contract, the Contractor may propose to the State Project Director or designee an alternative approach for automatically updating non-Contractor project work plans with weekly non-Contractor resource task list updates.

Req #	SOW Requirement
3.2.3-25 (existing)	If the alternative approach to automatically updating non-Contractor Project Work Plans is approved by the State Project Director or designee before the Transition Phase ends, the Contractor shall provide to the State, the organizations selected by the State, and to the incumbent Contractor, all that is required to automatically update State project work plans, project work plans of organizations selected by the State and incumbent Contractor project work plans with weekly resource task list updates, including, but not limited to: 1. Hardware 2. Software 3. Programs 4. Support 5. Weekly work plan update transactions
3.2.3-26 (modified)	If approved by the State Project Director or designee, the Contractor's alternative approach for automatically updating non-Contractor project work plans shall provide the State with the ability to automatically update State project work plans based on State and county staff updates to task lists. This effort shall be in accordance with the approved Schedule Management Plan, including but not limited to: 1. Automatic updates to State and county resource assignments that were reported on their task lists: a. Percentages of work completed b. Actual start date c. Actual finish date
3.2.3-27 (modified)	If approved by the State Project Director or designee, the Contractor's alternative approach for automatically updating non-Contractor project work plans shall provide the incumbent Contractor and organizations selected by the State, with the ability to automatically update the Incumbent Contractor project work plan and project work plans of organizations selected by the State, with updates based on Staff updates to task lists. This effort shall be in accordance with the approved Schedule Management Plan, including but not limited to: Automatic updates to incumbent Contractor resource assignments and resource assignments of State selected organizations based on progress information reported on task lists: 1. Percentage of work completed 2. Actual start date 3. Actual finish date (If the State Project Director or designee approved the incumbent Contractor's Staff to be tracked by percentage of work completed.) Automatic updates to incumbent Contractor resource assignments and resource assignments of State selected organizations based on progress information reported on task lists: 1. Actual hours worked 2. Overtime hours worked 3. Actual start date 4. Actual finish date (If the State Project Director or designee approved the incumbent Contractor's Staff to be tracked by actual hours worked).

Req #	SOW Requirement
3.2.3-28 (modified)	The Contractor shall perform for the term of the Contract, weekly progress analysis processing and reporting from the Master work plan, in accordance with the approved Schedule Management Plan, including but not limited to: 1. Production and distribution of a weekly progress analysis report for each project work plan selected by the State, including, but not limited to, Contractor, incumbent Contractor and State work plans, containing: a. A row for each task without subtasks, and subtask that was scheduled for work during the previous week, scheduled for work before the previous week but not previously reported as complete, or that was updated on an individual resource task list, and b. A row for each resource assigned to the task without subtasks, and subtask if the assignment wasn't previously marked as complete in the project work plan. 2. The following information shall be included in each task/subtask row of the progress analysis report: a. Task/Subtask ID (from task list) b. Task/Subtask ID (current version of the project work plan) c. Task/Subtask Name (current version of the project work plan) d. Baseline Start Date (current version of the project work plan) e. Baseline Finish Date (current version of the project work plan) f. Total Slack (current version of the project work plan) g. Critical status (current version of the project work plan) 3. The following information shall be included in each resource assignment row of the progress analysis report: a. Resource Name (current version of the project work plan) b. Percentage of Work Completed (current version of the project work plan, unless Percentage of Work Completed was updated by the resource in a task list, in which case, Percentage of Work Completed from the task list) c. Start Date (current version of the project work plan, unless Start Date was updated by the resource in a task list, in which case, Start Date from the task list) d. Finish Date (current version of the project work plan, unless Finish Date was updated by the resource in a task list, in which case, Finish Date from the task list) e. Actual Hours Worked (from task list, if available) f. Actual Overtime Hours Worked (from task list, if available) g. Estimated Hours to Complete (from task list, if available) 4. Production of a weekly task list submissions log report, in accordance with the approved Schedule Management Plan, containing the name of each resource who received an individual task list and whether or not the task list was returned for processing. 5. Distribution of the weekly task list submissions log report to organizations and persons selected by the State, including, but not limited to, the State Project Director or designee, State Assistant Project Manager, State Project Scheduler, Contractor Project Manager, and Contractor Project Scheduler, in accordance with the approved Schedule Management Plan.
3.2.3-29 (existing)	The Contractor shall produce weekly schedule reports from the Master work plan and shall distribute the schedule reports to organizations and persons selected by the State, including, but not limited to, Contractor, State, county and incumbent Contractor Managers, staff and stakeholders in accordance with the following sections of the approved Schedule Management Plan: 1. Apply status updates to work plan Assignments 2. Producing Draft Schedule Reports 3. Producing Final Schedule Reports

Req #	SOW Requirement
3.2.3-30 (modified)	The Contractor shall participate in and perform schedule change control as described in the approved Schedule Management Plan, to include, but not limited to: 1. Schedule Change Request Initiation and Tracking 2. Change Control Board Meetings 3. Schedule Change Request Impact Analysis 4. Schedule Change Implementation and Verification
3.2.3-31 (existing)	The Contractor shall perform all SCCP responsibilities assigned to the Contractor's Staff in the approved Schedule Management Plan, SCCP roles and responsibilities, including but not limited to: 1. Serving as a member of the Change Control Board 2. Clarifying schedule change requests originating from Contractor Staff 3. Performing impact analyses of change requests 4. Performing what if scenarios 5. Participating in the decision-making process of schedule change request approval or denial 6. Sponsoring approved changes in the Contractor's organization 7. Building necessary support among Contractor organization leadership 8. Making approved changes to Contractor project work plans

3.3 COST/COST ESTIMATING MANAGEMENT

This section identifies the requirements for SI collaboration with the State to manage and oversee the costs covered for SI work performed by the SI under this contract. The SI will be working with the State to implement cost management in accordance with the updated cost management processes as defined in the following sections.

3.3.1 Cost Management Plan

The Cost Management Plan is the collection of governance, guidance, and processes that the State and SI will utilize to manage, oversee, and track the costs for work performed by the SI under this contract. There is an existing Cost Management Plan that will be improved upon in collaboration with the State.

One of the improvements the State is looking for will be the migration of Contract identified costs into a Cost Tracking Tool, and improving cost management over the term of the Contract.

The Contractor will also work with the State to accomplish all work within budgetary constraints and properly account for the funds expended. The State expects the Contractor to provide the cost reporting to the State, actively participate in the State and Federal budget processes and provide accurate cost estimates as input to budget approval documents.

The State is requiring a high degree of transparency in cost tracking and accountability, as the cost methods have changed in this contract. This section describes the expectations for the Contractor in managing, updating, tracking, and reporting on costs.

Note: Change Request (CR) Cost Estimation and Cost Basis of Estimate (BOE) is addressed in SOW Section 4, SYSTEM CHANGE & ENHANCEMENTS Requirements, 4.2.3, SYSTEM CHANGE COST ESTIMATING & CR BASIS OF ESTIMATE (BOE).

Table 3-8: Cost Management Plan (CD-3.3-1)

Req #	SOW Requirement
3.3.1-01 (modified)	The Contractor shall adopt, update, deliver, and maintain a Cost Management Plan, which includes but is not limited to:

Req #	SOW Requirement
	1. INTRODUCTION 1.1 Purpose 1.2 List of Reference Documents 1.3 Audience 2. SUMMARY 2.1 Scope 3. APPROACH 4. ASSUMPTIONS, CONSTRAINTS, AND RISKS 4.1 Assumptions 4.2 Constraints 4.3 Risks 5. REQUIREMENTS 6. ROLES AND RESPONSIBILITIES 6.1 Roles and Responsibilities by Deliverable Section 6.1.1 State Roles and Responsibilities 6.1.2 Deloitte Roles and Responsibilities 7. COST MANAGEMENT PLAN 7.1 Cost Management Types 7.1.1 Managing Costs for SDMO Fixed Prices Services 7.1.2 Managing Costs for Mail Support Services 7.1.3 Managing Costs for Hardware/Software (HW/SW) 7.1.4 Managing Costs for Cloud Hosting Data Center Services 7.1.5 Managing Costs for Provider Directory 7.1.6 Annual Cost Types 7.1.6.1 Provider Directory 7.1.6.2 NTT Tape Restore 7.1.7 Managing Costs for Change Requests (CRs) 7.2 Managing Cost for Invoicing Process 7.2.1 Table: Invoice Process 7.2.2 Phase 1: Preparation of Invoice Documentation 7.2.3 Phase 2: Pre-Invoice Meeting 7.2.4 Phase 3: Invoice Edits 7.2.5 Phase 4: Submission 8. CONTRACTOR COST REPORTS 8.1 CR True Up Reports 8.2 Cost Summary Reports 8.3 Historical Project Estimation Database 8.4 Miscellaneous Cost Reports 9. HISTORICAL COST TYPES 9.1 Performance Bond 9.2 Transition In 810. MANAGING COSTS FOR SUPPORT OF BUDGET PLANNING 810.1 Support for Implementation Advance Planning Document Updates (IAPDU) 911. GLOSSARY AND ACRONYMS 911.1 New Acronyms and Terms APPENDIX 1: SOW TO DELIVERABLE TRACEABILITY CHECKLIST APPENDIX 2: DELIVERABLE COMPLIANCE AND VALIDATION CHECKLIST APPENDIX 3: ASSOCIATED ARTIFACTS
3.3.1-02 (new)	Upon initial approval, the Contractor shall only alter or modify this Deliverable's structure or content with the approval of the State Project Director or designee.

Req #	SOW Requirement
3.3.1-03 (new)	The Contractor shall incorporate into the Cost Management Plan and processes the following terms and definitions related to costs and cost categories: D-2 SDMO Hardware Costs – This cost category shall represent the physical hardware purchased, managed, and maintained by the SI to support CalHEERS. These costs shall be managed by a “Fixed Budget” and the SI invoices the State based on True Cost (which fall under the “Fixed Budget”). True Cost (as defined in the Appendix C - Glossary) shall not include mark-ups, kickbacks, nor labor costs under this cost category. Labor needed by the SI to support this category shall be included by the Contractor under D-5 SDMO Fixed Price and SOW Section 6.14 <u>SYSTEM HARDWARE/SOFTWARE</u>~~System Hardware/Software~~. D-3 SDMO Software Costs – This cost category shall represent the software that is purchased (or acquired free), managed, and maintained by the SI to support the CalHEERS. These costs shall be managed by a “Fixed Budget” (as defined in Appendix C – Glossary) and the SI shall invoice the State only for True Cost (that fall under the “Fixed Budget”). True Cost (as defined in the Appendix C - Glossary) shall not include mark-ups, kickbacks, nor labor costs under this cost category. Labor needed by the Contractor to support this category shall be included under D-5 SDMO Fixed Price and SOW Section 6.14 <u>SYSTEM HARDWARE/SOFTWARE</u>~~System Hardware/Software~~. D-4 Cloud Hosting Data Center Services – This cost category shall represent the costs related to purchased cloud hosting services that the Contractor procures to support and maintain the Cloud Hosting Data Center Services needs of the CalHEERS. These costs shall be managed under and must adhere to a “Fixed Budget” amount defined within the bidder’s proposal. Proposed hosting services costs must be presented and invoiced to the State as True Cost. There are some exceptions to the use of True Cost for the one-time infrastructure costs related to a migration as approved in advance by the State via the CR process). True Cost (as defined in the Appendix C - Glossary) must not include mark-ups, kickbacks, nor labor costs under this cost category. Labor needed by the Contractor to support this category shall be included under D-5 SDMO Fixed Price and SOW Section 6.17 <u>HOSTING SERVICES</u>~~Hosting Services~~. D-5 SDMO Fixed Price – This cost category shall represent the “fixed price” effort the SI will employ for services specifically outlined in SOW Sections 1-8, as defined in D-5 SDMO Fixed Price Costs. SOW section exemptions are clearly called out in the Cost Workbook. D-6 Transaction-Based Services – This cost category shall represent the costs to support the unique transaction-based activity/services costed via per unit (e.g., box, notice, page, ~~stamp~~, piece of mail, or human hour) on CalHEERS. D-7 System Changes & Enhancements – This cost category shall exclusively represent system changes and enhancements the Contractor will support for CalHEERS using both onshore and offshore staffing resources. The staffing positions and rates are pre-negotiated as part of the contract. Scope and cost shall be determined via the Change Management processes and paid for using fixed rate pricing per labor hour defined in Change Requests (CRs). D-8 Transition-In / Transition-Out – This cost category shall exclusively represent costs for the SI to both Transition-In to the new contract upon contract start, and to Transition-Out at the end of the contract. These are unique costs and shall be established at a “Fixed Price”.

Req #	SOW Requirement
3.3.1-04 (new)	The Contractor shall update the Cost Management Plan (including the addition of Appendix 4: COST TRACKING TOOL REQUIREMENTS) to replace functions of the existing Excel spreadsheet(s) to now include the use of a Commercial Off the Shelf (COTS) tool called Anaplan (or mutually agreed upon alternative product). See also Section 3.3, COST/SCOST ESTIMATING MANAGEMENT.
3.3.1-05 (new)	The Contractor shall update the Cost Management Plan to describe how it shall replace the existing tools with the new tool to satisfy the needs of Cost Management at the CalHEERS.
3.3.1-06 (new)	The Contractor shall, in collaboration with the State, develop a Deliverable Expectation Document (DED) prior to the update of the Cost Management Plan, restructuring the content of the Plan as needed to satisfy the new requirements included herein.
3.3.1-07 (new)	The Contractor shall associate the following artifacts as a subset of the Cost Management Plan. The Contractor shall adopt, update, maintain, and deliver these artifacts in accordance with Appendix 3 of this deliverable, including, but not limited to: • Contractor Cost Reports • Cost Summary CalHEERS CR XXXXXX • CalHEERS Cost Summary Template User Guide – CONFIDENTIAL • CR True-up Education Session
3.3.1-08 (new)	The Contractor shall update the Cost Management Plan, in coordination with the State, to replace the Rough Order of Magnitude (ROM) estimation methodology with a Total Cost of Ownership (TCO) estimation methodology.
3.3.1-09 (new)	The Contractor shall update the Cost Management Plan in collaboration with the State to expand the processes for ensuring proper tracking of changes in baseline costs due to the CRs being processed.
3.3.1-10 (new)	The Contractor shall update the Cost Management Plan in collaboration with the State to identify the different Cost Methodologies approved by the State for use on the Contract.
3.3.1-11 (new)	The Contractor shall update the Cost Management Plan to identify how the Cost Tracking Tool will integrate into the cost management process on the project.
3.3.1-12 (new)	The Contractor shall adopt and maintain all Project Artifacts that are associated with this Deliverable in the Project Artifact Inventory and manage them in accordance with the Project Artifact process.

Req #	SOW Requirement
3.3.1-13 (modified)	The Contractor shall attach to the Cost Management Plan the following appendices: Appendix 1—SOW to Deliverable Traceability Checklist Description: A table that identifies the SOW requirements for this Deliverable, as specified within SOW Section 8, DELIVERABLES, and includes but is not limited to: 1. SOW Requirement ID # 2. SOW Requirement Text 3. Requirement Traceability (Define traceability of the requirements to the Deliverable) 4. Requirement Fulfillment (Define how the SOW requirements have been fulfilled by this Deliverable) Appendix 2—Deliverable Compliance and Validation Checklist Description: A QA Checklist that includes, but is not limited to: 1. Deliverable Section Number and Title 2. Deliverable Requirement Statement(s) 3. Requirement Completion (How the Contractor will comply with or has complied with the requirement statements within the plan) 4. Validation Method (The method the Contractor used to validate Deliverable compliance) 5. The Contractor's QA Manager sign-off on compliance Appendix 3—Associated Artifacts Description: An extract from the Project Artifact Inventory List of artifacts associated with this Deliverable, and will include but is not limited to the following examples: 1. Artifact Name 2. Associated Parent DEL 3. State Approver 4. SI Point of Contact 5. Review Frequency 6. Submission Frequency 7. Artifact File Format 8. Artifact Location (e.g., SharePoint breadcrumb) 9. Link to artifact

3.3.2 Cost Tracking Tool

The State will be utilizing a new cost tracking tool to enhance greater cost transparency for the State and to provide better reporting and tracking features that enhance the cost management of the SI contract throughout the life of the contract.

The Contractor will ~~be working collaboratively with the~~ provide the State with access to the, ~~not only to transition and optimize the use of the Contractor's~~ cost tracking tool, and the user guide ~~but also to assist various user groups the State in the creation of a User's Guide to assist various user groups~~ as defined in the requirements that follow.

Table 3-9: Cost Tracking Tool / User Guide (CD-3.3-2)

Req #	SOW Requirement
3.3.2-01 (new)	The Contractor shall ~~migrate, transition during transition, Contractor Cost Management activities from the State from the existing tool (State-developed MS Excel spreadsheets) for managing contract Contract costs~~ to a commercial off the shelf tool called Anaplan (or mutually agreed upon alternative product). ~~The new cost tracking tool shall be used to manage all the costs associated with the work performed by the Contractor SI under this contractContract.~~ <u>Note: Although the State has many contracts where the Anaplan tool will be used, the Contractor shall only be responsible for providing services specific to this SI cContract.</u>
3.3.2-02 (new)	The Contractor shall implement and configure the Cost Tracking Tool to comply with, and fully supports, the State approved Contractor Cost Management Plan.
3.3.2-03 (new)	The Contractor shall utilize the Cost Tracking Tool, Anaplan (or mutually agreed upon alternative product), for tracking all costs on the CalHEERS project in accordance with the Cost Management Plan.
3.3.2-04 (new)	The Contractor shall create a user's guide for how the Cost Tracking Tool, Anaplan (or mutually agreed upon alternative product), will be used and integrated into the CalHEERS processes to support the needs outlined in the Cost Management Plan. The Users Guide will (at a minimum) address two types of users: • End Users (those relying on the data to make decisions), and • Administrative Users (~~who are responsible to know how~~ to configure, upgrade, modify, and customize the tool per the needs of End Users).
3.3.2-05 (~~existing~~ modified)	The Cost Tracking Tool shall provide categories, and traceability between cost components and association with the executed ~~SI cContract~~ , <u>including -(but not limited to</u> RFP Appendix D, COST WORKBOOK, <u>)and any new costs included in the Contract:</u> • D-2 <u>SDMO</u> HW costs • D-3 <u>SDMO</u> SW costs • D-4 Cloud Hosting Data Center Services and Service Center Cloud Hosting Data Center Costs • D-5 <u>SDMO</u> Fixed Price Costs • D-6 ~~Transaction Based~~<u>Transaction-Based</u> Costs • D-7 System Change Costs • D-8 Transition Costs
3.3.2-06 (new)	The Cost Tracking Tool shall be capable to incorporate the input from the CalHEERS Enterprise Workload Management (EWM) tool in situations where costs are tracked and/or adjusted due to the Change Request (CR) process.
3.3.2-07 (new)	The Cost Tracking Tool shall allow users to enter, review and approve costs, and attribute them to the different cost categories (defined in the ~~contractContract~~ or by the State), permitting the State to manage the cost baseline and re-baseline needs of the CalHEERS.
3.3.2-08 (new)	The Cost Tracking Tool shall provide permission specific views to facilitate processes, financial reviews, and reporting.
3.3.2-09 (new)	The Cost Tracking Tool shall include functionality to track the Contract baseline costs, actual expenditures, updates to the baseline, and forecasting to help the State track and manage project costs and the Contractor to stay within the defined fixed budget.
3.3.2-10 (new)	The Cost Tracking Tool shall provide for the ability to manage each item at the lowest level possible, e.g., ~~hardwareHardware~~ component, ~~softwareSoftware~~ license, or service level.
3.3.2-11 (new)	The Cost Tracking Tool shall provide the ability to manage the Contract baseline costs and provide "version history" functionality down to the line-item level.

Req #	SOW Requirement
3.3.2-12 (new)	The Cost Tracking Tool shall provide the <u>Contractor with the</u> ability to ~~approve, reject,~~ and update Contract baseline costs, <u>as well as and</u> provide ad hoc budget forecasting based on baseline updates, <u>as directed by the State.</u>
3.3.2-13 (new)	The Cost Tracking Tool shall provide the ability to establish the baseline, update, maintain, and re-baseline, track Change Request estimates and actuals, and forecast updates to the baseline.
3.3.2-14 (new)	The Cost Tracking Tool shall provide the ability to inactivate items at the item level or in bulk as needed by the State, thus updating the baseline to stay within budget, or support efficiency in maintaining the State's fixed budget.
<u>3.3.2-15 (new)</u>	<u>The Cost Tracking Tool shall interface with the State's Financial Management Tool, at the level of detail defined by the State.</u>
<u>3.3.2-16 (new)</u>	<u>The Cost Tracking Tool shall provide the ability to assign and track fiscal owners and account codes as directed by the State.</u>

3.3.3 Cost Management Execution

Table 3-10: Cost Management Execution

Req #	SOW Requirement
3.3.3-01 (new)	The Contractor shall staff, manage, lead and execute Cost Management on the CalHEERS as defined in this Statement of Work and in accordance with the CD-3.3-1 – Cost Management Plan.
3.3.3-02 (existing)	The Contractor shall use the Cost Tracking Tool used to purchase, manage (including any re-baseline efforts) and track all costs related to work under this contract in accordance with the State approved Cost Management Plan.
3.3.3-03 (existing)	The Contractor shall utilize the Cost Tracking Tool to manage all ~~hardware~~ <u>Hardware</u> included within the cost work ~~booksheets~~ defined in Appendix D-2, SDMO HARDWARE COSTS.
3.3.3-04 (existing)	The Contractor shall utilize the Cost Tracking Tool to manage all ~~software~~ <u>Software</u> included within the cost ~~worksheets~~ <u>workbook</u> defined in Appendix D-3, SDMO SOFTWARE COSTS.
3.3.3-05 (new)	The Contractor shall utilize the Cost Tracking Tool to manage all SDMO Cloud Hosting costs within the cost work ~~booksheets~~ defined in Appendix D-4, CLOUD HOSTING <u>DATA CENTER SERVICES AND D-4.1, SERVICE CENTER CLOUD HOSTING DATA CENTER</u> COSTS.
3.3.3-06 (modified)	The Contractor shall utilize the Cost Tracking Tool to manage all the FIXED PRICE COST activities, as defined in the Appendix D-5, SDMO FIXED PRICE ONSHORE COSTS associated worksheets, unless otherwise approved by the State.
3.3.3-07 (modified)	The Contractor shall utilize Cost Tracking Tool to manage all Transaction Based Costs, as defined in Appendix D-6, TRANSACTION-BASED COSTS.
3.3.3-08 (modified)	The Contractor shall utilize the Cost Tracking Tool to manage System Changes Costs, as defined in Appendix D-7, ONSHORE SYSTEM CHANGES COSTS.
3.3.3-09 (modified)	The Contractor shall utilize the Cost Tracking Tool to manage the Transition Costs, as defined in Appendix D-8, TRANSITION-IN COSTS worksheets.

Req #	SOW Requirement
3.3.3-10 (existing)	The Contractor shall utilize the Cost Tracking Tool to monitor and control project expenditures to keep the Project within the planned Contract budget by State fiscal year. The Contractor shall conduct the following activities: 1. Identify the cost of all work within the scope of the Contract from Contract start through Contract completion including the State fiscal year in which work will be performed. 2. Integrate cost objectives into a cost plan against which accomplishments may be measured. 3. Objectively assess cost of work after it is accomplished. 4. Analyze variances in costs from the plan and forecast potential impacts. 5. Provide actual and projected cost data for management decision-making and implementation of management actions.
3.3.3-11 (~~existing~~ <u>modified</u>)	The Contractor shall assist the State in the development and creation of reports and dashboards to track and report actual costs compared to planned costs, and reasons for variances on a monthly <u>or as-needed</u> basis. This tracking and reporting must be performed at the budget line item and sub-line-item levels, as well as for each Change Request.
3.3.3-12 (existing)	The Contractor shall identify actual or planned variances that may require line-item adjustments.
3.3.3-13 (new)	The Contractor shall, at the State's request, provide the State with itemized reporting on any/all costs that support the budget, including budget expenses to date.
3.3.3-14 (modified)	The Contractor shall track procurement activities against the proposed bill of materials via the Cost Tracking Tool.
3.3.3-15 (existing)	The Contractor shall distinguish the cost between work done onshore versus offshore for all reported actual costs.
3.3.3-16 (existing)	The Contractor shall prepare and deliver various cost reports depending on the needs of the State. These reports will be expected as a means to show progress and status of costs related to the elements called out in the Appendix D, COST WORKBOOK. The reports shall be generated from the Cost Tracking Tool.
3.3.3-17 (new)	The Contractor shall collaborate with the State to develop and maintain any new Project Artifacts necessary to support this section. New artifacts shall be added to the Project Artifacts Repository and managed in accordance with the Project Artifact process.
3.3.3-18 (new)	Specific to Transaction Based Costs invoices, involving "human hour" units, the Contractor shall provide reporting that includes "human hour" costs, dates the work was performed, a description of the work, and the resource that did the work. The reports shall be generated from the Cost Tracking tool.
<u>3.3.3.-19</u> (<u>new</u>)	<u>The Contractor shall work collaboratively with the State to define and implement a system for tracking cost related decision items that require a level of privacy and security.</u>
<u>3.3.3.-20</u> (<u>new</u>)	<u>The Contractor's financial team shall input cost data, at the level of detail defined by the State, into the State's Financial Management Tool.</u>
<u>3.3.3.-21</u> (<u>new</u>)	<u>The Contractor shall work collaboratively with the State to identify, define, and track any new costs included in the Contract.</u>

3.3.4 Support for Budget Planning

The State is looking for the Contractor to support the State in the preparation of budget documentation such as the of Advanced Planning Documents (~~-APD and~~ APD) budget documentation.

Table 3-11: Support for Budget Planning

Req #	SOW Requirement
3.3.4-01 (modified)	The Contractor shall support the State in planning for and preparation of the APD/ ~~APD/~~ OAPDU documents that are prepared on an annual or as-needed basis, ensuring the State has the most accurate cost estimation data for future activities (e.g., Technology Refresh).
3.3.4-02 (~~existing~~ ~~m~~ ~~odified~~)	The Contractor shall assist the State in the planning for and preparation of <u>Advanced Planning Documents</u> (~~APDs documents~~) and in any other documentation and justification required for the State and Federal budget processes. Projected costs by line item and sub-line item must be provided for the upcoming and future State fiscal years, along with justification associated with any actual and planned changes.

3.3.5 Cost Changes and Adjustment to the Cost Baseline (Re-Baseline)

Cost cChanges are a natural part of the CalHEERS culture, with a combination of enhancements and the evolving nature of technology ~~changes that make this a reality~~. The CalHEERS will work with the SI to respond to changes that result in Contractual cost adjustments and then update to the Cost Baseline (also referred to as a cost re-baseline).

This section identifies the requirements that address how cost changes and adjustments to the cost baseline will be done.

Table 3-12: Cost Changes and Adjustments to the Cost Baseline

Req #	SOW Requirement
3.3.5-01 (new)	The Contractor shall work in collaboration with the CalHEERS Change Request (CR) process and individual CRs tracked in the EWM tool to determine if there will be a need for a cost adjustment to the cost baseline.
3.3.5-02 (new)	The Contractor shall work in accordance with the Cost Management Plan guidance and CR process to determine what cost categories, what CRs, and what timing will need to be adjusted for a cost adjustment for a new cost baseline.

3.4 HUMAN RESOURCE MANAGEMENT

The Contractor must employ an approach for the management of Contractor Staff that facilitates a productive working relationship and progress towards task completion. The Contractor will be responsible for ensuring that all staff, including State staff, clearly understand their roles and responsibilities and how their specific teams and assignments relate to the overall Project work plan.

3.4.1 Staffing Matrix

The Staffing Matrix must speak to the Contractor's flexibility across functional areas, be developed in accordance with the project schedule, detail staffing, include Staff allocation tracking and reporting, and interactions with State staff, including State and county subject matter experts.

Table 3-13: Staffing Matrix (CD-3.4-1)

Req #	SOW Requirement
3.4.1-01 (modified)	The Staffing Matrix shall also include the Contractor's Staff resources necessary to meet the needs of the project as follows: 1. Total number of full-time equivalent Staff, along with their position titles 2. Position descriptions 3. First and last names 4. Expected roles 5. Responsibilities 6. Location (city, state, country), 7. Planned start dates and end dates for each position. 8. Responsibility Assignment Matrix (RAM)
3.4.1-02 (modified)	The Contractor shall update the Staffing Matrix to include a Resource Staffing Chart for all M&O Activities, which must be maintained, including updating with actuals, throughout the term of the Contract: 1. M&O Activity Resource Staffing Chart: a. Vertical axis = The following high-level M&O Activities, with all hours associated with the lower-level activities summed up: i. Project Management ii. Maintenance (via CRs) iii. Maintenance (via Program Support) iv. Operations b. Horizontal axis = Contract Years 1-10, with each Contract year broken into two columns, one populated with the estimated/actual "Onshore" hours associated with each M&O Activity, and the other populated with estimated/actual "Offshore" hours associated with each M&O Activity. c. The chart shall include both vertical and horizontal subtotal values and total values.

3.4.2 Staffing Management Plan

The Staffing Management Plan identifies the process and procedures used to manage staff throughout the CalHEERS SDMO Phase. This plan provides the details of the Contractor's organization including roles and responsibilities, planned Contractor onshore/offshore staffing ratio, and planning and managing Staff, including Staff recruitment, development, release, and turnover.

Table 3-14: Staffing Management Plan (CD-3.4-2)

Req #	SOW Requirement
3.4.2-01 (new)	The Contractor shall adopt, deliver, and maintain a CalHEERS Staffing Management Plan, which includes but is not limited to: 1. INTRODUCTION 1.1 Purpose 1.2 List of Reference Documents 1.3 Audience 2. SUMMARY 2.1 Scope 2.2 Out of Scope 2.3 CalHEERS Project Team Overview 2.4 Organizational Chart 3. APPROACH 3.1 CalHEERS State Staffing Approach 3.2 CalHEERS Contractor Staffing Approach

Req #	SOW Requirement
	3.3 Contractor Staffing Compliance with State Guidelines 4. ASSUMPTIONS, CONSTRAINTS, AND RISKS 4.1 Assumptions 4.2 Constraints 4.3 Risks 5. REQUIREMENTS 6. ROLES AND RESPONSIBILITIES 6.1 Roles and Responsibilities by Deliverable Section 7. CONTRACTOR STAFFING METHODOLOGY 7.1 Resource Planning and Estimation 7.1.1 Fixed Price Planning and Estimation 7.1.2 Enhancement Planning and Estimation 7.2 Scaling Resources 7.2.1 Fixed Price Scaling 7.2.2 Enhancement Scaling 7.3 Work Locations 7.3.1 Remote Work Locations 7.4 Subcontractor Management 7.5 Key Staff 7.6 Staff Replacement 7.6.1 Key Staff Replacement 7.6.2 Approval of Staff 7.6.3 Weekly Director's Roll-On/Roll-Off Report 7.7 Escalation Related to Staffing 8. ONBOARDING THROUGH OFFBOARDING 8.1 Contractor Onboarding Process 8.2 State Onboarding Process 8.3 Team Development and Training 8.3.1 Initial Development and Training 8.3.2 Ongoing Development and Training 8.4 Internal Project Resource Movements 8.5 Contractor Offboarding Process 8.6 State Offboarding Process 9. CONTRACTOR STAFFING MATRIX 9.1 Staffing Matrix Overview 9.1.1 Responsibility Assignment Matrix (RAM) 9.1.2 Contractor Staff: Names, Roles, Location (city, state, Country), planned start and end dates 9.1.3 Resource Staffing Chart 9.1.4 Position Descriptions 9.2 Staffing Matrix Maintenance 9.2.1 Staffing Matrix Baseline 9.2.2 Version Control and Changes to the Baseline 10. MASTER CONTACT AND INFORMATIONAL DATABASE (MCID) 11. PROJECT SCHEDULE RESOURCE MANAGEMENT 11.1 Enterprise Resource Pool 11.2 Project Schedule Resource Reporting 12. GLOSSARY AND ACRONYMS 12.1 New Acronyms and Terms APPENDIX 1: SOW TO DELIVERABLE TRACEABILITY CHECKLIST APPENDIX 2: DELIVERABLE COMPLIANCE AND VALIDATION CHECKLIST APPENDIX 3: ASSOCIATED ARTIFACTS APPENDIX 4: PMBOK STANDARDS MAPPING APPENDIX 5: DESK PROCEDURES

Req #	SOW Requirement
3.4.2-02 (new)	The Contractor shall only alter or modify this Deliverable's structure or content with <u>the approval</u> of the State Project Director or designee.
3.4.2-03 (modified)	The Contractor shall incorporate into the Staffing Management Plan changes in standards to be in accordance with the State approved version of the Project Management Institute (PMI ®), A Guide to the Project Management Body of Knowledge (PMBOK ® Guide), pertaining to Plan Human Resource Management. Refer to Appendix A-2, SPECIAL PROVISIONS, Section 7.7, UPDATES TO STANDARDS, REGULATIONS, AND CODES. As new versions of standards are available, adoption of the new standard will be considered through the change control process and approved by the State Project Director or designee.
3.4.2-04 (existing)	The Contractor shall describe within the Staffing Management Plan how the Contractor's team, including any Subcontractors, will be organized via the inclusion of an organization chart. The organization chart shall show all corporate entities, the Contractor (and Subcontractor) Staff names, positions, task assignments, relationships between Contractor Staff and Subcontractor Staff, and the proposed lines of authority and communication within the Contractor's team.
3.4.2-05 (existing)	The Contractor shall update the Staffing Management Plan to identify the Corporate Officer(s) to be contacted in the event that problems arise during the performance of the Contract.
3.4.2-06 (existing)	The Contractor shall update the Staffing Management Plan to include a matrix of major work activities and supporting processes versus organizational units to depict project roles and responsibilities.
3.4.2-07 (existing)	The Contractor shall update the Staffing Management Plan to ensure it is consistent with the Work Breakdown Structure (WBS) and the Master Work Plan.
3.4.2-08 (existing)	The Contractor shall update the Staffing Management Plan, in accordance with the project schedule, to include details of Staff, Staff allocation tracking, reporting, and interactions with State staff, including State and county subject matter experts.
3.4.2-09 (existing)	The Contractor shall update the Staffing Management Plan with any Contractor assumptions and constraints identified during effort and Staff estimating.
3.4.2-10 (existing)	The Contractor shall identify and differentiate between the CalHEERS Operations support team and the System development team within the Staffing Management Plan.
3.4.2-11 (existing)	The Contractor shall update the Staffing Management Plan with a description of how the Contractor's team will interact with State personnel, (e.g., Relationship Map, Staff locations, facilities, etc.).
3.4.2-12 (modified)	The Contractor shall update the Staffing Management Plan to include the understanding that the State maintains the option to replace project Staff at any time, for any reason.
3.4.2-13 (modified)	The Contractor shall update the Staffing Management Plan with a description of the Contractor's contingency/transition process to immediately and temporarily fill extended Staff absences due to vacations or illness.
3.4.2-14 (modified)	The Contractor shall update the Staffing Management Plan to describe the Contractor process for: 1. Onboarding staff. 2. Ensuring that all Contractor and Subcontractor Staff will comply with State guidelines pertaining to staffing, such as the completion of required Form 700 and biannual ethics training. 3. Ensuring compliance with the General Terms and Conditions and Special Provisions as it relates to staffing.
3.4.2-15 (modified)	The Contractor shall update the Staffing Management Plan to provide written desk procedures for each Staff member.
3.4.2-16 (existing)	The Contractor shall update these position descriptions periodically, but no less than quarterly, and make them readily available and accessible by all Project staff.
3.4.2-17 (existing)	The Contractor shall describe how Contractor Staff will interact with, utilize, and collaborate with State staff for all work performed by the Contractor.

Req #	SOW Requirement
3.4.2-18 (existing)	The Contractor shall identify assumptions and expectations for State staff who will be working alongside Contractor and Subcontractor Staff resources identified in the Contractor organizational chart.
3.4.2-19 (existing)	The Contractor shall document and maintain planned Staff assignments for Contractor Staff, including position/title, roll-on and roll-off dates (on-boarding / off-boarding), monthly hours, and the extent to which any work will be done offsite. This information must be readily available to and accessible by all Project staff.
3.4.2-20 (existing)	The Contractor shall be responsible for documenting, disseminating, and maintaining formal administrative processes and procedures for both State and Contractor Staff for the following areas at a minimum: 1. Roll-on and Roll-off (on-boarding / off-boarding) for all Contractor and State staff/resources, including but limited to activation / deactivation of all computer access 2. CalHEERS Project overviews and objectives 3. Contractor organization charts and roles and responsibilities 4. Project Processes, Procedures, Tools, Standards, and templates 5. Administrative items (e.g., e-mail lists, time tracking and weekly status reporting) 6. LAN, file, and web portal/SharePoint structures and key file locations 7. LAN, file, web portal/SharePoint access and remote access
3.4.2-21 (new)	The Contractor shall update DEL CD-3.4-2 Staffing Management Plan, to account for the Work from Home policy. Since COVID lockdowns, policies around work from home have become more common place within the State of California. Hybrid forms of work from home will be included under this contract. The Contractor shall update the Staffing Management Plan to identify how the Contractor will collaborate with the State as part of the onboarding planning and processing to determine which employees will be required to work at the CalHEERS office(s) or if they will be required to participate in a hybrid work from home / work at office model.
3.4.2-22 (new)	The State identifies and associates the following artifacts to the Staffing Management Plan. The Contractor shall adopt, update, maintain, and deliver these artifacts in accordance with Appendix 3 of this deliverable including, but not limited to: • Contractor Organizational Charts (~~D-3.4.3~~) • Master Contact and Informational Database (~~D-3.4.4~~)
3.4.2-23 (new)	The Contractor shall adopt and maintain all Project Artifacts that are associated with this Deliverable in the Project Artifact Inventory and manage them in accordance with the Project Artifact process.
3.4.2-24 (modified)	The Contractor shall attach to the Staffing Management Plan the following appendices: Appendix 1—SOW to Deliverable Traceability Checklist Description: A table that identifies the SOW requirements for this Deliverable, as specified within SOW Section 8, DELIVERABLES, and includes but is not limited to: 1. SOW Requirement ID # 2. SOW Requirement Text 3. Requirement Traceability (Define traceability of the requirements to the Deliverable) 4. Requirement Fulfillment (Define how the SOW requirements have been fulfilled by this Deliverable) Appendix 2—Deliverable Compliance and Validation Checklist Description: A QA Checklist that includes, but is not limited to: 1. Deliverable Section Number and Title 2. Deliverable Requirement Statement(s)

Req #	SOW Requirement
	3. Requirement Completion (How the Contractor will comply with or has complied with the requirement statements within the plan) 4. Validation Method (The method the Contractor used to validate Deliverable compliance) 5. The Contractor's QA Manager sign-off on compliance Appendix 3—Associated Artifacts Description: An extract from the Project Artifact Inventory List of artifacts associated with this Deliverable, and will include but is not limited to the following examples: 1. Artifact Name 2. Associated Parent DEL 3. State Approver 4. SI Point of Contact 5. Review Frequency 6. Submission Frequency 7. Artifact File Format 8. Artifact Location (e.g., SharePoint breadcrumb) 9. Link to artifact

3.4.3 Staffing Execution Requirements

3.4.3.1 Contractor Organizational Charts

Table 3-15: Contractor Organizational Charts

Req #	SOW Requirement
3.4.3-01 (new)	The Contractor shall staff, manage, lead and execute Staffing Management on the CalHEERS as defined in this Statement of Work and in accordance with the CD-3.4-2 – Staffing Management Plan.
3.4.3-02 (new)	At the State's request, the Contractor shall assist the State with the analysis and identification of State capacity and State resource constraints.
3.4.3-03 (new)	The Contractor shall consider within their approach to estimating enhancement work capacity and staffing the State's capacity and resource constraints.
3.4.3-04 (existing)	The Contractor shall have the ability to scale resources related to System development team change requests or enhancement work in order to meet the needs of CalHEERS.
3.4.3-05 (existing)	The Contractor shall document and maintain Contractor organizational charts at both summary and detailed levels (with details down to each individual).
3.4.3-06 (existing)	The Contractor shall document and maintain a Contractor organizational chart that depicts key Contractor Staff with their State staff counterparts.
3.4.3-07 (existing)	The Contractor shall make Contractor organizational charts readily available and accessible to all Project staff.
3.4.3-08 (existing)	The Contractor shall notify the State Project Director as soon as possible and promptly develop and complete transition and training plans for the new or reassigned replacement Staff when an unplanned, early Contractor employee or Subcontractor departure from the Project is unavoidable.
3.4.3-09 (new)	The Contractor shall collaborate with the State to develop and maintain any new Project Artifacts necessary to support this section. New artifacts shall be added to the Project Artifacts Repository and managed in accordance with the Project Artifact process.

3.4.3.2 Contractor Personnel

There are Contractor Staff identified as part of this Contract by which the State has conditions for their assignment. The requirements for each Key Staff are provided in SOW Section 2,

CONTRACTOR PERSONNEL.

3.4.3.3 Master Contact and Informational Database

Table 3-16: Master Contact and Informational Database

Req #	SOW Requirement
3.4.3-10 (modified)	The Contactor shall develop, update, deliver, and maintain the Master Contact and Informational Database, which includes but is not limited to the following: 1. Contact Information from the incumbent Contractor's or State's Contact lists via the Contractor developed/provided spreadsheet. The spreadsheet will provide the details grouped by State Staff, Contractor Key Staff, and Contractor Onshore Staff including, but not limited to: a. First Name b. Last Name c. Email d. Project Role e. Team f. Team Lead g. Organization Alignment h. Desk # (for State Staff and Contractor Key Staff) i. Project Phone Number j. Office Location (for Contractor Onshore Staff)
3.4.3-11 (existing)	The Contractor shall define the process for the development and maintenance of a Master Contact and Informational Database of all Project stakeholders and contacts, which must be available to the State Project Office.
3.4.3-12 (existing)	The Contractor shall develop, maintain and execute the Master Contact and Informational Database, which must have functionality to facilitate the generation of email distribution lists.
3.4.3-13 (existing)	The Contractor shall develop and maintain the Master Contact and Informational Database with the functionality to categorize and group the contacts to assist in contact identification.

3.4.3.4 Participation in Off Premises Meetings

Table 3-17: Participation in Off Premises Meetings

Req #	SOW Requirement
3.4.3-14 (existing)	The Contractor shall travel to and participate in regularly scheduled and ad hoc meetings, conferences, and teleconference calls with the State, counties, interface partners and other State agencies, as requested by the State Project Director or designee.
3.4.3-15 (existing)	The Contractor shall, at the request of the State Project Director or designee, facilitate and participate in periodic presentations and meetings with internal and external CalHEERS stakeholders including but not limited to CalHEERS staff, county staff, State and Federal stakeholders and special interest groups (e.g., Public Authorities, Labor Organizations).

3.5 RISK AND ISSUE MANAGEMENT

The Risk and Issue Management Plans document the recognition, analysis, planning, monitoring, and control of events that, should they occur, may result in a negative impact to project objectives. The Risk Management section describes how risk management will be structured and performed on the project. The Issue Management section supports the Contractor's efforts to ensure that any matter to consider, solve, or answer that may impact the

project, program, processes or System is reviewed, resolved and communicated in a closed loop process. The plan describes the Contractor's methods and techniques to identify, document, resolve, track and report issues.

3.5.1 Risk and Issue Management Plan

The Risk and Issue Management Plan documents the recognition, analysis, planning, monitoring, and control of events that, should they occur, may result in a negative impact to project objectives. The Plan also supports the Contractor's efforts to ensure that any matter that is impacting the project, program processes, or System is considered, solved, or answered in a closed loop process. The Plan describes how risk and issue management will be structured and performed on the project.

Table 3-18: Risk and Issue Management Plan (CD-3.5-1)

Req #	SOW Requirement
3.5.1-01 (new)	The Contractor shall adopt, enhance, deliver, and maintain a CalHEERS Risk and Issue Management Plan, which includes but is not limited to: 1. INTRODUCTION 1.1 Purpose 1.2 List of Reference Documents 1.3 Audience 2. SUMMARY 2.1 Scope 3. APPROACH 4. ASSUMPTIONS, CONSTRAINTS, AND RISKS 4.1 Assumptions 4.2 Constraints 4.3 Risks 5. REQUIREMENTS 6. ROLES AND RESPONSIBILITIES 6.1 Risk and Issue Management Roles and Responsibilities 7. RISK MANAGEMENT 7.1 Risk Management Processes 7.2 Risk Communication 7.2.1 Risk and Issue Management Group (RIMG) 7.3 Risk Identification 7.4 Risk Metrics and Analysis 7.4.1 Risk Probability 7.4.2 Risk Impact 7.4.3 Risk Exposure 7.4.4 Risk Assessment (High, Medium, Low) 7.4.5 Risk Triggers 7.4.6 Risk to Issue Trigger Date 7.5 Risk Analysis, Plan Implementation, Mitigation and Closure 7.5.1 Mitigation Plan 7.6 Risk Tracking and Reporting 7.6.1 Team Level Risk 7.6.2 RIMG Level Risk 7.7 Risk Control / Escalation 7.8 Conditional Approval 8. ISSUE MANAGEMENT 8.1 Issue Management Process 8.2 Issue Communication 8.3 Issue Identification

Req #	SOW Requirement
	8.4 Issue Documentation 8.5 Issue Analysis and Contingency 8.6 Issue Tracking and Reporting 8.7 Issue Resolution / Escalation 9. TOOLS 9.1 Risk and Issue Management Tools 9.2 EWM Tool 9.3 Excel and SharePoint 9.3.1 Security Risks 9.4 Tool Training 10. GLOSSARY AND ACRONYMS 10.1 New Acronyms and Terms APPENDIX 1: SOW TO DELIVERABLE TRACEABILITY CHECKLIST APPENDIX 2: DELIVERABLE COMPLIANCE AND VALIDATION CHECKLIST APPENDIX 3: ASSOCIATED ARTIFACTS APPENDIX 4: STANDARDS MAPPING
3.5.1-02 (new)	The Contractor shall only alter or modify this Deliverable's structure or content with the approval of the State Project Director or designee.
3.5.1-03 (modified)	The Contractor shall develop, update, and maintain the Risk and Issue Management Plan. The Risk Management portion of the plan shall be prepared in accordance with the State approved version of the Project Management Institute (PMI ®), A Guide to the Project Management Body of Knowledge (PMBOK ® Guide). Refer to Appendix A-2, SPECIAL PROVISIONS Section 7.7, UPDATES TO STANDARDS, REGULATIONS, AND CODES. Key areas covered in the plan shall include, but not be limited to: 1. Methodology (Approaches, tools, data sources) 2. Roles and Responsibilities 3. Budgeting 4. Timing (Frequency of risk management activities) 5. Risk Categories 6. Risk Probability/Impact 7. Stakeholder Tolerance 8. Risk Tracking/Reporting
3.5.1-04 (modified)	The Contractor shall also update the Risk Management section in accordance with the State approved ISO/IEC 16085:2006, IEEE Std 16085-2006 – Systems and software engineering - Life Cycle Processes - Risk Management (Annex A-Risk Management Plan). Refer to Appendix A-2, SPECIAL PROVISIONS, Section 7.7, UPDATES TO STANDARDS, REGULATIONS, AND CODES. As new versions of standards are available, adoption of the new standard will be considered through the change control process and approved by the State Project Director or designee.
3.5.1-05 (modified)	The Contractor shall update the Issue Management section to be compliant with ISO/IEC 14764, IEEE Std 14764-2006 - Software Engineering - Software Life Cycle Processes – Maintenance (Section 5-Maintenance, Section 7.3.3 Maintenance Plan Topics) and ISO/IEC 12207 IEEE Std 12207-2008 – Systems and software engineering – Software life cycle process (6.4.9.3.5-Operation problem resolution, 7.2.8-Software Problem Resolution Process). As new versions of standards are available, adoption of the new standard will be considered through the change control process and approved by the State Project Director or designee.
3.5.1-06 (existing)	The Contractor shall update the Issue Management section to include but not be limited to the following: 1. Methods and techniques to identify, document, resolve, track and report issues. 2. Methods to capture issues from the Contractor and stakeholders, including but not limited to the following users;

Req #	SOW Requirement
	a. CalHEERS Project Office staff b. Covered California staff c. DHCS staff d. Interface partners 3. Methods to define and describe roles and responsibilities for the Contractor and stakeholders in the issue management process. 4. Methods and timelines to communicate issue progress and resolution to issue initiators and CalHEERS Project Office staff. 5. Identification of support teams or groups that handle issue analysis and resolution, as well as installation of the resolution. 6. Identification of System resources and tools necessary to carry out documentation and analysis of the issues. (The Contractor will use the tools approved by and accessible by the State.) 7. Methods and techniques to detect trends in the issues reported. 8. Methods and techniques to capture and report issue related metrics. 9. Methods for integrating with the existing State Issue Management, Risk Management and Change Management Processes.
3.5.1-07 (existing)	The Contractor shall update the Issue Management section with the definitions of issue severity levels and provide guidance pertaining to the process and procedures on severity level assignment and prioritization.
3.5.1-08 (new)	The State identifies and associates the following artifacts to the Risk and Issue Management Plan. The Contractor shall adopt, update, maintain, and deliver these artifacts in accordance with Appendix 3 of this deliverable including, but not limited to: • Risk and Issue Management Tool • Action/Decision Items Process Guide • Raising a Decision Item Process Guide • Risk and Issue Process Guide • Decision Paper Template
3.5.1-09 (new)	The Contractor shall adopt and maintain all Project Artifacts that are associated with this Deliverable in the Project Artifact Inventory and manage them in accordance with the Project Artifact process.
3.5.1-10 (modified)	The Contractor shall attach to the Risk and Issue Management Plan the following appendices: Appendix 1—SOW to Deliverable Traceability Checklist Description: A table that identifies the SOW requirements for this Deliverable, as specified within SOW Section 8, DELIVERABLES, and includes but is not limited to: 1. SOW Requirement ID # 2. SOW Requirement Text 3. Requirement Traceability (Define traceability of the requirements to the Deliverable) 4. Requirement Fulfillment (Define how the SOW requirements have been fulfilled by this Deliverable) Appendix 2—Deliverable Compliance and Validation Checklist Description: A QA Checklist that includes, but is not limited to: 1. Deliverable Section Number and Title 2. Deliverable Requirement Statement(s) 3. Requirement Completion (How the Contractor will comply with or has complied with the requirement statements within the plan) 4. Validation Method (The method the Contractor used to validate Deliverable compliance) 5. The Contractor's QA Manager sign-off on compliance

Req #	SOW Requirement
	Appendix 3—Associated Artifacts Description: An extract from the Project Artifact Inventory List of artifacts associated with this Deliverable, and will include but is not limited to the following examples: 1. Artifact Name 2. Associated Parent DEL 3. State Approver 4. SI Point of Contact 5. Review Frequency 6. Submission Frequency 7. Artifact File Format 8. Artifact Location (e.g., SharePoint breadcrumb) 9. Link to artifact

3.5.2 Risk and Issue Execution Requirements

3.5.2.1 Risk and Issue Management Tool

Table 3-19: Risk and Issue Management Tool

Req #	SOW Requirement
3.5.2-01 (existing)	The Contractor shall take over, maintain, and execute the existing Risk and Issue management tool that, at a minimum, manages risks and issues separately, documents the description of the risks and issues, priority of the issue, dependencies and plans for resolution, team/Staff assignments, schedule impacts if appropriate, targeted and actual resolution dates, and the resolution action.
3.5.2-02 (existing)	The Contractor shall provide ongoing familiarity training on the use of the issue management tool to all CalHEERS Project staff.
3.5.2-03 (existing)	The Risk and Issue management tool must be widely and readily accessible for use by all CalHEERS Project staff.

3.5.2.2 Tracking and Resolving Issues

Table 3-20: Tracking and Resolving Issues

Req #	SOW Requirement
3.5.2-04 (new)	The Contractor shall staff, manage, lead and execute Risk and Issue Management on the CalHEERS as defined in this Statement of Work and in accordance with the CD-3.5-1 – Risk and Issue Management Plan.
3.5.2-05 (modified)	The Contractor's Issue Management process shall be a closed-loop process as defined in ISO/IEC 12207 IEEE Std 12207-2008 – Systems and software engineering – Software life cycle process (Section 6.4.9.3.5 - Operation problem resolution, Section 7.2.8 - Software Problem Resolution Process). As new versions of standards are available, adoption of the new standard will be considered through the change control process and approved by the State Project Director or designee.
3.5.2-06 (existing)	The Contractor's Key Staff associated with the issue shall participate in ad hoc, teleconference meetings upon the request of the State Project Director or designee.
3.5.2-07 (existing)	The Contractor shall track, manage, escalate and report on all project issues in compliance with the escalation process defined within the Risk and Issue Management Plan.
3.5.2-08 (existing)	The Contractor shall track and manage all project issues in the State identified or approved Issue Management Tool.

Req #	SOW Requirement
3.5.2-09 (modified)	The Contractor shall research, designate, track, and manage all issues utilizing the following priority rating scale: 1. Priority 1 Critical – Unacceptable impact to the project. 2. Priority 2 High – Major slip in major milestone or critical path impacted. 3. Priority 3 Medium – Minor slip in major milestone with no critical path impact. 4. Priority 4 Low – Minimal impact or minor project adjustment needed.
3.5.2-10 (existing)	The Contractor shall work with the CalHEERS Project Office personnel to resolve issues at the lowest level and escalate unresolved issues to the State Project Director or designee in accordance with the escalation procedures within the Risk and Issue Management Plan.
3.5.2-11 (new)	The Contractor shall collaborate with the State to develop and maintain any new Project Artifacts necessary to support this section. New artifacts shall be added to the Project Artifacts Repository and managed in accordance with the Project Artifact process.

3.5.2.3 Tracking and Resolving Risks

The Contractor shall use a robust, proven approach to risk identification, assessment, prioritization, monitoring, and mitigation that proactively raises awareness of risk areas and protects the interests of the CalHEERS Project. This approach must be clearly documented, understood, and accessible by all CalHEERS Project personnel. Risk reports generated from the Contractor's tool will become a part of the Contractor's Weekly and Monthly Status Reports.

Table 3-21: Tracking and Resolving Risks

Req #	SOW Requirement
3.5.2-12 (existing)	The Contractor shall be responsible for proactively advising the State, on an ongoing basis, of the potential risks related to the complexity of proposed CalHEERS System fixes and/or enhancements.
3.5.2-13 (existing)	The Contractor shall make Risk tracking details widely and readily accessible to all CalHEERS Project team members.
3.5.2-14 (existing)	The Contractor shall identify, track and manage risks in accordance with the Risk and Issue Management Plan.
3.5.2-15 (existing)	The Contractor shall input, track, and manage CalHEERS Project risks within the State identified risk management tool, in compliance with the Risk and Issue Management Plan.
3.5.2-16 (modified)	The Contractor shall use the Software Engineering Institute "Taxonomy Based Questionnaire," or similar risk identification aid approved by the State Project Director or designee, in accordance with the California Technology Agency, Information Technology Project Oversight Framework, SIMM Section 45 (Now the California Department of Technology) when performing risk analysis. Refer to Appendix A-2, SPECIAL PROVISIONS, Section 7.7, UPDATES TO STANDARDS, REGULATIONS, AND CODES.
3.5.2-17 (existing)	The Contractor shall report changes to risks or risk related activities in the Weekly Director's Report.

3.6 COMMUNICATION MANAGEMENT

The State places a high value and strong emphasis on timely, useful, and effective communications. The State believes that effective communication and transparency to Project Sponsors, Program Sponsors, and stakeholders are key factors in achieving success. The Contractor is expected to employ an approach to communication that is open, accurate, direct, and in the best interest of the CalHEERS Project and the State.

At the direction of the State, the Contractor will provide support to assist the State in communications with stakeholders, including the public.

The Contractor must implement structured, efficient communication protocols and methods to ensure that all CalHEERS sponsors and partners are informed of Project decisions, issues, risks, and statuses and that responsibility for dependencies, instructions, and touch-points are understood by all parties.

As part of the effective and open communication approach, the Contractor is expected to provide its strategy for communicating and working collaboratively with its Subcontractors to meet the Project objectives.

3.6.1 Communication Management Plan

The Communication Management Plan defines the framework for project information exchange in the form of timely, two-way communications between all CalHEERS stakeholders, users, and interface partners. The activities defined within the plan are focused to clarify expectations, build acceptance and commitment, and obtain active, effective participation to ensure adequate input, feedback, and problem resolution. The plan defines general communication types, roles and responsibilities, formal communication requirements, which include, frequency, audience, content, and media.

Table 3-22: Communication Management Plan (CD-3.6-1)

Req #	SOW Requirement
3.6.1-01 (modified)	The Contractor shall adopt, enhance, deliver, and maintain a CalHEERS Communication Management Plan, which includes but is not limited to: 1. INTRODUCTION 1.1 Purpose 1.2 List of Reference Documents 1.3 Audience 2. SUMMARY 2.1 Scope 2.2 Executive Summary Overview 3. APPROACH 4. ASSUMPTIONS, CONSTRAINTS, AND RISKS 4.1 Assumptions 4.2 Constraints 4.3 Risks 5. REQUIREMENTS 6. ROLES AND RESPONSIBILITIES 6.1 CalHEERS Contractor 6.2 CalHEERS State 6.3 Sponsors 6.4 Business Partners 6.5 Other Key Stakeholders 7. COMMUNICATION MANAGEMENT 7.1 Communication Process 7.1.1 Communication Methodology 7.1.2 Communication Paths 7.1.3 CalHEERS Governance 7.1.4 CalHEERS Contractor and State Single Points of Contact per Business Area 7.1.5 Process Guides 7.2 Formal Communication and Distribution 7.2.1 Official Correspondence (OC) 7.2.2 Decisions and Action Items 7.2.3 CITs

Req #	SOW Requirement
	7.2.4 CRFIs 7.2.5 Formal Project Meetings 7.2.6 Status Report and Meetings 7.2.7 Outage Notifications 7.2.8 News/Print Media, Audit Requests, and Public Requests 7.2.9 Audit Intake and Fulfillment Process 7.3 Informal Communication and Distribution 7.3.1 Project SharePoint 7.3.2 Process Guides 7.3.3 Electronic Mail 7.3.4 Instant Messaging 7.3.5 CalHEERS Town Hall Meetings 7.3.6 Informal Project Meetings 7.3.7 Surveys, Forms, Questionnaires 7.3.8 Education Sessions 7.3.9 CalHEERS Connection 7.4 Project Communication Channels 7.4.1 Sub-Contractor Services (e.g., and AWS) 7.4.2 Release and Outage Notifications 7.4.3 Project Management Communications 7.4.4 Change Management 7.4.5 Service Desk Services 7.4.6 Interface Management 7.4.7 Collaboration Activities with Data Center 7.5 External Communication and Distribution 7.5.1 CITs/CRFIs 7.6 Management Processes 7.6.1 Distribution of Communications 7.6.2 Tracking and Storage of Communications 7.6.3 Communication Protocols 7.7 Communications Feedback 7.7.1 Informal Feedback 7.7.2 Formal Feedback 7.7.3 Communication Surveys 7.8 Communication Tools 7.8.1 Communications Matrix 7.8.2 OCM Tracking Tool 7.8.3 Project Glossary 7.9 Strategic Priorities 7.9.1 Effective Communication 7.9.2 Sponsor and Partner Communication 8. GLOSSARY AND ACRONYMS 8.1 New Acronyms and Terms - APPENDIX 1: SOW TO DELIVERABLE TRACEABILITY CHECKLIST - APPENDIX 2: DELIVERABLE COMPLIANCE AND VALIDATION CHECKLIST - APPENDIX 3: ASSOCIATED ARTIFACTS - APPENDIX 4: PMBOK STANDARDS MAPPING
3.6.1-02 (new)	The Contractor shall only alter or modify this Deliverable's structure or content with the approval of the State Project Director or designee.
3.6.1-03 (modified)	The Contractor shall update and maintain the Communication Management Plan to also comply with the areas of the Project Communications Management section of the State approved version of the Project Management Institute (PMI ®), A Guide to the Project Management Body of Knowledge (PMBOK ® Guide). Refer to Appendix A-2, SPECIAL PROVISIONS, Section 7.7, UPDATES TO STANDARDS, REGULATIONS, AND

Req #	SOW Requirement
	CODES. As new versions of standards are available, adoption of the new standard will be considered through the change control process and approved by the State Project Director or designee.
3.6.1-04 (existing)	The Contractor shall update the Communication Management Plan to define the methodology for project information exchange, both within and outside the project, to ensure comprehensive and timely two-way communication between all CalHEERS stakeholders, end users, business/interface partners, and service providers. The Plan shall include the identification of a Single Point of Contact (based on roles) plus a backup for each business area for both the State and Contractor Teams to facilitate timely communication.
3.6.1-05 (modified)	The Communication Management Plan shall show the processes that will provide two-way program, project management, and operations communications between all stakeholders, users and interface partners: 1. Covered California (also known as the California Health Benefit Exchange) 2. Department of Health Care Services (DHCS) 3. Office of Technology & Systems Integration (OTSI) 4. CalHEERS Project Office 5. Department of Managed Health Care (DMHC) 6. California Department of Insurance (CDI) 7. California Technology Agency (CTA) 8. California Department of Social Services (CDSS) 9. Centers for Medicare and Medicaid Services (CMS) 10. California Health and Human Services (CalHHS) Agency 11. California Department of Finance (DOF) 12. County Welfare Directors Association (CWDA) 13. Statewide Automated Welfare System (SAWS) Consortia 14. California County Welfare Departments 15. Business Partners/Interface Agencies 16. CalHEERS end users
3.6.1-06 (existing)	The Contractor shall update and maintain the Communication Management Plan to include but not be limited to: 1. Identification of general communication roles and responsibilities for the Contractor, Sponsors and all other key stakeholders. 2. Identification of formal communication requirements, including type of communication, frequency, audience, content, and media, including routine communications (e.g., status reports, release notes and briefings). 3. A process for the development and maintenance of a Master Contact and Informational Database of all project stakeholders and contacts.
3.6.1-07 (existing)	The Communication Management Plan shall identify the processes that will also maintain effective and transparent communication channels with the State and stakeholders to include communications associated with, but not limited to: 1. Contractor services 2. M&O services 3. Project management 4. Change management 5. Service desk services 6. Interface management 7. Collaboration with cloud hosting data center services
3.6.1-08 (modified)	The Contractor shall attach to the Communication Management Plan the following appendices: Appendix 1—SOW to Deliverable Traceability Checklist

Req #	SOW Requirement
	Description: A table that identifies the SOW requirements for this Deliverable, as specified within SOW Section 8, DELIVERABLES, and includes but is not limited to: 1. SOW Requirement ID # 2. SOW Requirement Text 3. Requirement Traceability (Define traceability of the requirements to the Deliverable) 4. Requirement Fulfillment (Define how the SOW requirements have been fulfilled by this Deliverable) Appendix 2—Deliverable Compliance and Validation Checklist Description: A QA Checklist that includes, but is not limited to: 1. Deliverable Section Number and Title 2. Deliverable Requirement Statement(s) 3. Requirement Completion (How the Contractor will comply with or has complied with the requirement statements within the plan) 4. Validation Method (The method the Contractor used to validate Deliverable compliance) 5. The Contractor's QA Manager sign-off on compliance Appendix 3—Associated Artifacts Description: An extract from the Project Artifact Inventory List of artifacts associated with this Deliverable, and will include but is not limited to the following examples: 1. Artifact Name 2. Associated Parent DEL 3. State Approver 4. SI Point of Contact 5. Review Frequency 6. Submission Frequency 7. Artifact File Format 8. Artifact Location (e.g., SharePoint breadcrumb) 9. Link to artifact
3.6.1-09 (new)	The State identifies and associates the following artifacts to the Communication Management Plan. The Contractor shall adopt, update, maintain, and deliver these artifacts in accordance with Appendix 3 of this deliverable including, but not limited to: • CalHEERS Director's Report • Monthly Report Summary • Operations Management Report • Operations Weekly Summary Report • Quarterly Status Report • Ad-Hoc CIT Intake Form Quick Reference Guide • CalHEERS CIT QA Process Checklist • CalHEERS Communications Process Guide • CalHEERS Connection Committee • CalHEERS County Training Coordinator Distribution List M&O Process Guide • CalHEERS Director's Report Process Guide • CalHEERS Information Transmittal (CIT) Process • CalHEERS Internal CRFI Process Guide • CalHEERS Project Agenda Template • CalHEERS Request for Information (CRFI) • CalHEERS Request for Information (CRFI) Process Flow • CIT Request Log • CIT/AP process Flow • CIT_0053-20_CalHEERS Service Desk Process Guide

Req #	SOW Requirement
	• CRFI Daily Report • CRFI Tracker List • CD-3.6.1 Communication Management Plan Project Focus Area Points of Contact • Directors Report Color Guidelines • Meeting Invite Etiquette • Meeting Management Guidelines and Expectations Process Guide • Multiple Milestones Process Flow
3.6.1-10 (new)	The Contractor shall adopt and maintain all Project Artifacts that are associated with this Deliverable in the Project Artifact Inventory and manage them in accordance with the Project Artifact process.

3.6.2 Communication Management Execution

The Contractor is expected to actively participate in and support the communication management processes of the project.

Table 3-23: Communication Management Execution

Req #	SOW Requirement
3.6.2-01 (new)	The Contractor shall staff, manage, lead and execute Communications Management on the CalHEERS as defined in this Statement of Work and in accordance with the CD-3.6-1 – Communication Management Plan.
3.6.2-02 (existing)	The Contractor shall actively participate with CalHEERS Project Management Office (PMO) to provide effective communication and coordination with the large and diverse stakeholder group, both internal and external to the project.
3.6.2-03 (existing)	The Contractor shall help prepare for and participate in periodic and ad hoc meetings and presentations to the State, County, and Federal Stakeholders, workgroups, and other committees regarding project plans, status, risks, issues and recommendations, as appropriate.
3.6.2-04 (existing)	The Contractor's Key Staff shall participate in weekly status meetings with the State Project Director, or designee, and other members of the State Project Team.
3.6.2-05 (existing)	The Contractor shall follow a preset agenda jointly prepared by Contractor Project Manager and State Project Director or designee for status meetings.
3.6.2-06 (existing)	The Contractor Project Manager shall assist the State Project Director or designee in preparing special reports and presentations related to Project Management.
3.6.2-07 (existing)	The Contractor shall maintain and update the CalHEERS Project phone lists, including global contact lists, for use by the CalHEERS Project.
3.6.2-08 (existing)	The Contractor shall maintain and update the CalHEERS Project e-mail distribution groups for use by the CalHEERS Project.
3.6.2-09 (new)	The Contractor shall create, develop, and maintain the project SharePoint site with the use of custom SharePoint pages to surface processes, statuses, and other project documentation that is agreed upon by the State Project Team. Additionally, the SharePoint site shall include a user experience that makes document, page, and list search and navigation intuitive, accessible, and responsive for project staff.

Req #	SOW Requirement
3.6.2-10 (existing)	The Contractor shall be responsible for meeting facilitation and taking meeting minutes/notes, for all meetings identified by the State Project Director or designee. Meetings shall be prepped and executed in accordance with the relevant project process guides. The minutes/notes shall include but not be limited to the following: 1. List of attendees 2. Meeting purpose 3. Summary of the topics and meeting materials reviewed 4. Identifying, documenting, and tracking of decision items, action items, risks, or issues discussed, assigned, or resolved 5. Next steps 6. Accomplishments
3.6.2-11 (new)	The Contractor shall have a dedicated location on the Project SharePoint that aligns to SOW Section 3.7, DOCUMENT MANAGEMENT. Meeting materials shall be stored in the indicated locations and available for participant use prior to scheduled meetings and updated and available after scheduled meetings.
3.6.2-12 (new)	The Contractor shall confirm with the State at the start of all meetings, that all attendees necessary, from both the Contractor and State entities, are present to adequately address all agenda topics. For meetings where the attendees are not available, the Contractor shall reschedule.
3.6.2-13 (new)	The Contractor shall collaborate with the State to develop and maintain any new Project Artifacts necessary to support this section. New artifacts shall be added to the Project Artifacts Repository and managed in accordance with the Project Artifact process.

3.6.3 CalHEERS Director's Report

Table 3-24: CalHEERS Director's Report

Req #	SOW Requirement
3.6.3-01 (Modified)	The Contractor shall adopt, maintain and deliver the CalHEERS Director's Report on a weekly basis. The reports shall include the following: • Directors' Priorities • Project Calendar for the Week • Pre-JAD/JAD Calendar • Release Status by Release • Roadmap CR Status • Color Guidelines for Release Dashboards • Feature/Priority Release Status • Action Items & Decision items • User Centered Design • Agile Program Update • Pipeline • Prioritized CRs • Special Projects • Non-Release Based CR Status • Readiness • Defect Management • Warranty Defects (Priority 1 to Priority 4) • Non-Production Defects (Warranty/Warranty Triage) • Release Defect Analysis • Incident and Service Management Metrics • Environment Status • Connectivity

Req #	SOW Requirement
	• Application Operations • Production Activities • Interfaces • Renewals/Open Enrollment • APTC Recalculations • Notices • Email Generation to Consumers • Financial Management Processing • Data Warehouse • Root Cause Analysis (RCA) Submissions • Policy & Audit Requests • IV&V / QA • Contract Management • Project Training • PMO • Deliverables and Work Products • Risks and Issues • Project Communications • Staffing • Transition
3.6.3-02 (existing)	The Contractor shall provide written status reports at least 24 hours prior to the weekly meetings.
3.6.3-03 (existing)	The Contractor shall provide status reports that describe the previous week's activities, deficiencies encountered - highlighting those that may need to be addressed before proceeding to the next activities - their disposition, results of testing, and whether or not deadlines were met.
3.6.3-04 (existing)	In addition to the development and submission of CalHEERS M&O Quarterly Status Report, the following Contractor Staff, at a minimum, shall participate, in person, in weekly project status meetings with the CalHEERS Project Office, located in Sacramento, California: 1. Project Director 2. Project Management Office Manager 3. System Architect 4. Transition Manager * * Shall attend weekly meetings only during Contract Start, Transition-In and Transition-Out
3.6.3-05 (existing)	During the weekly project status meetings, the Contractor shall, at a minimum, present the following: 1. A summary of the status of active work plans including, but not limited to: a. Issue status b. Risks status c. Work Authorization d. Deficiency Status e. Lessons Learned f. Business Change Management Status g. Status of any additional activities as requested by the State Project Director or designee. h. An overview of tasks scheduled to start or be completed in the next reporting period.
3.6.3-06 (existing)	The Contractor shall present a summary of release management activities, schedule and progress, at the weekly Status meeting.

Req #	SOW Requirement
3.6.3-07 (existing)	As required by the State Project Director or designee, additional Contractor Staff shall attend weekly status meetings, in person, at the CalHEERS Project Office located in Sacramento, California, or attend via conference call.

3.6.4 Monthly Report Summary

The Monthly Report Summary will be a reporting System by which the Contractor reports on the overall health of the CalHEERS Project as well as other indicators that are beneficial to the State in managing and communicating the overall project health to stakeholders.

Table 3-25: Monthly Report Summary

Req #	SOW Requirement
3.6.4-01 (existing)	The Contractor shall produce a monthly report summary that compares actual performance of the Contractor to budgeted Charges and dates in the Schedule.
3.6.4-02 (existing)	The Contractor's monthly report shall be a Work Product provided by the Contractor in accordance with this Contract.
3.6.4-03 (existing)	The Contractor shall promptly provide summary reports to the State Project Director or designee for the following: 1. Significant or serious deficiencies 2. Risks/concerns with System hosting services 3. Concerns with the quality, design, development or implementation of changes Any other circumstances which have, or if not remedied will likely have, a significant or serious negative impact on the Project, the System, the hosting services, and the design development and implementation of changes thereof.

3.6.5 Quarterly Status Report

The Quarterly Status Report organizes and summarizes the CalHEERS performance and presents the results of analyses required by the State including, but not limited to, Contract requirements and performance measurement baselines. These reports provide status and progress information, at the level of detail required by the various stakeholders, as documented in the Communications Management Plan.

Table 3-26: Quarterly Status Report

Req #	SOW Requirement
3.6.5-01 (existing)	The Quarterly Status Report shall be prepared in accordance with ISO/IEC 14764 IEEE Std 14764-2006 – Software Engineering – Software Life Cycle Processes – Maintenance (7.3.2 - The maintenance plan, 7.3.3 - Maintenance plan topics).
3.6.5-02 (existing)	The Contractor shall prepare the Quarterly Status Report in accordance with the most current version of the Project Management Institute (PMI ®), A Guide to the Project Management Body of Knowledge (PMBOK ® Guide) section pertaining to Performance Reporting.

Req #	SOW Requirement
3.6.5-03 (existing)	The Contactor shall update the Quarterly Status Report to include, at a minimum, the following: 1. Identification, overview and timeline of major activities 2. Executive Status Dashboards as defined by the State, including but not limited to, (scope, schedule, cost, risk, quality, staffing, resources, percent completion) 3. Work completed during current reporting period 4. Work to be completed during the next reporting period 5. Transition status (During Transition Phase only) 6. Stakeholder Management activities as defined by the State, including but not limited to (Release Notes, Informational Notice, Training). 7. Quality Management activities as defined in the Quality Management Plan (QMP). 8. Infrastructure maintenance activities as defined by the State, including but not limited to, the amount of downtime that occurred in the previous calendar month. 9. Public outreach activities and results as defined by the State. 10. Process Improvement activities as defined by the State and the PMM/Process Improvement Progress Report. 11. Major Milestone Schedule Summary, including but not limited to: a. Release Milestones b. Release Planning (to include operational infrastructure changes) c. Release Analysis and Design d. Release Test e. Release Readiness f. Post Statewide Implementation g. Transition Out Review h. System Performance Management 12. The following metrics that are detailed in the QMP - Metrics Planning a. Staffing Management Metrics b. Issue Management Metrics c. Risk Management Metrics
3.6.5-04 (existing)	The Contractor shall include in the Quarterly Status Report the estimated and actual release effort and costs by release phase.
3.6.5-05 (existing)	The Contractor shall provide in the Quarterly Status Report, to the State Project Director or designee, with software maintenance updates.
3.6.5-06 (existing)	Upon transition completion, the Contractor shall maintain and update the Milestone Schedule Summary and include this summary within the Quarterly Status Report.
3.6.5-07 (existing)	The Contractor Senior Management and Subcontractor Senior Management shall meet on a Quarterly basis with executives of the State sponsoring departments for the Contractor Project Management to report the status of the project.

3.7 DOCUMENT MANAGEMENT

3.7.1 Document Management Plan

The Document Management Plan assists in the development, revision, maintenance, storage, and submission of CalHEERS Project documentation. The plan provides a reference to the comprehensive list of Deliverable documents detailing the proposed audience, document description and proprietary classification. The plan is a guide to developing quality CalHEERS project documentation that meets or exceeds Contract requirements and best practices.

Table 3-27: Document Management Plan (CD-3.7-1)

Req #	SOW Requirement
3.7.1-01 (modified)	The Contractor shall adopt, enhance, deliver, and maintain a CalHEERS Document Management Plan, which includes but is not limited to: 1. INTRODUCTION 1.1 Purpose 1.2 List of Reference Documents 1.3 Audience 2. SUMMARY 2.1 Scope 3. APPROACH 3.1 How Documents are Reviewed and Approved 3.2 How Documents are Tracked (Document Type Matrix) 4. ASSUMPTIONS, CONSTRAINTS AND RISKS 4.1 Assumptions 4.2 Constraints 4.3 Risks 5. REQUIREMENTS 6. ROLES AND RESPONSIBILITIES 7. DOCUMENT STORAGE MANAGEMENT 7.1 SharePoint Overview 7.1.1 SharePoint Structure/Hierarchy 7.1.2 SharePoint Access 7.1.3 SharePoint Permissions 7.1.4 OTSI Transition SharePoint 7.1.5 SharePoint Clean-Up 7.1.6 SharePoint Maturity 7.2 EWM Overview 7.2.1 EWM Structure/Hierarchy 7.2.2 EWM Access 7.3 O365 Outlook Overview 7.3.1 O365 Outlook Structure/Hierarchy 7.3.2 O365 Outlook Access 7.4 Microsoft Teams Overview 7.4.1 Microsoft Teams Structure/Hierarchy 7.4.2 Microsoft Teams Access 7.5 Managing Documents with Sensitive Data 8. DOCUMENT REVIEW PROCESSES 8.1 CRFI Process 8.2 Deliverable Development and Review Process 8.2.1 Deliverable Development and Review Process Responsibilities 8.3 CalHEERS Information Transmittal (CIT) Process 8.3.1 CalHEERS Information Transmittal (CIT) Process Responsibilities 8.4 Audit/Legislative/RFI Process 8.4.1 Official Correspondence Process Responsibilities 8.5 Work Product Process 8.5.1 Work Product Process Responsibilities 8.6 State-Owned Processes 8.7 Process References to Outside Deliverables 9. RECORDS MANAGEMENT AND RETENTION POLICY 9.1 OTSI Records Management Policy 9.1.1 OTSI Records Management Documentation 9.1.2 Process to Decommission or Archive Documents 9.2 Storage Repository Retention Policies

Req #	SOW Requirement
	9.2.1 SharePoint Retention Policy 9.2.2 EWM Retention Policy 9.2.3 O365 Outlook Retention Policy 9.2.4 Microsoft Teams Retention Policy 9.2.5 ALM Retention Policy 9.2.6 SNOW Retention Policy 10. DOCUMENT PUBLICATION, TOOLS, AND MAINTENANCE 10.1 In SharePoint 10.2 In EWM 10.3 In O365 Outlook 10.4 In Microsoft Teams 10.5 In ALM 10.6 In SNOW 11. DOCUMENTATION ACCURACY 12. WRITING STYLE GUIDELINES AND TEMPLATES 13. GLOSSARY AND ACRONYMS 13.1 New Terms and Acronyms APPENDIX 1: SOW TO DELIVERABLE TRACEABILITY CHECKLIST APPENDIX 2: DELIVERABLE COMPLIANCE AND VALIDATION CHECKLIST APPENDIX 3: ASSOCIATED ARTIFACTS APPENDIX 4: IEEE STANDARDS
3.7.1-02 (new)	The Contractor shall only alter or modify this Deliverable's structure or content with the approval of the State Project Director or designee.
3.7.1-03 (modified)	The Contractor shall update the Document Management Plan to be compliant with current ISO/IEC/IEEE 15289, Second Edition 2015-5-15, Systems and software engineering – Content of life-cycle information items (documentation) (10.24-Documentation Plan) pertaining to the Document Process. As new versions of standards are available, adoption of the new standard will be considered through the change control process and approved by the State Project Director or designee.
3.7.1-04 (existing)	The Contractor shall define within the Document Management Plan the style guidelines and templates to be utilized by the Contractor in creating the various types of project documentation.
3.7.1-05 (existing)	The Contractor shall update the Document Management Plan to detail the documentation process, including design and development, publication, tools, and maintenance.
3.7.1-06 (existing)	The Contractor shall update the Document Management Plan to include a reference to SOW Section 8, DELIVERABLES, which includes a comprehensive list of Deliverable documents detailing their SOW reference location, functional process area, and update frequency, along with other subsections describing the preparation, submission, and approval of deliverables.
3.7.1-07 (modified)	Following acceptance of gap analysis, the Contractor shall accurately make all necessary updates and establish a comprehensive electronic artifact repository utilizing Content Management best practices.
3.7.1-08 (new)	The Contractor shall include compliance with Government Code 12168.7 for document retention.
3.7.1-09 (new)	The Contractor shall create a new Section for SharePoint maturity to establish, document, facilitate, and maintain Content Management activities specifically for the Project SharePoint that utilizes existing functionality to support deliverable management, artifact and other artifact type management, and working document management for ease of use, easy search, document updates, and archive and storage.
3.7.1-10 (new)	The Contractor shall ensure that SharePoint Administrative staff have the necessary SharePoint qualifications to develop and utilize SharePoint functionality to mature the use of the Project SharePoint for document and content management.

Req #	SOW Requirement
3.7.1-11 (new)	The Contractor shall in collaboration with the State utilize Content Management to structure the Project SharePoint site to support Navigation, SharePoint Pages, and Search to make the user experience intuitive and understandable,
3.7.1-12 (new)	The Contractor shall in collaboration with the State support Document Management, Communication Management, Quality Management, and other teams to create content utilizing SharePoint functionality to support including, but not limited to: • Onboarding Page • Offboarding Page • Training Page(s) • Organization Change Management activities Page • Deliverables Overview by SOW Section Page(s) • Specific High-Visibility Processes Page(s), that are used by multiple teams • Team Overview Page(s) (i.e. PMO, Technical, Functional, etc.) • Working Documents Page(s)/Libraries/Sites
3.7.1-13 (new)	The Contractor shall develop, maintain, and update in collaboration with the State a Content Management process to support the use and structure of the Project SharePoint and allow for the request for Content Changes as new efforts, processes, activities, or updates are discovered during the life of the project.
3.7.1-14 (new)	The Contractor shall establish and maintain a Content Management audit review process and submit a report on a 6-month basis that recommends updates to the Project SharePoint structure, page and library updates, archiving, and records management.
3.7.1-15 (new)	The Contractor shall collaborate with the State on which recommendations to implement, what OCM and CPI tasks that may need to be created, modified, implemented, and communicated to CalHEERS Project staff, and the timeframes involved as part of each 6-month effort.
3.7.1-16 (new)	The State identifies and associates the following artifacts to the Document Management Plan. The Contractor shall adopt, update, maintain, and deliver these artifacts in accordance with Appendix 3 of this deliverable including, but not limited to: • Content Management Audit Process • Content Management Audit Report • Annual DEL Process Guide Step Diagram • Annual Deliverable Review Process Guide • Business Process Flowchart Standards Guide • CalHEERS DED Template • CalHEERS DEL Template • CalHEERS Project Deliverables Deloitte Author - Overview • CalHEERS Project Deliverables Deloitte Author - Role & Responsibilities • CalHEERS Project Deliverables State Owner - Overview • CalHEERS Project Deliverables State Owner - Role & Responsibilities • CalHEERS Project Deliverables Training Curriculum • Corrective Action Plan Template • DEL Exception Updates Process Guide • Deliverable & Work Product Development and Review Process • Deliverable Management Process • Deliverable Prioritization Recommendation Report • Deliverable Prioritization Recommendation Report Process • Deloitte Deliverable Development-Review Process Guide • Document Types Matrix • D-X.X-X Deliverable Name_Kick-Off Meeting (Template) • SDMO Deliverables Tracker • State Annual Deliverable Development and Review Process Guide • State Deliverable Development-Review Process Guide

Req #	SOW Requirement
3.7.1-17 (new)	The Contractor shall adopt and maintain all Project Artifacts that are associated with this Deliverable in the Project Artifact Inventory and manage them in accordance with the Project Artifact process.
3.7.1-18 (modified)	The Contractor shall attach to the Document Management Plan the following appendices: Appendix 1—SOW to Deliverable Traceability Checklist Description: A table that identifies the SOW requirements for this Deliverable, as specified within SOW Section 8, DELIVERABLES, and includes but is not limited to: 1. SOW Requirement ID # 2. SOW Requirement Text 3. Requirement Traceability (Define traceability of the requirements to the Deliverable) 4. Requirement Fulfillment (Define how the SOW requirements have been fulfilled by this Deliverable) Appendix 2—Deliverable Compliance and Validation Checklist Description: A QA Checklist that includes, but is not limited to: 1. Deliverable Section Number and Title 2. Deliverable Requirement Statement(s) 3. Requirement Completion (How the Contractor will comply with or has complied with the requirement statements within the plan) 4. Validation Method (The method the Contractor used to validate Deliverable compliance) 5. The Contractor's QA Manager sign-off on compliance Appendix 3—Associated Artifacts Description: An extract from the Project Artifact Inventory List of artifacts associated with this Deliverable, and will include but is not limited to the following examples: 1. Artifact Name 2. Associated Parent DEL 3. State Approver 4. SI Point of Contact 5. Review Frequency 6. Submission Frequency 7. Artifact File Format 8. Artifact Location (e.g., SharePoint breadcrumb) 9. Link to artifact

3.7.2 Document Management Execution

Table 3-28: Document Management

Req #	SOW Requirement
3.7.2-01 (new)	The Contractor shall staff, manage, lead and execute Document Management on the CalHEERS as defined in this Statement of Work and in accordance with the CD-3.7-1 – Document Management Plan.
3.7.2-02 (existing)	The Contractor shall manage and maintain the documentation needs of the CalHEERS Project in accordance with the Document Management Plan.
3.7.2-03 (existing)	The Project Management Office Project Manager and Contract Manager shall participate in Deliverable status meetings in person; additional Contractor Staff shall attend the meetings upon the request of the State Project Director or designee.

Req #	SOW Requirement
3.7.2-04 (new)	Any changes to documentation associated with the statement of work, shall be covered as part of the fixed cost. Some examples are, but not limited to: • Update Documentation for any deficiency or out of sync issues with existing project processes. • Deficiencies found in System Design Documentation. • The Contractor will be responsible for the System and documentation at transition, and to correct and bring current any documentation changes. • Deficiencies found in project artifacts, including but not limited to: deliverables, work products, Standard Operating Procedures (SOP), reports, and process guides.
3.7.2-05 (new)	The Contractor shall utilize and maintain a Document Type Matrix that identifies the types of documents on the CalHEERS Project and the review process they will follow. The Matrix is a reference tool for understanding various data points related to documents that are managed within the Project SharePoint. Initial data points include, but are not limited to: • Document Category • Document Type • Repository • Standard Template? • Document/Template Update Frequency • Ownership (Contractor or the State) • Responsible Team • Review Process • Retention Policy • Purpose • Audience • Media • Content
3.7.2-06 (new)	The Contractor shall develop and execute an Annual Deliverable Prioritization process, in cooperation with the State, to maximize the use of deliverable review and approval timeframes in each calendar year. This process will be reviewed and executed annually.
3.7.2-07 (new)	The Contractor shall conduct a review of all deliverables and provide the State with a Deliverable Prioritization Recommendation Report, identifying which deliverables the Contractor believes should be reviewed annually and which deliverables should be reviewed on an alternate cadence, specifying the alternate cadence.
3.7.2-08 (new)	The Contractor shall hold the Annual Deliverable Prioritization meeting by the end of February of each year where the Contractor and the State review the Deliverable Prioritization Recommendation Report and prioritize what deliverables should be scheduled for review within the year.
3.7.2-09 (new)	The Contractor shall update the SDMO Workplan with the prioritized deliverables identified as an outcome of the Annual Deliverable Prioritization meeting within two weeks.
3.7.2-10 (new)	The Contractor shall ensure that any deliverables that were not reviewed in the previous year are included in the prioritization recommendations for the following year.
3.7.2-11 (new)	During a given year, the Contractor shall include the review of any deliverables that the State Project Director or designee deems necessary into the current year.

Req #	SOW Requirement
3.7.2-12 (new)	The Contractor shall develop and execute a Project Artifact Process, in cooperation with the State to: • Maintain the currency of artifacts as determined during the review of the artifact's parent deliverable. • Align artifacts to document management standards. • At a minimum update all artifacts every three years. The approval of a parent deliverable is not tied to the update of a child artifact. • Notify the State on which artifacts will be updated and allow the State to formally review any artifact at the State's discretion. • Maintain all artifact sources of truth. • Maintain all artifact version history and update status. • Development and maintenance of new artifacts in collaboration with the State team that owns a particular parent deliverable. • Maintain a clear and organized metadata structure of all artifacts to support ease of search, representation on SharePoint Pages, or filtering and sorting. This structure should allow for the information to be viewed in various ways, such as, but not limited to: - o Grouped by Parent deliverable. - o Grouped by SOW Section. - o Grouped by Business Process. - o Date of last update. - o Other tagged metadata as determined in collaboration with the State Team that owns a parent deliverable and associated artifacts. • Develop and maintain a process to create, maintain, and retire an artifact's source document and the document that is viewable by users.
3.7.2-13 (new)	The Contractor shall collaborate with the State to develop and maintain any new Project Artifacts necessary to support this section. New artifacts shall be added to the Project Artifacts Repository and managed in accordance with the Project Artifact process.

3.7.2.1 Access to Documentation Content

As CalHEERS entered the M&O life cycle, many of the documents that support M&O activities have already been created and are maintained through the document management processes. However, for this Contract, the Contractor will be updating existing documentation based on System/software changes or process improvement initiatives. The State expects the Contractor to maintain the documentation to reflect the CalHEERS current state and grant the State full and unhindered access to this information.

NOTE: Documentation includes, but is not limited to: deliverables, work products, user guides, processes, procedures, and all other forms of documentation used in support of the CalHEERS Project and System as also identified in Section A-2 Special Provisions Section 8.4.2 DOCUMENTATION ACCESS.

Table 3-29: Access to Documentation Content and Source Data

Req #	SOW Requirement
3.7.2-14 (modified)	The Contractor shall provide access to all formal draft and final versions of all documentation on the CalHEERS Project SharePoint site for accessibility by all State Project staff, QA, IV&V and oversight consultants.
3.7.2-15 (existing)	The Contractor shall provide access to the State Project Director, or a designee, and CalHEERS staff to all Deliverable work in progress. This allows the State to comment on and support Deliverable preparation.

Req #	SOW Requirement
3.7.2-16 (existing)	The Contractor shall place and maintain all Deliverable development work and formally approved deliverables within the State designated tool.
3.7.2-17 (existing)	The Contractor shall provide access, as directed by the State Project Director or designee, to any tool required to enable the State to view Contractor deliverables or project data from State staff workstations within one (1) week of Contractor implementation of the tool. Examples include but are not limited to: deliverables, source code, test script data, issue and risk data, service desk ticket data, defects, status and operational reports, and related data.
3.7.2-18 (existing)	Upon the State's request, the Contractor shall make Staff, resources, processes, data, tools, and deliverables available for State Quality Assurance (QA) and Verification and Validation (V&V) audits and inspections at no additional cost to the State.
3.7.2-19 (existing)	The deliverables and services being provided by Contractor and its Subcontractors, if any, pursuant to this Contract, shall be available for inspection and review at any reasonable time by representatives of the State or Federal government upon 24 hours advance notice.

3.7.3 Project Artifacts

The Contractor shall develop a Project Artifact repository and inventory list to store artifacts that are developed as part of SOW 3.13, other procedures, and reports or tools, and maintain traceability of an artifact to its parent deliverable. This repository will be a frequently used location by multiple project staff and requires organization to make documents easy to find. To facilitate the ease of use for finding process guides in fewer clicks by users, the Contractor shall develop SharePoint pages that surface current versions of related processes from the Project Process Guides repository related to an overarching process, e.g., release management.

Many management plans have associated artifacts that will be delivered on a regular basis by the Contractor. These artifacts support processes that are outputs in the execution of their associated management plan. Artifact types have different purposes, audiences, due dates, and formats.

An artifact inventory will be used to maintain the list of project artifacts and linkage to where the document resides or the SharePoint pages where the process resides. There are several project team process guides that reside in team level folders.

An Artifact Appendix 3 will be included in numerous deliverables with the associated artifacts and information listed in the requirement below.

Table 3-30: Project Artifact Inventory (CD-3.7-2)

Req #	SOW Requirement
3.7.3-01 (new)	The Contractor shall create, adopt, organize, track, and maintain a Project Artifact repository. All Contractor delivered artifacts shall be associated to the existing parent deliverable in the Project SharePoint.
3.7.3-02 (new)	The Contractor shall develop and maintain Project SharePoint pages to facilitate ease of use for project staff to search for, find, and review process artifacts without visiting the Project Artifact repository (refer to SOW 3.6.2 COMMUNICATION MANAGEMENT EXECUTION).
3.7.3-03 (new)	The Contractor shall allow State developed process guides or desk reference materials to be included in the Project Artifact repository regardless of association to a deliverable.
3.7.3-04 (new)	The Contractor shall develop filterable Project Process Guide SharePoint pages to display only current versions of a process grouped by process area for context, while retaining previous versions in the Project Artifact repository.

Req #	SOW Requirement
3.7.3-05 (new)	The Contractor shall defer to the State on Artifacts that are not stored in the Project Artifact repository, but still track and support their creation, maintenance, and searchability within the Project SharePoint or other approved repository.
3.7.3-06 (new)	The Contractor shall adopt, maintain, and track submission and approvals of deliverables separately in the existing SDMO Deliverable Tracker. However, the Contractor shall maintain the deliverable artifact information in the Artifact Inventory for hierarchical traceability of artifacts to each deliverable.
3.7.3-07 (new)	The Contractor shall use the following columns to maintain the Artifact Inventory: • Artifact Type • Artifact Name • Artifact Parent Del # • Deliverable? (y/n) • Project Team • State Artifact Owner (Team – Owner Role) • State SME (Name/ Role Title) • Contractor Artifact Owner (Team – Owner Role) • Contractor SME (Name/ Role Title) • State Contracts SME • State Owned? (y/n) • Document Creation Date • Last Modified Date • File Format Type (MS Word, Excel, PPT, Visio) • Artifact Requires a Workplan? (y/n) • Submission Frequency • Review Trigger • Review Frequency • Current Location (Link) • Contractor Initial Process Disposition (Keep As-Is, Update, or Deprecate) • Time Horizon Priority (1- Near, 2- Mid, 3- Far, N/A) • Applicable to Onboarding? • Training Needed? (y/n) • Additional Comments / Materials
3.7.3-08 (new)	The Contractor shall develop <u>and maintain</u> an artifact numbering system for reporting on the Artifact Inventory.
3.7.3-09 (new)	The Contractor shall maintain multiple artifact types in collaboration with the State. The types of artifacts will include but are not limited to the following examples: • Deliverable • Desk Reference Guide • Project Process Guide • Reference Materials • Reports • Standard Operating Procedures • Work Plan • Work Product • Work Product Tool (tool)
3.7.3-10 (new)	The Contractor shall develop, maintain, and streamline a Project Artifact Process. This process should include, but not be limited to the following topics: • Tools in support of Artifact management • Artifact review and update criteria and timeframes • Artifact version control • Artifact Ownership

Req #	SOW Requirement
	• Linkage to parent Deliverables • Determination of the need for a source document and a read-only version • Artifact organization • Artifact types and numbering
3.7.3-11 (new)	The Contractor shall adopt and maintain all Project Artifacts that are associated with this Deliverable in the Project Artifact Inventory and manage them in accordance with the Project Artifact process.
3.7.3-12 (new)	The Contractor shall collaborate with the State to develop and maintain any new Project Artifact(s) necessary to support this section. New artifacts shall be added to the Project Artifacts Repository and managed in accordance with the Project Artifact process.

3.7.4 Work Products

The Contractor shall develop Work Products as needed in support of a given deliverable, process, standard, or at the direction of the State. When in support of a deliverable, the Work Product will follow an informal review by the State and associated in the Deliverables tracker. However, a Work Product will not take the place of a deliverable. Other types of Work Products will not require review unless otherwise requested by the State.

Table 3-31: Work Products

Req #	SOW Requirement
3.7.4-01 (new)	The Contractor shall develop Work Products in support of deliverables, processes, identified standards, or for other efforts as directed by the State.
3.7.4-02 (new)	The Contractor shall identify when a Work Product is in support of a deliverable in the deliverable and in the Work Product. This type of Work Product will undergo informal review by the State.
3.7.4-03 (new)	The Contractor shall organize Work Products in support of deliverables in the deliverable tracking.
3.7.4-04 (new)	The Contractor shall develop Work Products as needed and associate them with the appropriate content, but not limited to the following: • Findings • Root cause analysis • Reports • Designs
3.7.4-05 (new)	The Contractor shall, at the State's request, provide a Work Product for review regardless of its intended association.

3.7.5 Deliverable Management

Deliverable Management encompasses the process for update, review, and approval of CalHEERS Project preexisting deliverables (refer to SOW Section 8). The State has a defined deliverable review process and will work with the Contractor to mature as needed. Elements of the how project deliverables are structured is outlined in the Deliverable Hierarchy Diagram.

3.7.5.1 Deliverable Hierarchy Diagram

The CalHEERS Project uses a Deliverable Hierarchy Diagram to identify the hierarchy relationship between the deliverables of the contract.

Table 3-32: Deliverable Hierarchy Diagram (CD-3.7-3)

Req #	SOW Requirement
3.7.5-01 (new)	The Contractor shall adopt, maintain, update, and implement the management of Deliverables using the CalHEERS Deliverable Hierarchy Diagram.
3.7.5-02 (new)	The Contractor shall maintain and keep current the CalHEERS Deliverables Hierarchy Diagram on the CalHEERS SharePoint site.
3.7.5-03 (new)	The Contractor shall include each deliverable and a count of artifacts by artifact type associated with each deliverable in the CalHEERS Deliverables Hierarchy Diagram listed under the deliverable.
3.7.5-04 (new)	The Contractor shall adopt and maintain all Project Artifacts that are associated with this Deliverable in the Project Artifact Inventory and manage them in accordance with the Project Artifact process.
3.7.5-05 (new)	The Contractor shall collaborate with the State to develop and maintain any new Project Artifacts necessary to support this section. New artifacts shall be added to the Project Artifacts Repository and managed in accordance with the Project Artifact process.
3.7.5-06 (new)	The Contractor shall indicate the deliverable owner for each deliverable in coordination with the SDMO Deliverable Tracker.

3.8 SOW REQUIREMENTS MANAGEMENT

Changes to SOW requirements represent the set of requirements that are defined in the SOW. Review of SOW requirements will occur at various times during the Project to ensure the expectations of the Contract are being met. Changes may be required to the SOW requirements, and may occur due to Federal guidance, technology, testing or implementation, revisions in Project budget, or other emerging needs.

Note: SOW Requirements Management is not to be confused with System Requirements Management which is the management of System-specific requirements that relate to the physical hardware and software that make up the CalHEERS solution. Please refer to SOW Section 4.5, SYSTEM REQUIREMENTS MANAGEMENT, for more information regarding the expectation for managing the CalHEERS System solution.

3.8.1 SOW Requirements Management Plan

Table 3-33: SOW Requirements Management Plan (CD-3.8-1)

Req #	SOW Requirement
3.8.1-01 (modified)	The Contractor shall adopt, enhance, deliver, and maintain a CalHEERS SOW Requirements Management Plan, which includes but is not limited to: 1. INTRODUCTION 1.1 Purpose 1.2 List of Reference Documents 1.3 Audience 2. SUMMARY 2.1 Scope 2.2 Update Frequency 3. APPROACH 4. ASSUMPTIONS, CONSTRAINTS AND RISKS 4.1 Assumptions 4.2 Constraints

Req #	SOW Requirement
	4.3 Risks 5. REQUIREMENTS 6. ROLES AND RESPONSIBILITIES 7. SOW REQUIREMENTS MANAGEMENT PLAN 7.1 SOW Requirements Management Methodology 7.1.1 Requirements Management Initiation (Methodology Step 1 of 5) 7.1.2 Tracking Requirements (Methodology Step 2 of 5) 7.1.3 Requirement Compliance Tracking (Methodology Step 3 of 5) 7.1.4 Reporting (Methodology Step 4 of 5) 7.1.5 Requirements Change Management (Methodology Step 5 of 5) 8. SOW REQUIREMENTS TRACEABILITY TRACKING SYSTEM (RTTS) 8.1 RTTS Information 8.1.1 RTTS Column Definitions 8.2 RTTS Maintenance 8.3 RTTS Access 9. SOW REQUIREMENTS TRACEABILITY REPORTING (RTR) 9.1 SOW Requirements Status Report 9.1.1 SOW Requirement Status Summary 9.1.2 SOW Compliance Tracking Status Summary 10. GLOSSARY AND ACRONYMS 10.1 New Acronyms and Terms APPENDIX 1: SOW TO DELIVERABLE TRACEABILITY CHECKLIST APPENDIX 2: DELIVERABLE COMPLIANCE AND VALIDATION CHECKLIST APPENDIX 3: ASSOCIATED ARTIFACTS
3.8.1-02 (new)	The Contractor shall staff, manage, lead and execute SOW Requirements Management on the CalHEERS as defined in this Statement of Work and in accordance with the CD-3.8-1 – SOW Requirements Management Plan.
3.8.1-03 (new)	The Contractor shall only alter or modify this Deliverable's structure or content with the approval of the State Project Director or designee.
3.8.1-04 (modified)	The Contractor shall address and track all SOW Requirements defined in Appendix A-4 STATEMENT OF WORK as part of the Requirements Management approach. The Contractor shall ensure that all requirement changes, including additions, modifications, and deletions shall be incorporated and formalized as amendments to the final Contract.
3.8.1-05 (modified)	The Contractor shall develop, deliver and implement a SOW Requirements Management Plan that includes the following key elements: 1. Methodology for tracking and validating the proper planning, execution, and changes of Contract requirements. 2. Assumption for the definition, tracking, and traceability of SOW requirements throughout the life cycle of the Contract. 3. Maintenance of SOW requirements. 4. Project management requirement definition, tracking, traceability, and verification 5. Forward traceability of Contract requirements to the documents and processes that are created to fulfill the Contract expectations. 6. Backward traceability of Contract work products and processes to the requirement in the Statement of Work by which the end product is intended to fulfill. 7. Provisions to ensure that all requirement changes, including additions, modifications, and deletions shall be incorporated and formalized as amendments to the final contract.
3.8.1-06 (new)	The State identifies and associates the following artifacts to the SOW Requirements Management Plan. The Contractor shall adopt, update, maintain, and deliver these artifacts in accordance with Appendix 3 of this deliverable including, but not limited to: • SOW Requirements Traceability Reporting • SOW Requirements Traceability Tracking System

Req #	SOW Requirement
	- SOW RTTS Verification Summary View QRG - SOW Requirement Status Summary - SOW Compliance Tracking Status Summary
3.8.1-07 (new)	The Contractor shall adopt and maintain all Project Artifacts that are associated with this Deliverable in the Project Artifact Inventory and manage them in accordance with the Project Artifact process.
3.8.1-08 (new)	The Contractor shall collaborate with the State to develop and maintain any new Project Artifacts necessary to support this section. New artifacts shall be added to the Project Artifacts Repository and managed in accordance with the Project Artifact process.
3.8.1-09 (modified)	The Contractor shall update, or develop, and attach to the SOW Requirements Management Plan the following appendices: Appendix 1—SOW to Deliverable Traceability Checklist Description: A table that identifies the SOW requirements for this Deliverable, as specified within SOW Section 8, DELIVERABLES, and includes but is not limited to: - SOW Requirement ID # - SOW Requirement Text - Requirement Traceability (Define traceability of the requirements to the Deliverable) - Requirement Fulfillment (Define how the SOW requirements have been fulfilled by this Deliverable) Appendix 2—Deliverable Compliance and Validation Checklist Description: A QA Checklist that includes, but is not limited to: - Deliverable Section Number and Title - Deliverable Requirement Statement(s) - Requirement Completion (How the Contractor will comply with or has complied with the requirement statements within the plan) - Validation Method (The method the Contractor used to validate Deliverable compliance) - The Contractor's QA Manager sign-off on compliance Appendix 3—Associated Artifacts Description: An extract from the Project Artifact Inventory List of artifacts associated with this Deliverable, and will include but is not limited to the following examples: - Artifact Name - Associated Parent DEL - State Approver - SI Point of Contact - Review Frequency - Submission Frequency - Artifact File Format - Artifact Location (e.g., SharePoint breadcrumb) - Link to artifact

3.8.2 SOW Requirements Traceability Tracking System

The Contractor must produce a SOW Requirements traceability tracking System to reflect and track the requirements defined in the SOW.

Table 3-34: SOW Requirements Traceability Tracking System

Req #	SOW Requirement
3.8.2-01 (existing)	The Contractor shall develop a System for tracking and managing SOW requirements throughout the SDMO life cycle.
3.8.2-02 (existing)	The Contractor shall provide a SOW Requirements Traceability Tracking System that must be fully accessible by the State and be used collaboratively with the Contractor in managing SOW requirements.

3.8.3 SOW Requirements Traceability Reporting

The Contractor will generate reports that the State and Contractor can use to track and manage progress of SOW execution.

Table 3-35 : SOW Requirements Traceability Reporting

Req #	SOW Requirement
3.8.3-01 (modified)	The Contractor shall produce and deliver reports from the SOW Requirements Traceability tracking System that can be used to provide progress of SOW execution.

3.9 PROBLEM ESCALATION

Effective problem escalation is critical to the success of the project and the timely resolution of issues that may impact scope, schedule, cost, or quality. The Contractor is expected to actively participate in the escalation process by identifying, documenting, and escalating risks, issues, decisions, and change requests in a timely and transparent manner. The State maintains and manages the CalHEERS Governance Plan, which outlines the formal escalation procedures and governance structure. The Contractor will collaborate closely with the State to ensure that all escalations are handled in accordance with the defined processes. The section below outlines the specific requirements related to problem escalation.

3.9.1 Problem Escalation

Table 3-36: Problem Escalation

Req #	SOW Requirement
3.9.1-01 (existing)	The Contractor shall adhere to following escalation processes documented in the <u>State's</u> CalHEERS Governance Plan, including but not limited to <u>such areas as</u> : 1. Change Requests 2. Risks 3. Issues 4. Decisions
<u>3.9.1-02</u> <u>(new)</u>	<u>The Contractor shall understand and operate within the four-tiered CalHEERS Governance structure (Strategic, Committee, Tactical, and Operational levels) when escalating issues, risks, decisions, and change requests.</u>
<u>3.9.1-03</u> <u>(new)</u>	<u>The Contractor shall support the principle of resolving issues at the lowest appropriate level and escalate only when resolution cannot be achieved within the current governance tier.</u>
<u>3.9.1-04</u> <u>(new)</u>	<u>The Contractor shall document and communicate escalations in accordance with the escalation paths and decision-making hierarchy defined in the CalHEERS Governance Plan.</u>
<u>3.9.1-05</u> <u>(new)</u>	<u>The Contractor shall collaborate with the State to ensure that all escalations are accompanied by sufficient background, analysis, and recommended options to support timely decision-making at the appropriate governance level.</u>

Req #	SOW Requirement
<u>3.9.1-06</u> <u>(new)</u>	<u>The Contractor shall maintain alignment with the CD-3.6-1 Communication Plan and Governance Plan to ensure consistent messaging and traceability of escalated items.</u>
<u>3.9.1-07</u> <u>(new)</u>	<u>The Contractor shall participate in governance meetings as required and provide updates on the status of escalated items, including resolution progress and outcomes.</u>

3.10 QUALITY MANAGEMENT

The Contractor must develop and implement an approach to managing the overall quality of the CalHEERS Project. The approach shall be proactive, with a focus on preventing problems rather than allowing problems to occur and then devoting valuable resources to their correction. The quality management approach should address adherence to Project standards, templates, processes and procedures. Project members must be alerted to any changes that affect general work procedures, templates or standards, and the Contractor shall implement those changes in a timely manner.

Metrics for measuring quality from both Project management and System perspectives should be defined. System defects or deficiencies should be specifically addressed. As the Contractor addresses issues and concerns, solutions are expected to be shared and process improvements instituted so that similar situations can be avoided in the future. The quality management methodology should also address user satisfaction.

Achieving Project objectives involves a cooperative working relationship between the Contractor, CalHEERS, Project Sponsors, Program Partners, QA, and IV&V. The State expects the Contractor to work collaboratively with these resources to identify trends and potential problems and to formulate recommendations and solutions, both independently and jointly. The State expects these resources to conduct a variety of assessments, some on a periodic basis and others targeting specific performance or other issues. The Contractor is expected to provide requested information and access to data to complete these assessments and include these resources in meetings and communications regarding both actual and potential issues, problems, and trends.

The Contractor will track all technical, business, federal, and California state standards and codes in a single repository as they relate to each deliverable in SOW 8. The Contractor will annually review existing and new standards, and as new versions of technical, business, federal, and California State standards and codes are available, adoption of the new standard will be considered through the Quality Management process and approved by the State Project Director or designee.

3.10.1 Quality Management Plan (QMP)

The Quality Management Plan (QMP) describes the overall approach and direction for the quality program to ensure the Contractor/State team is improving in their ability to produce quality products using quality processes.

Table 3-37: Quality Management Plan (CD-3.10-1)

Req #	SOW Requirement
3.10.1-01 (new)	The Contractor shall adopt, enhance, deliver, and maintain a CalHEERS Quality Management Plan, which includes but is not limited to: 1. INTRODUCTION 6 1.1 Purpose 1.2 List of Reference Documents and Standards 1.3 Audience

Req #	SOW Requirement
	2. SUMMARY 2.1 Scope 2.2 Update Frequency 3. APPROACH 3.1 Quality Approach/Principles 3.2 QMP Plans/Sections 3.2.1 Quality Assurance Plan 3.2.2 Process Assurance Plan 3.2.3 Verification and Validation (V&V) Plan 3.2.4 Process Improvement Plan 3.2.5 Metrics Plan 3.2.6 Capability Maturity Model Integration (CMMI) 3.3 Contractor Quality Management Team 3.4 Quality Participants 3.5 Quality Management Deliverables 4. ASSUMPTIONS, CONSTRAINTS AND RISKS 4.1 Assumptions 4.2 Constraints 4.3 Risks 5. ROLES AND RESPONSIBILITIES 6. QUALITY ASSURANCE PLAN 6.1 Quality Assurance Approach 6.2 Quality Assurance 6.3 Quality Control 6.4 Standards and Best Practices 6.4.1 Review of Standards 6.5 Quality Assurance Roles and Responsibilities 6.6 Quality Assurance Activities 6.6.1 Product Assurance 6.6.2 Process Assurance 6.7 Quality Assurance Tools 6.8 Quality Assurance Reporting 7. PROCESS ASSURANCE PLAN 7.1 Process Assurance Approach 7.2 Process Assurance Roles and Responsibilities 7.3 Process Assurance Activities 7.4 Process Assurance Tools 7.5 Process Assurance Reporting 7.6 Process Assurance Processes 8. VERIFICATION & VALIDATION (V&V) PLAN 8.1 V&V Approach 8.2 V&V Roles and Responsibilities 8.3 V&V Methods 8.3.1 Review 8.3.2 Inspection 8.3.3 Walk-Through 8.3.4 Audit 8.4 V&V Activities 8.4.1 Contract V&V 8.4.2 System Requirements V&V 8.4.3 Design V&V 8.4.4 Code V&V 8.4.5 Test V&V 8.4.6 Integration V&V

Req #	SOW Requirement
	8.4.7 Implementation V&V 8.4.8 Documentation V&V 8.4.9 Operations V&V 8.5 V&V Tools 9. PROCESS IMPROVEMENT PLAN 9.1 Process Improvement Purpose 9.2 Process Improvement Objectives 9.3 Process Improvement Approach 9.4 Change Champion Network (CCN) 9.5 Process Improvement Roles and Responsibilities 9.6 Process Improvement Tools 9.7 Process Improvement Reporting 9.8 Cost Improvement Initiatives 9.9 Customer Satisfaction Survey 9.10 Process Improvement Labor Hours Log 10. METRICS PLAN 10.1 Metrics Plan Approach 10.2 Metrics List 11. GLOSSARY AND ACRONYMS 11.1 New Acronym and Terms APPENDIX 1: SOW TO DELIVERABLE TRACEABILITY CHECKLIST APPENDIX 2: DELIVERABLE COMPLIANCE AND VALIDATION CHECKLIST APPENDIX 3: ASSOCIATED ARTIFACTS APPENDIX 4: STANDARDS MAPPING APPENDIX 5: EXAMPLE RELEASE DEPLOYMENT PLAN – CHECKLIST APPENDIX 6: TRACEABILITY GUIDE APPENDIX 7: TECHNICAL CODE REVIEW CHECKLIST APPENDIX 8: DELIVERABLE QA CHECKLIST APPENDIX 9: SUPPORTING DOCUMENT BUSINESS REQUIREMENTS TEMPLATE
3.10.1-02 (new)	The Contractor shall staff, manage, lead and execute Quality Management on the CalHEERS as defined in this Statement of Work and in accordance with the CD-3.10-1 – Quality Management Plan.
3.10.1-03 (new)	The Contractor shall only alter or modify this Deliverable's structure or content with the approval of the State Project Director or designee.
3.10.1-04 (existing)	The Contractor shall develop and maintain quality management program. This program will be described in the Quality Management Plan (QMP) and must address how Services and Deliverables, including Production Releases will: 1. Meet defined Requirements, business and performance objectives, and user expectations. 2. Be as free of errors as possible and meet all defined Acceptance criteria. 3. Meet corresponding metrics must be defined and captured to measure all aspects of quality by phase or key task.
3.10.1-05 (modified)	The Contractor shall update, deliver, maintain, and execute the QMP in accordance with IEEE Std 730-2014, and version 6 of the Project Management Institute (PMI ®), A Guide to the Project Management Body of Knowledge (PMBOK ® Guide) pertaining to quality management. As new versions of standards are available, adoption of the new standard will be considered through the change control process and approved by the State Project Director or designee.
3.10.1-06 (modified)	The Contractor shall ensure that the QMP addresses Quality Assurance planning in accordance with the following standards pertaining to the Quality Assurance Process and Software Quality Assurance Plans: 1. IEEE Standard for System and Software Verification and Validations, Revision of IEEE Std 1012-2004 2. IEEE Standard for Software Quality Assurance Processes (12.8.5-VVP Section

Req #	SOW Requirement
	7.4 Control procedures) 3. IEEE Std 730-2014 (Revision of IEEE Std 730-2002 (Annex C-Guidance for creating Software Quality Assurance Plans) As new versions of standards are available, adoption of the new standard will be considered through the change control process and approved by the State Project Director or designee.
3.10.1-07 (modified)	The Contractor shall ensure that the QMP addresses Verification and Validation planning in compliance with the current IEEE Standards for Software Reviews and Audits. As new versions of standards are available, adoption of the new standard will be considered through the change control process and approved by the State Project Director or designee: 1. IEEE Std 1028-2008 (Revision of IEEE Std 1028-1997) (6-Inspections) IEEE Standard for System and Software Verification and Validation, Revision of IEEE Std 1012-2004 (9-Software V&V activities, 12-VVP Section 7.4 Control Procedures); Verification Process; Quality Assurance Process; Software Verification and Validation; and Inspections.
3.10.1-08 (existing)	The Contractor shall ensure that the quality program methodology and activities (defined by the QMP) are compatible, coordinated, and consistent with the strategic planning methodology, processes & procedures, and roadmap (defined in SOW Section 3.15, STRATEGIC PLANNING AND MANAGEMENT).
3.10.1-09 (modified)	The QMP shall identify the skillsets and experience the Contractor Staff for developing quality deliverables, in compliance with SOW Section 8.3, PREPARATION OF DELIVERABLES, and also execute continual process improvement efforts, as defined in SOW Section 3.10.7, PROCESS IMPROVEMENT.
3.10.1-10 (modified)	The Contractor shall outline in the QMP, the initiatives that will be established and reported to improve efficiencies of fixed price services (by 5% per year) as required by this Contract (See Appendix D, COST WORKBOOK, D-5 SDMO FIXED PRICE).
3.10.1-11 (existing)	The Contractor shall ensure that the QMP addresses Quality Assurance planning in accordance with the following standards pertaining to the Quality Assurance Process and Software Quality Assurance Plans: 1. IEEE Standard for System and Software Verification and Validations, Revision of IEEE Std 1012-2004 2. IEEE Standard for Software Quality Assurance Processes (12.8.5-VVP Section 7.4 Control procedures) 3. IEEE Std 730-2014 (Revision of IEEE Std 730-2002 (Annex C-Guidance for creating Software Quality Assurance Plans)
3.10.1-12 (existing)	The Contractor shall describe its approach, expectations, and assumptions for coordinating and working with QA, IV&V and oversight consultants as part of the overall Quality management methodology.
3.10.1-13 (existing)	The Contractor shall participate in Quarterly Balanced Scorecard Reviews and/or similar reviews to provide the CalHEERS Steering Committee with tangible evidence regarding the overall progress and health of the CalHEERS Project.
3.10.1-14 (existing)	The Contractor shall ensure that the QMP describes the materials, methods, detailed procedures and automated tools used to support the quality management process.
3.10.1-15 (existing)	The Contractor shall ensure that the QMP includes sample logs, forms, and reporting mechanisms that support the Quality Management process.
3.10.1-16 (existing)	The Contractor shall ensure that the QMP describes how the Contractor shall work cooperatively with multiple agencies and project participants including State staff, county staff, Subcontractors and others.
3.10.1-17 (existing)	The Contractor shall ensure that the QMP describes the methods used to ensure that all work performed by the Contractor is monitored and measured against the requirements of the Contract on an ongoing basis.

Req #	SOW Requirement
3.10.1-18 (existing)	The Contractor shall ensure that the QMP describes how the Contractor supports the State's Quality Assurance and Project Oversight activities.
3.10.1-19 (existing)	The Contractor shall ensure that the QMP describes the Contractor's internal Deliverable review process.
3.10.1-20 (new)	The State identifies and associates the following artifacts to the Quality Management Plan. The Contractor shall adopt, update, maintain, and deliver these artifacts in accordance with Appendix 3 of this deliverable including, but not limited to: • Process Audit Reports-Operations • Process Audit Reports-System Security • Capability Maturity Model Integration Assessment • Process Assurance Audits & Reports • Metrics List • Standards and Codes Annual Report • Process Improvement Labor Hours Log • CalHEERS Continuous Process Improvement Request Form • CPI Dashboard • CPI Recommendation Presentation • Lessons Learned Sessions or Emails • Process Assurance Tracker
3.10.1-21 (new)	The Contractor shall develop a methodology to track, review, and update technical, business, federal, and California state standards and codes in a single repository that occurs on an annual basis. Refer to CD-3.10-2 Standards and Codes Tracker. As new versions of standards are available, adoption of the new standard will be considered through the change control process and approved by the State Project Director or designee.
3.10.1-22 (new)	The Contractor shall provide an annual report as an Artifact of Standards and Codes that are recommended for update to a new version.
3.10.1-23 (new)	The Contractor shall in collaboration review the Standards and Codes Annual Report to determine which standards will be updated and follow the project change control process.
3.10.1-24 (new)	The Contractor shall validate that new standards are updated in the associated deliverables as they are submitted for their next review during the annual review cycle as determined by the Annual Deliverable Prioritization review.
3.10.1-25 (new)	The Contractor shall adopt and maintain all Project Artifacts that are associated with this Deliverable in the Project Artifact Inventory and manage them in accordance with the Project Artifact process.
3.10.1-26 (new)	The Contractor shall collaborate with the State to develop and maintain any new Project Artifacts necessary to support this section. New artifacts shall be added to the Project Artifacts Repository and managed in accordance with the Project Artifact process.
3.10.1-27 (modified)	The Contractor shall attach to the Quality Management Plan the following appendices: Appendix 1—SOW to Deliverable Traceability Checklist Description: A table that identifies the SOW requirements for this Deliverable, as specified within SOW Section 8, DELIVERABLES, and includes but is not limited to: 1. SOW Requirement ID # 2. SOW Requirement Text 3. Requirement Traceability (Define traceability of the requirements to the Deliverable) 4. Requirement Fulfillment (Define how the SOW requirements have been fulfilled by this Deliverable) Appendix 2—Deliverable Compliance and Validation Checklist Description: A QA Checklist that includes, but is not limited to: 1. Deliverable Section Number and Title

Req #	SOW Requirement
	2. Deliverable Requirement Statement(s) 3. Requirement Completion (How the Contractor will comply with or has complied with the requirement statements within the plan) 4. Validation Method (The method the Contractor used to validate Deliverable compliance) 5. The Contractor's QA Manager sign-off on compliance Appendix 3—Associated Artifacts Description: An extract from the Project Artifact Inventory List of artifacts associated with this Deliverable, and will include but is not limited to the following examples: 1. Artifact Name 2. Associated Parent DEL 3. State Approver 4. SI Point of Contact 5. Review Frequency 6. Submission Frequency 7. Artifact File Format 8. Artifact Location (e.g., SharePoint breadcrumb) 9. Link to artifact

3.10.2 Quality Assurance Planning

Quality Assurance planning consists of establishing standards, conducting reviews, monitoring progress, conducting process audits and performing project health checks. Quality reviews include documentation, deliverables and peer reviews. Process audits address quality by validating that CalHEERS processes, standards, and procedures are conforming to Contract requirements. The purpose of Quality Assurance planning is to provide a common approach for performing Quality Assurance activities.

Table 3-38 : Quality Assurance Planning

Req #	SOW Requirement
3.10.2-01 (existing)	The Contractor shall meet the Quality Assurance requirements of CalHEERS and the DHCS and Covered California Program as defined in the QMP.
3.10.2-02 (existing)	Upon the State's request, the Contractor shall make available Contractor staff, resources, processes, data, tools, and deliverables for State Quality Assurance (QA) and Independent Verification and Validation (IV&V) audits and inspections at no additional cost to the State.

3.10.3 Process Audit Reports-Operations

The Process Audit Reports—Operations shall document the results of audits of key operational processes.

Table 3-39: Process Audit Reports-Operations

Req #	SOW Requirement
3.10.3-01 (existing)	The Contractor shall take over, update, deliver, and maintain the Process Audit Reports– Operations Deliverable that, includes but is not limited to, the following content: 1. Process Owner 2. Auditor's Name 3. Start Date 4. End Date 5. Process Area (Operations) 6. Activity and Criteria (Activities from the Operations Plan) 7. Observation Description 8. Corrective Action 9. Score
3.10.3-02 (existing)	The Contractor shall update the Process Audit Reports–Operations Deliverable to ensure compliance with IEEE Standard for Software Quality Assurance Processes, IEEE Std 730-2014 (Revision of IEEE Std 730-2002) (5.5-Process assurance activities) pertaining to Process Assurance.
3.10.3-03 (existing)	The Contractor shall document within the Process Audit Reports – Operations Deliverable the results of audits of key operational processes and activities with regard to compliance with the Operations Plan. Processes to review, as defined in the Operations Plan, shall be determined by the State Project Director or designee, for example: 1. Data Archiving 2. Performance Monitoring and Management 3. System Administration Procedures for COTS Applications 4. Interface Operations Management 5. Data Distribution 6. Asset Management

3.10.4 Process Audit Reports-System Security

The Process Audit Reports - System Security artifact shall document the results of audits of the System security processes with regard to compliance with the System Security Plan.

Table 3-40: Process Audit Reports-System Security

Req #	SOW Requirement
3.10.4-01 (existing)	The Contractor shall take over, update, deliver, and maintain the Process Audit Reports–System Security artifact, which must document the results of audits of the System security processes with regard to compliance with the System Security Plan.
3.10.4-02 (existing)	The Process Audit Reports–System Security artifact shall be prepared in accordance with IEEE Standard for Software Quality Assurance Processes, IEEE Std 730-2014 (Revision of IEEE Std 730-2002) (5.5-Process assurance activities) to Process Assurance. As new versions of standards are available, adoption of the new standard will be considered through the change control process and approved by the State Project Director or designee.
3.10.4-03 (existing)	The Process Audit Reports–System Security artifact shall follow the guidelines developed by the National Institute for Health and the Computer Security Division of the National Institute of Standards and Technology (NIST 800-53 rev 4).

Req #	SOW Requirement
3.10.4-04 (existing)	The Contractor shall update the Process Audit Reports–System Security artifact to include, at a minimum, the following content: 1. Process Owner 2. Auditor's Name 3. Start Date 4. End Date 5. Process Area (System Security) 6. Activity and Criteria (Activities from the System Security Plan) 7. Observation Description 8. Corrective Action 9. Score

3.10.5 Capability Maturity Model Integration (CMMI)

Table 3-41: Capability Maturity Model Integration Assessment

Req #	SOW Requirement
3.10.5-01 (existing)	The Contractor shall demonstrate the Capability Maturity Model Integration (CMMI) level 3 or higher by an independent assessment and provide supporting documentation to the CalHEERS Project each year.
3.10.5-02 (existing)	The Contractor shall use the CMMI as developed by the Information Systems Audit and Control Association (ISACA) as the standard, as amended or modified, for the quality of the information System and data processing organization of the Contractor.
3.10.5-03 (existing)	The Contractor shall assess and verify from an independent third party that the Contractor is performing at CMMI Level 2 or higher within 18 months of the operations start date.
3.10.5-04 (existing)	One (1) year following the initial assessment, if at a Level 2, The Contractor shall obtain a new independent assessment that shall show at least a CMMI Level 3 and this level shall be maintained through the life of the Contract. The specific rating shall be applicable at the organizational/business unit level that shall be providing the services.

3.10.6 Verification and Validation (V&V)

Verification focuses on products that impact the specification, design, development and implementation of the CalHEERS application and is executed primarily through walkthroughs, inspections and milestone reviews. Verification is a quality process that is used to evaluate whether a product complies with the standards and business requirements. Validation is the process of establishing documented evidence that provides a high degree of assurance that a product or service satisfies its intended requirements.

Table 3-42: Verification and Validation (V&V)

Req #	SOW Requirement
3.10.6-01 (existing)	The Contractor shall ensure that the QMP addresses verification and validation planning, that include, at a minimum: 1. Contract Verification 2. Requirements Verification and Validation 3. Design Verification and Validation 4. Code Verification 5. Test Verification and Validation 6. Integration Verification 7. Implementation Verification and Validation 8. Documentation Verification

Req #	SOW Requirement
3.10.6-02 (modified)	The Contractor shall ensure that the QMP addresses Verification and Validation planning in compliance with the current IEEE Standards for Software Reviews and Audits: 1. IEEE Std 1028-2008 (Revision of IEEE Std 1028-1997) (6-Inspections) 2. IEEE Standard for System and Software Verification and Validation, Revision of IEEE Std 1012-2004 (9-Software V&V activities, 12-VVP Section 7.4 Control Procedures): Verification Process; Quality Assurance Process; Software Verification and Validation; and Inspections. As new versions of standards are available, adoption of the new standard will be considered through the change control process and approved by the State Project Director or designee.
3.10.6-03 (existing)	The Contractor shall verify and validate system security processes, and the adherence to those processes, as part of the execution of the Quality Assurance, Verification and Validation activities, and Process Assurance activities as defined within the QMP.
3.10.6-04 (existing)	Upon the request of the State Project Director or designee, the Contractor shall support the Independent Verification and Validation (IV&V) audit of any production release, by allowing access to processes, data, deliverables, Staff, resources and tools, to verify the as-built functionality and configuration meet Contract requirements.
3.10.6-05 (existing)	The Contractor shall prepare agendas and minutes for each review. The Contractor shall make related informal Deliverables available for review prior to each release cycle milestone in accordance with the agreed work plan.
3.10.6-06 (existing)	The Contractor shall update the QMP for Verification and Validation planning to include but not be limited to: 1. Items subject to verification and validation as defined by State Project Director or designee. 2. Verification and validation tasks to be performed. 3. Resources, responsibilities, and schedule for verification and validation. 4. Procedures for forwarding verification and validation reports to the State.
3.10.6-07 (existing)	The Contractor shall include with the QMP for Verification and Validation planning the following appendices: 1. Post Installation Verification Test Plan – Checklist 2. Traceability Guide 3. Technical Review Checklist 4. Deliverable QA Checklist
3.10.6-08 (existing)	The Contractor shall conduct semi-annual audits of the System Security processes, at no additional cost to the State, and report compliance with the System Security Plan.

3.10.7 Process Improvement

Process improvement will be used to ensure that the quality program established through the QMP will improve the practices that support the CalHEERS that produces the greatest value to the State and the people it serves.

3.10.7.1 Process Improvement Planning

Process Improvement planning is the foundation for establishing an effective process improvement methodology for improving CalHEERS management, business, and technical processes. The Contractor shall work with the OSI, DHCS, Covered California, and stakeholders to establish and facilitate collaborative improvement workshops to identify opportunities for improving the CalHEERS M&O service processes. The Process Improvement planning describes the means to evaluate the cost and effort estimating methodology used for change development and release management. The plan also defines the Contractor's

improvement methodology to include the identification, resolution and implementation of needed improvements.

Table 3-43: Process Improvement Planning

Req #	SOW Requirement
3.10.7-01 (existing)	The Contractor shall conduct process improvement activities as addressed in the QMP to analyze, identify, resolve, and implement improvements to add value to processes for program support, project management, System maintenance, change and operations.
3.10.7-02 (modified)	Process improvement shall be applied (as defined the QMP) to, and coordinated with, the following areas of the Appendix A- ~~34~~ , STATEMENT OF WORK: 1. SOW Section 3, PROJECT MANAGEMENT REQUIREMENTS 2. SOW Section 4, SYSTEM CHANGE & ENHANCEMENTS REQUIREMENTS 3. SOW Section 5, PROGRAM SUPPORT REQUIREMENTS 4. SOW Section 6, OPERATION REQUIREMENTS 5. SOW Section 7, TRANSITION REQUIREMENTS
3.10.7-03 (existing)	The Contractor shall ensure that the planning, analysis, findings, and execution of process improvement (defined by the QMP) are compatible, coordinated, and consistent with the strategic planning methodology, processes & procedures, and roadmap (defined in SOW Section 3.15, STRATEGIC PLANNING AND MANAGEMENT).
3.10.7-04 (existing)	The planning, analysis, findings, and execution of process improvement shall be implemented through the established change control process as a “no cost” change, unless otherwise agreed to by the State.
3.10.7-05 (existing)	The Contractor shall address the lessons learned, through process improvement activities, over the term of the Contract, as defined within the QMP for Process Improvement planning.
3.10.7-06 (existing)	The Contractor shall conduct and participate in a Process Improvement Review Meeting to review planned, in-progress, and completed process improvement activities, as well as discuss collected lessons learned. These meetings shall be coordinated alongside the Project Management Maturity improvement activities.
3.10.7-07 (modified)	The Contractor shall ensure that the QMP addresses Process Improvement in accordance with ISO/IEC/IEEE Standard 16326-2009 – Systems and Software Engineering - Life Cycle Processes – Project Management (5.4.2-Process Improvement Plan) pertaining to Process Improvement, and the most current version of the Project Management Institute (PMI ®), A Guide to the Project Management Body of Knowledge (PMBOK ® Guide) pertaining to Quality. As new versions of standards are available, adoption of the new standard will be considered through the change control process and approved by the State Project Director or designee.
3.10.7-08 (modified)	The Contractor shall include procedures for conducting the Customer Satisfaction Surveys in the QMP for Process Improvement Planning. The Contractor shall, in collaboration with the State, develop surveys to be distributed to the end users annually. • Service Desk Customer Satisfaction Survey • CalHEERS Staff Satisfaction Survey • State Sponsor Satisfaction Survey
3.10.7-09 (existing)	The Contractor shall include in the QMP for Process Improvement, how any individual improvement effort can be quantified.

3.10.7.2 Implementation of Improvement Recommendations

The implementation of process improvement initiatives, Will be coordinated and implemented collaboratively with the State and the Contractor. These improvements will be directed specifically towards processes and practices that add value to the CalHEERS program while

also reducing the cost of doing business for both the State and Contractor over the life of the Contract.

Table 3-44: Implementation of Improvement Recommendations

Req #	SOW Requirement
3.10.7-10 (modified)	The Contractor shall lead in executing the improvement recommendations identified in process improvement initiatives covered by the QMP under Process Improvement.
3.10.7-11 (existing)	The Contractor shall coordinate and conduct/facilitate improvement activities and progress reporting to show how improvement activities are adding value and reducing the overall cost of doing business.
3.10.7-12 (existing)	The Contractor shall lead and assist the State in executing and updating the schedule for incremental improvements.
3.10.7-13 (existing)	The Contractor shall maintain and track progress of the schedule and provide periodic presentations on progress of the recommendations for improvement to both, State/Contractor staff, and management audiences.
3.10.7-14 (existing)	The Contractor shall organize, prepare, and facilitate periodic meetings to review the status of improvement activities identified in the Improvement Schedule.
3.10.7-15 (existing)	Improvement activities that impact the Contractor's processes and practices shall be incorporated into the Contractor's overall practices at no additional cost to the State. Contractor plans, processes and procedures (resulting from improvements) shall be updated and submitted as part of the normal documentation update cycles.
3.10.7-16 (modified)	The Contractor shall expend no less than 2,000 labor hours each year implementing the improvements identified from executing the requirements of SOW Section 3.10.7, PROCESS IMPROVEMENT. This effort is at no additional cost to the State as it is to be included under the Quality Management line item within the Appendix D-5, SDMO FIXED PRICE cost component of the Cost Workbook.

3.10.8 Standards, Regulations, and Codes Tracking and Updates

The State is interested in maintaining visibility over the large number of standards, regulations, and codes that are relied on to ensure our systems and processes are to the latest expectations. Therefore, a section under Special Provisions has been created to support this need. Refer to Section A-2 Special Provisions Section 7.7 [UPDATES TO STANDARDS, REGULATIONS, AND CODES Updates](#), for details and expectations, along with the tracking, reporting and collaboration needed between the contractor and the State.

Table 3-45: Standards and Codes Tracker (CD-3.10-2)

Req #	SOW Requirement
3.10.8-01 (new)	The Contractor shall develop and maintain a Standards, Regulations, and Codes Tracker as a SharePoint list as a tool to monitor, update, and provide traceability of all technical, business, federal, and California state standards and codes in a single repository
3.10.8-02 (new)	The Contractor shall collaborate with the State on the development and maintenance of the Standards and Codes Tracker.
3.10.8-03 (new)	The Contractor shall at a minimum include the following fields in the Tracker: • Current Standard (verbiage of current standard) • Current Version Standard • Decision Item number when the last update decision was made • Date of the update • Date of project implementation • Previous Standard (verbiage of previous standard version) • Deliverable ID (deliverable or deliverables which reference this standard)

3.10.9 Metrics

Table 3-46: Metrics

Req #	SOW Requirement
3.10.9-01 (modified)	The Contractor shall document a SOP to produce the Metrics and track and report on all existing metrics for the CalHEERS Project and include the tracking and reporting of new metrics as deemed necessary by the approved QMP.
3.10.9-02 (existing)	The Contractor shall document the definitions, methods, tools, reporting and frequency of all project metrics within the QMP.
3.10.9-03 (existing)	The Contractor shall document within the QMP the process State staff can utilize to gain access to the Contractors raw metrics data.

3.10.10 Process Assurance

3.10.10.1 Process Assurance Planning

Process Assurance planning defines the project's approach to validating compliance to established standards and processes. The purpose of process assurance is to provide an objective insight into process assurance-related activities and associated work products.

Table 3-47: Process Assurance Planning

Req #	SOW Requirement
3.10.10-01 (existing)	The Contractor shall ensure that the QMP addresses Process Assurance planning, which defines how the Contractor will meet and maintain key process areas.
3.10.10-02 (existing)	The Contractor shall ensure that the QMP addresses Process Assurance planning in accordance with 730-2014-IEEE Standard for Software Quality Assurance Processes (5.5-Process assurance activities) pertaining to Process Assurance.
3.10.10-03 (existing)	The Contractor shall conduct Process Assurance activities in accordance with the QMP.
3.10.10-04 (existing)	The Contractor shall document, in the QMP for Process Assurance planning, the project's approach to validating compliance with established standards and processes.
3.10.10-05 (existing)	The Contractor shall include in the QMP for Process Assurance planning, the following actions: 1. Objectively evaluate performed processes and work products against the applicable standards and procedures, (e.g., Capability Maturity Model, Project Management Maturity Model). 2. Identify and document noncompliance issues. 3. Provide feedback to State staff on the results of quality assurance activities. 4. Verify that noncompliance issues are addressed.

Req #	SOW Requirement
3.10.10-06 (existing)	The Contractor shall describe in the QMP for Process Assurance planning, the Contractor's detailed approach to process assurance, shall include, but not be limited to, the following information: 1. Project Planning 2. Project Monitoring and Control 3. Risk Management 4. Issue Management 5. Change Management 6. Schedule Management 7. Communication Management 8. Requirements Management 9. Technical Solution 10. Product Integration 11. Verification (Verify selected work products/deliverables meet the required specifications) 12. Validation (Demonstrate that a product fulfills its intended use) 13. Configuration Management 14. Quality Assurance 15. Causal Analysis and Resolution (Related to defects and other problems) 16. Operations Planning and Management
3.10.10-07 (existing)	The Contractor shall focus on the following criteria for each process area within the QMP for Process Assurance planning: 1. Management Commitment 2. Ability to Perform 3. Defined and Repeatable Activities 4. Measurement, Metrics and Analysis 5. Audits and Review Processes

3.10.10.2 Process Assurance Audits & Reporting

Process Assurance audits and reporting is the mechanism that ensures processes are being followed in accordance with the processes defined in the QMP. This process also includes the access by the State to Contractor work products, tools, and data so that audits can be performed by the State if desired.

Table 3-48: Process Assurance Audits & Reports

Req #	SOW Requirement
3.10.10-08 (existing)	The Contractor shall support the Project Office, by providing access to Contractor Staff, tools and data, as State staff conduct Configuration Management process audits that verify compliance with the Configuration Management Plan and ensure CIs are properly controlled.
3.10.10-09 (existing)	The Contractor shall provide access to work products, tools and data necessary for the State to conduct process audits.
3.10.10-10 (existing)	The Contractor shall support the Project Office by providing access to Contractor Staff, tools and data, as State staff conduct periodic audits of the Quality Assurance process to ensure the processes follow the QMP.
3.10.10-11 (existing)	The Contractor shall conduct semi-annual audits of the System Security processes to determine, and report on, compliance with the System Security Plan.
3.10.10-12 (existing)	The Contractor shall conduct audits and report on findings as defined by the QMP under Process Assurance.

3.11 CONTRACT MANAGEMENT

This section describes how the Contractor will collaborate with the State to track compliance and progress against contract requirements, and how changes to the contract will be identified, tracked, managed, and then implemented. This section also addresses the expectations regarding the regular oversight and interactions with the State during course of contract execution. This section is not to be confused with the management of System changes which is discussed in SOW 4.

3.11.1 Contract Management Plan

The Contract Management Plan is what describes how the Contractor, and the State will work collaboratively together to ensure the smooth execution of the signed contract and all of the mechanisms to ensure compliance and timely responses on matters specific to the contract.

Table 3-49: Contract Management Plan (CD-3.11-1)

Req #	SOW Requirement
3.11.1-01 (new)	The Contractor shall adopt, enhance, deliver, and maintain the Contract Management Plan, which includes but is not limited to: 1. INTRODUCTION 1.1 Purpose 1.2 List of Reference Documents 1.3 Audience 2. SUMMARY 2.1 Scope 2.2 Out-of-Scope 3. APPROACH 3.1 Assumptions 3.2 Constraints 3.3 Risks 4. REQUIREMENTS 5. ROLES AND RESPONSIBILITIES 5.1 Contractor Roles and Responsibilities 5.2 State Roles and Responsibilities 6 CONTRACT CHANGE PROCESS 6.1 Phase 1: Identify Potential Contract Changes 6.2 Phase 2: Finalize Contract Changes 6.3 Phase 3: Develop Contract Amendment 6.4 Phase 4: Route the Contract Amendment for Approvals & Execution 7. INTERACTION WITH OTHER PROJECT PROCESSES 8. CONTRACT MANAGEMENT TOOLS 8.1 Tracking Contract Requirement Compliance 8.2 Tracking Contract Candidates for Changes 9. QUARTERLY SCOPE ASSESSMENT 9.1 Scope Assessment Process 10. GLOSSARY AND ACRONYMS 10.1 New Acronyms and Terms APPENDIX 1: SOW TO DELIVERABLE TRACEABILITY CHECKLIST APPENDIX 2: DELIVERABLE COMPLIANCE AND VALIDATION CHECKLIST APPENDIX 3: ASSOCIATED ARTIFACTS
3.11.1-02 (new)	The Contractor shall only alter or modify this Deliverable's structure or content with <u>the approval</u> of the State Project Director or designee.
3.11.1-03 (new)	The State identifies and associates the following artifacts to the Contract Management Plan. The Contractor shall adopt, update, maintain, and deliver these artifacts in accordance with Appendix 3 of this deliverable including, but not limited to:

Req #	SOW Requirement
	• Scope Assessment Process • State Contract Change Candidate
3.11.1-04 (new)	The Contractor shall adopt and maintain all Project Artifacts that are associated with this Deliverable in the Project Artifact Inventory and manage them in accordance with the Project Artifact process.
3.11.1-05 (modified)	The Contractor shall attach to the Contract Management Plan the following appendices: Appendix 1—SOW to Deliverable Traceability Checklist Description: A table that identifies the SOW requirements for this Deliverable, as specified within SOW Section 8, DELIVERABLES, and includes but is not limited to: 1. SOW Requirement ID # 2. SOW Requirement Text 3. Requirement Traceability (Define traceability of the requirements to the Deliverable) 4. Requirement Fulfillment (Define how the SOW requirements have been fulfilled by this Deliverable) Appendix 2—Deliverable Compliance and Validation Checklist Description: A QA Checklist that includes: 1. Deliverable Section Number and Title 2. Deliverable Requirement Statement(s) 3. Requirement Completion (How the Contractor will comply with or has complied with the requirement statements within the plan) 4. Validation Method (The method the Contractor used to validate Deliverable compliance) 5. The Contractor's QA Manager sign-off on compliance Appendix 3—Associated Artifacts Description: An extract from the Project Artifact Inventory List of artifacts associated with this Deliverable, and will include but is not limited to the following examples: 1. Artifact Name 2. Associated Parent DEL 3. State Approver 4. SI Point of Contact 5. Review Frequency 6. Submission Frequency 7. Artifact File Format 8. Artifact Location (e.g., SharePoint breadcrumb) 9. Link to artifact

3.11.2 Contract Management Progress Tracking

The following requirements articulate expectations for the Contractor to indicate progress over the life of the Contract.

Table 3-50: Contract Management Progress Tracking

Req #	SOW Requirement
3.11.2-01 (new)	The Contractor shall staff, manage, lead and execute Contract Management on the CalHEERS as defined in this Statement of Work and in accordance with the CD-3.11-1 – Contract Management Plan.
3.11.2-02 (new)	The Contractor shall provide knowledgeable resources who have a good understanding of the contract and technical knowledge to address contract issues that arise throughout the lifecycle of the contract.

Req #	SOW Requirement
3.11.2-03 (new)	The Contractor shall record contract-related Decision Items (DIs) and Action Items (AIs) at the request of the State using the State's repository for tracking DIs and AIs. The Contractor shall communicate DI and AI information to their staff and ensure contract-related items are tracked, reported, and resolved in the timeframes logged in the tool. Updates and reporting shall be done at least on a weekly basis.
3.11.2-04 (new)	For contract-related items or topics that require escalation, the Contractor shall work directly with and collaborate with the State Contracts Manager (and team) when working through the existing CalHEERS escalation and dispute resolution processes. The State requires that escalated contract-related issues not be separated by the Contractor from the State's contracts team when including State leadership on contract disputes and interpretations.
3.11.2-05 (new)	In accordance with existing CalHEERS processes, the Contractor shall not engage in contract discussions, contract interpretations or contract disputes without the inclusion of the State Contracts team.
3.11.2-06 (new)	The Contractor shall adhere to the meeting timeframes and schedules established by the Contract Management Plan, and a mutually agreed contract team meeting calendar.
3.11.2-07 (new)	When offering an interpretation of contract language, the Contractor shall provide direct contract language with references so that the State Contracts Team can properly evaluate and engage in meaningful discussion and response to Contractor requests. Furthermore, historical precedence shall not be an acceptable argument for non-compliance with Contract violation of requirements and terms of the Contract. - Undiscovered contract violations do not warrant a de facto precedence argument.
3.11.2-08 (new)	If the State Assess Impact (SAI) process warrants a temporary violation of contract terms due to Project and Client time constraints/priorities, the Contractor shall work with the State to record, track, and resolve contract violations as part of the Contracts Management process after-the-fact. The SAI process shall not be used as a means to cut contract corners or bypass contract requirements. -Rather, there will be a provision to allow resolution of allowed violations to be resolved outside the normal project process (as approved by the State).
3.11.2-09 (new)	Prior to submitting to the State any new processes developed for the project, the contractor shall collaborate with the State Contracts Team to verify that new processes comply with the Contract, and any process(es) found to be out of compliance are corrected and approved by the State.
3.11.2-10 (new)	The Contractor shall conduct and facilitate recurring meetings (as mutually agreed between the State and the Contractor) with the Contract Management Team to address concerns and progress for any issues with the Contract.
3.11.2-11 (new)	The Contractor shall conduct formal quarterly scope assessments.
3.11.2-12 (new)	The Contractor shall ensure that those attending contract team meetings have sufficient knowledge of both the contract subject matter as well as the technical subject matter expertise, or bring additional SMEs as needed.
3.11.2-13 (new)	The Contractor shall record Issues, Action Items, Decision Items, and Risks using the existing EWM tool. No offline tracking will be allowable under this contract.
3.11.2-14 (new)	The Contractor shall not escalate or discuss potential conflicts with the contract to State leadership without State Contracts Team representation. Contract requests and decisions which require escalation to State leadership shall be formally documented in EWM.
3.11.2-15 (new)	The Contractor shall work collaboratively with the State Contracts team to determine the proper cadence and mode of communication for tracking and managing contract-related topics.
3.11.2-16 (new)	The Contractor shall prepare formal Agenda and meeting minutes for weekly (or periodic) Contract Team meetings. Meetings shall include a formal record of Action items, Issues, Decision Items, and Risks, include the status of each.

Req #	SOW Requirement
3.11.2-17 (new)	The Contractor shall collaborate with the State to assess compliance to Contract Requirements using the Contract Requirements Tracking Tool already in existence on the project.
3.11.2-18 (new)	The contractor shall update and maintain the Contract Requirements Tracking tool to ensure it is accurate and correct.
3.11.2-19 (new)	The Contractor shall report on the progress of all requirements and the degree to which requirements have been satisfied.
3.11.2-20 (new)	The Contractor shall site specific Contract requirements that are relevant to the Change Request process when going through the Contractor Assessment and SAI.
3.11.2-21 (new)	The Contractor shall collaborate with the State to develop and maintain any new Project Artifacts necessary to support this section. New artifacts shall be added to the Project Artifacts Repository and managed in accordance with the Project Artifact process.

3.11.3 Changes to the Contract

The section will describe how changes to the Contract will be managed.

Table 3-51: Changes to the Contract

Req #	SOW Requirement
3.11.3-01 (existing)	The Contractor shall establish and implement a formal Change Control Process to manage Project Scope. Change Control will provide a process to discuss, analyze, and document the impact of the change in scope and determine direction and next steps.
3.11.3-02 (existing)	The Contractor shall inform the State Project Director or designee of any potential deviation in scope or potential changes as soon as is reasonably possible to discuss, analyze and document the impact of the change.
3.11.3-03 (new)	The Contractor shall collaborate with the State and utilize the formal Contract Change Control Process used today by the CalHEERS Project to manage contract changes.
3.11.3-04 (new)	The Contractor shall utilize the EWM Action item or Decision Item tool as well as notifying the Contracts Team when proposing any potential deviation in scope or potential changes as soon as is reasonably possible to discuss, analyze and document the impact of the change.
3.11.3-05 (new)	The Contractor shall utilize and comply with the current Contract Change Management Process (CCMP) used by the CalHEERS Project to identify and manage candidates for contract changes are identified, tracked, reviewed, evaluated, and then either rejected or approved.
3.11.3-06 (new)	The Contractor shall utilize the CCMP to define the roles and responsibilities associated with this process, the cadence for contract change candidate review, the tool used by the CalHEERS Project team to log, track, and disposition each potential change.
3.11.3-07 (new)	The Contractor shall include as part of the CCMP the contract amendment process, cadence, and the roles and responsibilities State and Contractor team members play in the process.

3.11.4 Corrective Action Plan (CAP)

The Contractor may be required to provide and execute a Corrective Action Plan (CAP) in the very rare instance where a Contractor fails to meet a Contract requirement and ~~“Contractor Shall”~~ has not been able to be corrected through the normal communication channels and the matter has been escalated to the State Project Director or designee for intervention. ~~In this case, the State will may~~ will compel the Contractor to correct the ~~“Contractor shall”~~ Deficiency using a CAP wherein the Contractor shall articulate the specific steps that will be taken to correct the Contract Deficiency so that it does not happen again.

Note: Refer to Special Provisions, Section 7.3, CORRECTIONS OF DEFICIENCIES for the full set of correction action methods required under this Contract.

Table 3-52: Corrective Action Plan (CD-3.11-2)

Req #	SOW Requirement
3.11.4-01 (existing)	The Contractor shall document a SOP to produce the Daily Production Status Report and provide and execute a corrective action plan (CAP) for a Deliverable or service provided by the Contractor, which has been rejected by the State Project Director or designee. If the revision of a Deliverable requires longer than five (5) Business Days, or at the State's request, the Contractor shall provide a CAP within five (5) Business Days of receiving a Notice of rejection of the Deliverable or Service pursuant to Appendix A-2, SPECIAL PROVISIONS, Section 18.12, NOTICES, Section 7.3, CORRECTIONS OF DEFICIENCIES, and SOW Section 8.5.2, REVISED FORMAL DELIVERABLES.
3.11.4-02 (modified)	The Contractor shall update the CAP to be in compliance with the ISO/IEC 12207, IEEE Std 12207-2008 - Systems and software engineering – Software life cycle processes (6.2 Organizational Project-Enabling Processes). As new versions of standards are available, adoption of the new standard will be considered through the change control process and approved by the State Project Director or designee.
3.11.4-03 (modified)	The Contractor shall develop and execute the CAP, which must describe the changes necessary to bring the <u>Deficiency back to acceptable levels -contract, a process, Deliverable or Contract performance</u> to an acceptable level of compliance as determined by OTSI and the Contract.
3.11.4-04 (modified)	When requested by the State, the Contractor shall prepare a CAP to include but is not limited to the following: 1. Description of the “Contractor shall” Deficiency 2. Root cause analysis of the Contract Deficiency 3. Contractor corrective action steps, assumptions, and constraints 4. Assigned resources (including names and positions) 5. Action Plan schedule, to include planned and actual completion dates
3.11.4-05 (modified)	The Contractor shall describe in the CAP the changes necessary to prevent reoccurrence of a Contract non-compliance, or other future type occurrences.
3.11.4-06 (modified)	The Contractor shall include within the CAP a subject that identifies the Deficiency title, and when applicable, the date that the problem occurred.
3.11.4-07 (existing)	The Contractor shall only execute a CAP following receipt of written approval from the State Project Director or designee.
3.11.4-08 (existing)	The Contractor shall provide a written report of the status and progress of the CAP activities weekly to the State Project Director or designee.
3.11.4-09 (existing)	The Contractor shall notify the State Project Director or designee in writing when the activities within a CAP have been successfully executed.
3.11.4-10 (existing)	The Contractor shall consider the CAP complete based upon the State Project Director or designee's review and approval.
3.11.4-11 (existing)	The Contractor shall deliver for review, any documentation requested by the State Project Director or designee to support the State's CAP completion evaluation.

3.11.5 Subcontractor Management

The Contractor must employ an approach for management of Subcontractor Staff that facilitates a productive working relationship and progress towards task completion.

The Contractor is responsible for the overall management of all work that is delivered by its subcontractors for the CalHEERS Project. In this capacity, the Contractor will apply a comprehensive approach based on clear guiding principles, as described below, that will enable delivery of high-quality work and strengthen long term relationships between the State and the Contractor.

Table 3-53: Contractor/Subcontractor Management

Req #	SOW Requirement
3.11.5-01 (existing)	The Contractor shall be responsible for the coordination, control and performance of all Subcontractors.
3.11.5-02 (existing)	All Subcontractors shall be subject to the same requirements and standards as the Contractor.
3.11.5-03 (existing)	In the event of any performance concerns for Contractor or Subcontractor Staff, the Contractor shall notify the State Project Director or designee as soon as possible and jointly discuss the approach for resolving the concern.
3.11.5-04 (new)	The Contractor shall provide Communication and Onboarding for subcontractors to include but not be limited to: • Consistent with standard onboarding procedures as documented in the staffing management plan, notify the State in a timely manner when a new subcontractor resource joins the CalHEERS Project. • Work with subcontractors to define roles and responsibilities clearly and communicate those same expectations with the State. • Subcontractors will utilize the same channels and tools as SI resources for communications related to CalHEERS Project matters (e.g. using calheers.ca.gov for emails). • Training and providing the necessary resources to transition new subcontractor resources onto the CalHEERS Project. • Access to CalHEERS Project tools, systems, and environments will be granted to subcontractors consistent with the same processes defined for SI resources. • When subcontractors have completed the agreed upon work, they will be rolled off the project consistent with standard offboarding procedures as documented in the CD-3.4-2 Staffing Management Plan.
3.11.5-05 (new)	The Contractor shall provide Oversight of all subcontractors to include but not be limited to: • Each subcontractor resource will have a SI lead who will provide direct oversight to the work and performance of said resource. • Subcontractors will be subject to the same standards and requirements as any other SI resource. The SI lead will be responsible for communicating these requirements and expectations and assumes responsibility when the requirements and expectations are not met. • For each subcontractor, the SI is responsible for all invoices/payment related activities as they relate to work performed for the CalHEERS Project.
3.11.5-06 (new)	The Contractor shall provide full transparency in the costs for all subcontractors, providing the State with any requested cost information, and shall not apply a mark-up of more than 5% to subcontractor costs, without review/approval from the State Project Director or designee.

Req #	SOW Requirement
3.11.5-07 (new)	The Contractor shall insure the quality and performance of work for all subcontractors to include but not be limited to: • The SI lead for each subcontractor will be responsible for the review and quality check for work completed by the subcontractor resource. This includes communications, work products, and deliverables that the subcontractor completes for the CalHEERS Project. • The SI will track and manage time that subcontractor resources spend on work for the CalHEERS Project. If a performance-related issue is raised for any resource (SI or subcontractor), the SI will address the concern and confirm remediation with the State Project Director or designee, or other CalHEERS leader as appropriate. • Issues may be raised by CalHEERS State, Project Sponsors, or Project Stakeholders. Subject to the severity and frequency of the issue, the SI and CalHEERS State will work collaboratively to confirm the concern, identify a proposed resolution, and execute the recommendation to completion.
3.11.5-08 (new)	The Contractor shall utilize and comply with the current Contract Change Management Process used by CalHEERS Project to identify and manage Subcontractor candidates for contract changes are identified, tracked, reviewed, evaluated, and then either rejected or approved.
3.11.5-09 (new)	The Contractor shall include as part of the CCMP the contract amendment process, cadence, and the roles and responsibilities State and Subcontractor team members play in the process.
3.11.5-10 (new)	The Contractor shall upon request by the State Project Director or designee, provide Subcontractor details as part of the Subcontractor review, approval, and replacement process.

3.12 CALHEERS PROJECT ENTERPRISE TOOLS

3.12.1 Enterprise Tools

The State has identified the Enterprise Tools currently used to support the management and operation of the CalHEERS Project below in Figure 3-1, Enterprise Tools Matrix. The State anticipates that the Contractor may bring alternative and/or additional Enterprise Tools to CalHEERS.

Figure 3-1: Enterprise Tools Matrix

CalHEERS Tools															
		M5 Project	M5 Word	M5 Excel	M5 Outlook	M5 Teams	M5 Visio	Office 365	Adobe Acrobat	M5 SharePoint	HP - Application Lifecycle Manager (ALM)	Engineering Workflow Management (EWM)	Servicenow	Flexera	Splunk
Business Functions															
Documentation Library (Working)									X						
Documentation Library (Final)								X	X						
Schedule Management		X		X											
Risk Management				X							X				
Issue Management				X							X				
Decision Items				X							X				
Action Items				X							X				
Status Reporting			X	X											
Change Management											X	X			
Organizational/Business Change Management												X			N
Configuration Management															
SOW Requirements Management				X					X	X					X
Test/UAT Management										X					
Defect Management										X	X				
Communication / Team Collaboration				X	X		X		X						
Task Management															X
Deliverable / Document Management		X	X	X		X		X	X						
Asset Tracking													X		
Lessons Learned			X												
Systems Operation Dashboard											X		X		
System Requirements Management										X			X		
Key															
New Tools - Training and OCM activities scheduled	N														
CalHEERS Function Currently supported by tool	X														

Table 3-54: Enterprise Tools (CD-3.12-1)

Req #	SOW Requirement
3.12.1-01 (new)	The Contractor shall adopt, enhance, deliver, and maintain the CalHEERS Enterprise Tools, which includes but is not limited to: 1. INTRODUCTION 1.1 Purpose 1.2 List of Reference Documents 1.3 Audience 2. SUMMARY 2.1 Scope 3. APPROACH 4. ASSUMPTIONS, CONSTRAINTS, AND RISKS 4.1 Assumptions 4.2 Constraints 4.3 Risks 5. REQUIREMENTS 6. ROLES AND RESPONSIBILITIES 6.1 Roles and Responsibilities 6.1.1 Contractor Roles and Responsibilities 6.1.2 State Roles and Responsibilities 7. ENTERPRISE TOOLS 7.1 Enterprise Tools Overview 7.1.1 Enterprise Tools: Descriptions and Business Use Overview 7.1.2 Enterprise Tools Tracker 8. ENTERPRISE TOOLS TRAINING MATERIAL DEVELOPMENT 8.1 Enterprise Tools Training Materials 8.1.1 Core Component of Enterprise Tools Training Materials 8.1.2 Annual Updates and Maintenance to Enterprise Tool Training Materials 8.1.3 Location of Finalized Enterprise Tool Training Materials 9. DELIVERING ENTERPRISE TOOLS TRAINING 9.1 Enterprise Tools Training Delivery and Organizational Change Management 9.1.1 Process to Define Enterprise Tools Training Cadence and Delivery Methods 10. GLOSSARY AND ACRONYMS 10.1 New Acronyms and Terms APPENDIX 1: SOW TO DELIVERABLE TRACEABILITY CHECKLIST APPENDIX 2: DELIVERABLE COMPLIANCE AND VALIDATION CHECKLIST APPENDIX 3: ASSOCIATED ARTIFACTS
3.12.1-02 (new)	The Contractor shall only alter or modify this Deliverable's structure or content with the approval of the State Project Director or designee.
3.12.1-03 (modified)	The Contractor shall provide instruction to State and Sponsor project support staff for Contractor tools and procedures, which includes but is not limited to: 1. ~~1.~~ Explanation of each process that uses the tools 2. ~~2.~~ Explanation of functionality, navigation, operation, and outputs of the tools 3. ~~3.~~ Hands-on demonstration and practice with operating the tools 4. ~~4.~~ Hands-on demonstration and practice with online help 5. ~~5.~~ Explanation of user documentation or self-paced tutorials
3.12.1-04 (new)	Unless otherwise approved by the State Project Director or designee, the Contractor shall provide access to all Enterprise Tools in accordance with Special Provision 8.4.3. The tools currently in use by the Project are identified in Figure 3-1.

Req #	SOW Requirement
3.12.1-05 (new)	The Contractor shall provide all Enterprise Tools used to support the management and operation of the CalHEERS Project, maintaining and evolving the tools to meet the needs of CalHEERS and to match evolving project processes, including, but not limited to Data Warehouse tools.
3.12.1-06 (new)	The Contractor shall maintain all Enterprise Tools ensuring proper security encryption of PII/PHI across the Enterprise Tool set as directed by the State Project Director or designee.
3.12.1-07 (new)	The Contractor shall, in collaboration with the State, update Enterprise Tools: Descriptions and Business Use Overview as agreed to with the State, of the CD-3.12-1 – Enterprise Tools deliverable, to include a description of each enterprise tool, identify how each enterprise tool is used, and describe the outputs of each enterprise tool (reports, presentations, etc.).
3.12.1-08 (new)	The Contractor shall develop and maintain training materials for all Enterprise Tools for use by the State and Sponsors.
3.12.1-09 (new)	The Contractor shall develop additional training materials or update existing training materials at the State's request which may require additional levels of detail.
3.12.1-10 (new)	The State identifies and associates the following artifacts to the Enterprise Tools. The Contractor shall adopt, update, maintain, and deliver these artifacts in accordance with Appendix 3 of this deliverable including, but not limited to: • All Active Campus Licenses • All Active Contracts • All Active Licenses • All Active Purchased Licenses • All Campus Server Room Assets • All Contracts Campus Related • All Contracts for Facilities • All E-Waste Assets • All Facilities Hardware Assets • All Hardware Assets in Storage • All Installed Hardware Assets • All Open-Source Licenses • CalHEERS Engineering Workflow Management (EWM) Training – Curriculum – Enterprise Tools • CalHEERS Enterprise Tools - ALM Self-Paced User Training • CalHEERS Enterprise Tools - CalHEERS ServiceNow Self-Paced User Training • CalHEERS Enterprise Tools - Jira Self-Paced User Training • CalHEERS Flexera Quick Reference Guide - Enterprise Tools • CalHEERS HP-LoadRunner Quick Reference Guide - Enterprise Tools • CalHEERS MS Teams Quick Reference Guide - Enterprise Tools • CalHEERS OneNote Quick Reference Guide - Enterprise Tools • CalHEERS Project Deliverables Training Curriculum • CalHEERS Quick Reference Guides – MS Teams, Flexera, OneNote, and HP-LoadRunner – Enterprise Tools • CalHEERS Rational Team Concert (RTC) Training – Curriculum – Enterprise Tools • Enterprise Tools - ALM Overview Training Presentation • Enterprise Tools - ALM Defects Training Presentation • Enterprise Tools - ALM Requirements Module Overview Training Presentation • Enterprise Tools - ALM Testing Training Presentation • Enterprise Tools - EWM Action Items - Decision Items Training • Enterprise Tools - EWM CR Training • Enterprise Tools - EWM Dashboards

Req #	SOW Requirement
	- Enterprise Tools - EWM Defect Training - Enterprise Tools - EWM Overview Training - Enterprise Tools - EWM Risk and Issues Training - Enterprise Tools - Jira Training Part 1 - Enterprise Tools - Jira Training Part 2 - Enterprise Tools - EWM Action Items - Decision Items Training - Enterprise Tools - EWM CR Training - Enterprise Tools - EWM Defect Training - Enterprise Tools - EWM Overview Training - Enterprise Tools - R EWM TC Risk and Issues Training - Enterprise Tools - ServiceNow Fulfiller Navigation Training - Enterprise Tools - ServiceNow Fulfiller Overview Training - Enterprise Tools - ServiceNow Requester Navigation Training - Enterprise Tools - ServiceNow Requester Overview Training - Enterprise Tools - SharePoint Best Practices Training - Enterprise Tools - SharePoint Navigation Training - Enterprise Tools - SharePoint Overview Training - Enterprise Tools - Using the ALM Link Accelerator & Validation Training Presentation Enterprise Tools – Cost Tracking Tool - Enterprise Tools Training - Enterprise Tools Training Annual Review Tracker - Monthly Purchases Report
3.12.1-11 (new)	The Contractor shall adopt and maintain all Project Artifacts that are associated with this Deliverable in the Project Artifact Inventory and manage them in accordance with the Project Artifact process.
3.12.1-12 (new)	The Contractor shall collaborate with the State to develop and maintain any new Project Artifacts necessary to support this section. New artifacts shall be added to the Project Artifacts Repository and managed in accordance with the Project Artifact process.
3.12.1-13 (new)	The Contractor shall upgrade all Enterprise Tools which are identified in this deliverable (CD-3.12-1) in accordance with SOW 6.6 TECHNOLOGY REFRESH.
3.12.1-14 (new)	The Contractor shall attach to the Enterprise Tools the following appendices: Appendix 1—SOW to Deliverable Traceability Checklist Description: A table that identifies the SOW requirements for this Deliverable, as specified within SOW Section 8, DELIVERABLES, and includes but is not limited to: - SOW Requirement ID # - SOW Requirement Text - Requirement Traceability (Define traceability of the requirements to the Deliverable) - Requirement Fulfillment (Define how the SOW requirements have been fulfilled by this Deliverable) Appendix 2—Deliverable Compliance and Validation Checklist Description: A QA Checklist that includes, but is not limited to: - Deliverable Section Number and Title - Deliverable Requirement Statement(s) - Requirement Completion (How the Contractor will comply with or has complied with the requirement statements within the plan) - Validation Method (The method the Contractor used to validate Deliverable compliance) - The Contractor's QA Manager sign-off on compliance

Req #	SOW Requirement
	Appendix 3—Associated Artifacts Description: An extract from the Project Artifact Inventory List of artifacts associated with this Deliverable, and will include but is not limited to the following examples: 1. Artifact Name 2. Associated Parent DEL 3. State Approver 4. SI Point of Contact 5. Review Frequency 6. Submission Frequency 7. Artifact File Format 8. Artifact Location (e.g., SharePoint breadcrumb) 9. Link to artifact

3.12.2 Enterprise Tools Activities

Table 3-55 : Enterprise Tools

Req #	SOW Requirement
3.12.2-01 (new)	The Contractor shall staff, manage, lead and execute enterprise tools management on the CalHEERS as defined in this Statement of Work and in accordance with the CD-3.12-1 – Enterprise Tools.
3.12.2-02 (modified)	The Contractor shall provide training to State project and Sponsor support staff on new tools and procedures per schedule prior to implementation by the Contractor.
3.12.2-03 (existing)	Unless otherwise approved by the State Project Director or designee, the Contractor shall provide access and instruction to State staff on all tools and related procedures, including user guides, used in support of the CalHEERS Project and System. The tools support project functions including, but not limited to: 1. Risk and Issue management 2. Communication management 3. Schedule management 4. Change control 5. Configuration management 6. Release management 7. Performance monitoring 8. Service desk 9. Requirements management 10. Testing 11. Development tools (e.g., Integrated Development Environment) 12. Document Management/Library
3.12.2-04 (existing)	The Contractor shall provide quarterly Contractor tool training sessions for State project support staff identified by the State Project Director or designee.
3.12.2-05 (existing)	For ongoing State project support staff training, the Contractor shall provide for additional, tool specific sessions at the direction of the State Project Director or designee.
3.12.2-06 (new)	The Contractor shall ensure that all CalHEERS web-based tools are accessible via the list of State desired web browsers.
3.12.2-07 (existing)	The Contractor shall provide a Change Request Tracking Tool that shall log, and track submitted CRs in accordance with the State approved Change Control Plan and processes.

Req #	SOW Requirement
3.12.2-08 (existing)	Unless otherwise approved by the State Project Director or designee, the Contractor shall maintain and operate all tools used in support of the CalHEERS Project and System. The tools support project functions including, but not limited to: 1. Risk and Issue management 2. Communication management 3. Schedule management 4. Change control 5. Configuration management 6. Release management 7. Performance monitoring 8. Service desk 9. Requirements management 10. Testing 11. Development tools (e.g., Integrated Development Environment) 12. Document Management/Library
3.12.2-09 (new)	The Contractor shall streamline all tools and practices to comply with accessibility standards (i.e., WCAG 2.1 AA, Section 508) and ensure overall user experience consistency.

3.13 CALHEERS PROJECT PROCESSES

The CalHEERS Project has a number of defined processes which, properly managed, will lend themselves to improved communication and efficiency within the CalHEERS Project with the formalization of these processes into a high quality CalHEERS Project Process Guide. Through the following requirements, the Contractor will build, maintain, and train varying levels of users in the processes and tools that will increase the efficiency and effectiveness of CalHEERS Project staff.

3.13.1 CalHEERS Project Process Guide Plan

The CalHEERS Project Process Guide is used as a reference to documentation that provides support for the entire CalHEERS Project, helping project staff to perform their jobs effectively and efficiently. The CalHEERS Project Process Guide is used as a desktop reference and must be viewable online in SharePoint.

Table 3-56: CalHEERS Project Process Guide Plan (CD-3.13-1)

Req #	SOW Requirement
3.13.1-01 (new)	The Contractor shall adopt, enhance, deliver, and maintain the CalHEERS Project Process Guide Plan, which includes but is not limited to: 1. INTRODUCTION 1.1 Purpose 1.2 List of Reference Documents 1.3 CD-3.14-1 Project Process Guide Training Plan Audience 2. SUMMARY 2.1 Scope 3. APPROACH 3.1 CalHEERS Project Process Guide Development Approach 4. ASSUMPTIONS, CONSTRAINTS, AND RISKS 4.1 Assumptions 4.2 Constraints 4.3 Risks

Req #	SOW Requirement
	5. REQUIREMENTS 6. ROLES AND RESPONSIBILITIES 7. TOOLS 8. PROJECT PROCESS GUIDE DEVELOPMENT AND MAINTENANCE PLAN 8.1 Current State Analysis Approach 8.2 Process and Guidelines for New PPG Creation and Modification 8.3 PPG Ongoing Maintenance 8.4 Standardization and Templates 9. GLOSSARY AND ACRONYMS APPENDIX 1: SOW TO DELIVERABLE TRACEABILITY CHECKLIST APPENDIX 2: DELIVERABLE COMPLIANCE AND VALIDATION CHECKLIST APPENDIX 3: ASSOCIATED ARTIFACTS APPENDIX 4: EMAIL TEMPLATES AND SCHEDULE
3.13.1-02 (new)	The Contractor shall only alter or modify this Deliverable's structure or content with the approval of the State Project Director or designee.
3.13.1-03 (modified)	In collaboration with the State, the Contractor shall adopt existing processes, develop new processes, and maintain the CalHEERS Project Process Guide (including technical and non-technical processes).
3.13.1-04 (new)	The Contractor shall adopt and maintain all Project Artifacts that are associated with this Deliverable in the Project Artifact Inventory and manage them in accordance with the Project Artifact process.
3.13.1-05 (new)	The Contractor shall attach to the Project Process Guide Plan the following appendices: Appendix 1—SOW to Deliverable Traceability Checklist Description: A table that identifies the SOW requirements for this Deliverable, as specified within SOW Section 8, DELIVERABLES, and includes but is not limited to: 1. SOW Requirement ID # 2. SOW Requirement Text 3. Requirement Traceability (Define traceability of the requirements to the Deliverable) 4. Requirement Fulfillment (Define how the SOW requirements have been fulfilled by this Deliverable) Appendix 2—Deliverable Compliance and Validation Checklist Description: A QA Checklist that includes, but is not limited to: 1. Deliverable Section Number and Title 2. Deliverable Requirement Statement(s) 3. Requirement Completion (How the Contractor will comply with or has complied with the requirement statements within the plan) 4. Validation Method (The method the Contractor used to validate Deliverable compliance) 5. The Contractor's QA Manager sign-off on compliance Appendix 3—Associated Artifacts Description: An extract from the Project Artifact Inventory List of artifacts associated with this Deliverable, and will include but is not limited to the following examples: 1. Artifact Name 2. Associated Parent DEL 3. State Approver 4. SI Point of Contact 5. Review Frequency 6. Submission Frequency 7. Artifact File Format 8. Artifact Location (e.g., SharePoint breadcrumb)

Req #	SOW Requirement
	9. Link to artifact

3.13.2 CalHEERS Process Guide Execution

The Contractor shall provide services as described in this section.

Table 3-57: CalHEERS Project Process Guide Requirements

Req #	SOW Requirement
3.13.2-01 (new)	The Contractor shall staff, manage, lead and execute Process Guide Management on the CalHEERS as defined in this Statement of Work and in accordance with the CD-3.13-1 – CalHEERS Project Process Guide Plan.
3.13.2-02 (new)	The Contractor shall collaborate with the State to develop and maintain any new Project Artifacts necessary to support this section. New artifacts shall be added to the Project Artifacts Repository and managed in accordance with the Project Artifact process.
3.13.2-03 (modified)	The Contractor shall develop, update and publish a desk reference guide to support the use of the CalHEERS Project Artifact repository and how Project processes and associated Project SharePoint Project Process pages are used.
3.13.2-04 (new)	The Contractor shall collaborate with the State's contract team to verify that newly developed processes are not in conflict with the contract, and to fix conflicting processes when discovered. Corrections shall be conducted (as applicable) in accordance with the CalHEERS Project change control process and Service Level Agreement standards.
3.13.2-05 (existing)	The Contractor shall actively participate in all CalHEERS Processes that include but are not limited to the following: 1. ICR Process 2. CR Process 3. CCB Process 4. CET Process 5. RIMG Process 6. Information Technology Infrastructure Library (ITIL) Process 7. Technical Change Management Process 8. SLM Process 9. Defect Management Process 10. Release Management Process 11. Deliverable Management Process
3.13.2-06 (existing)	The Contractor shall follow their roles and responsibilities as outlined within each of the CalHEERS Process Guides.

3.14 CALHEERS PROJECT TRAINING

3.14.1 CalHEERS Project Process Guide Training Plan

The Training Plan describes the training course objectives, course curriculum, training materials, training methods, staffing, equipment and schedules for all training.

Table 3-58: CalHEERS Project Process Guide Training Plan (CD-3.14-1)

Req #	SOW Requirement
3.14.1-01 (modified)	The Contractor shall adopt, enhance, deliver, and maintain the Project Process Guide Training Plan, which includes but is not limited to: 1. INTRODUCTION

Req #	SOW Requirement
	1.1. Purpose 1.2. List of Reference Documents 1.3. Audience 1.4. Deliverable Traceability 2. SUMMARY 2.1. Scope 3. ASSUMPTIONS, CONSTRAINTS, AND RISKS 3.1. Assumptions 3.2. Constraints 3.3. Risks 4. REQUIREMENTS 5. ROLES AND RESPONSIBILITIES 6. TRAINING METHODOLOGY AND APPROACH 6.1. ADDIE Model Overview 6.2. Analyze Phase 6.2.1. Audience Analysis and Training Needs Assessment Overview 6.2.2. Approach and Process for Conducting Audience Analysis 6.2.3. Audience Analysis Template 6.3. Design Phase 6.3.1. Training Curriculum Development Approach 6.3.2. Design Roles and Responsibilities of Contractor and State Teams 6.4. Develop Phase 6.4.1. Training Development Approach 6.4.2. Training Materials Overview 6.4.3. Timeline for Training Development 6.4.4. Development of Templates 6.4.5. Naming Conventions for Published Training 6.4.6. Compliance with the Americans with Disabilities Act (ADA) 6.5. Implement Phase 6.5.1. Objectives of Training Delivery 6.5.2. Training Delivery Method 6.5.2.1. Self-Paced Training 6.5.2.2. Instructor-Led Training 6.5.3. Training Delivery Scheduling and Tracking 6.6. Evaluate Phase 6.6.1. Evaluation Approach 6.6.2. Training Assessment Approach 6.7. Maintenance Phase 6.7.1. Maintenance Approach 6.7.2. Approach for Maintaining Training Materials 6.7.3. Approach for Retraining 7. TRAINING FOR TRAINERS APPROACH 7.1. CalHEERS Training for Trainers Overview 7.2. Identification of Trainers 7.3. General Training Skills Training for Trainers Approach 7.4. CalHEERS Project Training for Trainers Approach 8. TRAINING TOOLS 8.1. Tools Overview 8.1.1. Learning Management System Overview 8.1.2. Use of Learning Management System 8.1.3. Roles and Responsibilities for Learning Management System 8.1.4. Project Process Guide for Learning Management System 8.1.5. Reporting and Outputs from Learning Management System Overview

Req #	SOW Requirement
	8.1.6. Training Tracking 8.2. Training Development Tools 8.2.1. Description of Tools 8.2.2. Roles and Responsibilities for Training Development Tools 8.3. Training Assessment Tool 8.3.1. Description of Tool 8.3.2. Roles and Responsibilities for Training Assessment Tool 8.3.3. Using CalHEERS Training Assessment Outcomes 9. TRAINING DELIVERY SITES AND EQUIPMENT 9.1. Training Delivery Sites 9.2. Training Delivery Equipment 10 Project Process Guide Self-Paced Training 10.1 Course Name and Purpose Overview 10.2. PROCESS FOR ACCESSING AND REVIEWING SCORM COMPLIANT PACKAGES 10.3. SELF-PACED USER TRAINING COURSE LINK 10.3.1 Link to self-paced training course 10.3.2 Link to self-paced user training evaluation 10.3.3 Link and contact information for web-based training help or content concerns 11 Project Training Courses 11.1.1.Course Name 11.1.2 Course Purpose 11.1.3 Course Audience 11.1.4 Course Owners/ Subject Matter Experts 11.2. COURSE COMPLETION DETAILS 11.2.1 Learning Objective 11.2.2 Course Reference Documents 11.2.3 Course Outline 11.2.4 Training Delivery Format 11.2.5 Delivery Cadence 12 Project Training Curriculum 12.1.1 Purpose 12.1.2 List of Reference Documents 12.1.3 Audience 12.2. SUMMARY 12.2.1 Scope 12.3. APPROACH 12.4. ASSUMPTIONS, CONSTRAINTS, AND RISKS 12.4.1 Assumptions 12.4.2 Constraints 12.4.3 Risks 12.5. REQUIREMENTS 12.6. ROLES AND RESPONSIBILITIES 12.6.1 Roles and Responsibilities 12.6.1.1 Contractor Roles and Responsibilities 12.6.1.2 State Roles and Responsibilities 12.7. PROJECT PROCESS TRAINING CURRICULUM 12.7.1 Introduction 12.7.1.1 Curriculum Name 12.7.1.2 Curriculum Purpose 12.7.1.3 Curriculum Audience 12.7.1.4 Tools and Applications Required for Course Participation 12.7.2 Curriculum Overview

Req #	SOW Requirement
	12.7.2.1 Learning Objectives 12.7.2.2 Prerequisite Knowledge 12.7.2.3 Training Delivery Format 12.7.2.4 Delivery Cadence 12.7.3 Training Curriculum 12.7.3.1 Curriculum Course Hierarchy 12.7.3.2 Course Topics 12.7.3.3 Approach to Building Team-Specific Project Process Training Curricula 12.7.4 Training Wrap-Up 12.7.4.1 Course Evaluation Approach 12.7.4.2 Course Review Team (State and Contractor) ~~103~~. GLOSSARY AND ACRONYMS ~~103~~.1. New Acronyms and Terms APPENDIX 1: SOW TO DELIVERABLE TRACEABILITY CHECKLIST APPENDIX 2: DELIVERABLE COMPLIANCE AND VALIDATION CHECKLIST APPENDIX 3: ASSOCIATED ARTIFACTS APPENDIX 4: COURSE DEVELOPMENT PROCESS 4.1 Summary 4.2 List of Reference Documents 4.3 Audience 4.4 Course Development Approach 4.5 Assumptions, Constraints, and Risks for Course Development 4.5.1 Assumptions 4.5.2 Constraints 4.5.3 Risks 4.6 Requirements 4.7 Roles and Responsibilities for Course Development 4.7.1 Contractor Roles and Responsibilities 4.7.2 State Roles and Responsibilities
3.14.1-02 (new)	The Contractor shall only alter or modify this Deliverable's structure or content with the approval of the State Project Director or designee.
3.14.1-03 (new)	The State identifies and associates the following artifacts to the Project Process Guide Training Plan. The Contractor shall adopt, update, maintain, and deliver these artifacts in accordance with Appendix 3 of this deliverable including, but not limited to: • CalHEERS Project Deliverables Contractor Author - Overview • CalHEERS Project Deliverables Contractor Author - Overview.mp4 • CalHEERS Project Deliverables Contractor Author - Overview.story • CalHEERS Project Deliverables Contractor Author - Role & Responsibilities • CalHEERS Project Deliverables Contractor Author - Role &.mp4 • CalHEERS Project Deliverables State Owner - Overview • CalHEERS Project Deliverables State Owner - Overview.mp4 • CalHEERS Project Deliverables State Owner - Roles and Responsibilities • CalHEERS Project Deliverables State Owner - Roles and.mp4 • CalHEERS Project Deliverables State Owner and SME - Overview.story • CalHEERS Project Orientation Part 1 - Self-Paced User Training - General Project Information.story • CalHEERS Project Orientation Part 1 - Self-Paced User Training - General Project Information • CalHEERS Project Orientation Part 1 - Self-Paced User.mp4 • CalHEERS Project Orientation Part 2 - Self-Paced User Training - General Project

Req #	SOW Requirement
	• CalHEERS Project Orientation Part 2 - Self-Paced User Training - General Project Information.story • CalHEERS Project Orientation Part 2 - Self-Paced User.mp4 • CalHEERS Project Training Courses • CalHEERS Project Training Curriculum • CalHEERS ServiceNow Navigation Training for Fulfillers • CalHEERS ServiceNow Navigation Training for Fulfillers.mp4 • CalHEERS ServiceNow Navigation Training for Fulfillers.story • CalHEERS ServiceNow Navigation Training for Requesters • CalHEERS ServiceNow Navigation Training for Requesters.mp4 • CalHEERS ServiceNow Navigation Training for Requesters.story • CalHEERS ServiceNow Overview Training for Fulfillers • CalHEERS ServiceNow Overview Training for Fulfillers.mp4 • CalHEERS ServiceNow Overview Training for Fulfillers.story • CalHEERS ServiceNow Overview Training for Requesters • CalHEERS ServiceNow Overview Training for Requesters.mp4 • CalHEERS ServiceNow Overview Training for Requesters.story • Enterprise Tool - CalHEERS SharePoint Overview.mp4 • Enterprise Tools - ALM Overview Training • Enterprise Tools - ALM Overview Training.mp4 • Enterprise Tools - ALM Overview Training.story • Enterprise Tools - ALM Requirements Module Overview Training • Enterprise Tools - ALM Requirements Module Overview Training.mp4 • Enterprise Tools - ALM Requirements Module Overview.story • Enterprise Tools - ALM Testing Training • Enterprise Tools - ALM Testing.mp4 • Enterprise Tools - ALM Testing.story • Enterprise Tools - CalHEERS SharePoint Best Practices.mp4 • Enterprise Tools - CalHEERS SharePoint Navigation.mp4 • Enterprise Tools - Jira Training Part 1 • Enterprise Tools - Jira Training Part 1.mp4 • Enterprise Tools - Jira Training Part 1.story • Enterprise Tools - Jira Training Part 2 • Enterprise Tools - Jira Training Part 2.mp4 • Enterprise Tools - Jira Training Part 2.story • Enterprise Tools - SharePoint Best Practices • Enterprise Tools - SharePoint Best Practices.story • Enterprise Tools - SharePoint Navigation Training • Enterprise Tools - SharePoint Navigation Training.story • Enterprise Tools - SharePoint Overview • Enterprise Tools - SharePoint Overview.story • Enterprise Tools - Using the ALM Link Accelerator & Validation Training • Enterprise Tools - Using the ALM Link Accelerator & Validation Training.mp4 • Enterprise Tools - Using the ALM Link Accelerator & Validation Training.story • Final CalHEERS Project Deliverables Contractor Author - Role and Responsibilities.story • Final CalHEERS Project Deliverables State Owner and SMEs - Roles and Responsibilities.story • How to Extract and Review SCORM Files • Process Guide Template_PPT • Process Guide Template_Visio

Req #	SOW Requirement
	- Process Guide Template_Word - Project Process Guide (PPG) Guidance - TPRM for Linking to Project Process Guide
3.14.1-04 (new)	The Contractor shall adopt and maintain all Project Artifacts that are associated with this Deliverable in the Project Artifact Inventory and manage them in accordance with the Project Artifact process.
3.14.1-05 (new)	The Contractor shall attach to the Project Process Guide Training Plan the following appendices: Appendix 1—SOW to Deliverable Traceability Checklist Description: A table that identifies the SOW requirements for this Deliverable, as specified within SOW Section 8, DELIVERABLES, and includes but is not limited to: 1. SOW Requirement ID # 2. SOW Requirement Text 3. Requirement Traceability (Define traceability of the requirements to the Deliverable) 4. Requirement Fulfillment (Define how the SOW requirements have been fulfilled by this Deliverable) Appendix 2—Deliverable Compliance and Validation Checklist Description: A QA Checklist that includes, but is not limited to: 1. Deliverable Section Number and Title 2. Deliverable Requirement Statement(s) 3. Requirement Completion (How the Contractor will comply with or has complied with the requirement statements within the plan) 4. Validation Method (The method the Contractor used to validate Deliverable compliance) 5. The Contractor's QA Manager sign-off on compliance Appendix 3—Associated Artifacts Description: An extract from the Project Artifact Inventory List of artifacts associated with this Deliverable, and will include but is not limited to the following examples: 1. Artifact Name 2. Associated Parent DEL 3. State Approver 4. SI Point of Contact 5. Review Frequency 6. Submission Frequency 7. Artifact File Format 8. Artifact Location (e.g., SharePoint breadcrumb) 9. Link to artifact

3.14.2 CalHEERS Project Process Guide Training

The Contractor shall develop and deliver training in support of the integration of the CalHEERS Project Process Guide into the CalHEERS Project.

The following requirements identify the Contractor's general training responsibilities.

Table 3-59: CalHEERS Project Process Guide Training - General

Req #	SOW Requirement
3.14.2-01 (new)	The Contractor shall staff, manage, lead and execute Process Guide Training on the CalHEERS as defined in this Statement of Work and in accordance with the CD-3.14-1 – Project Process Guide Training Plan.
3.14.2-02 (new)	The Contractor shall collaborate with the State to develop and maintain any new Project Artifacts necessary to support this section. New artifacts shall be added to the Project Artifacts Repository and managed in accordance with the Project Artifact process.
3.14.2-03 (existing)	The Contractor shall provide an approach and services training development and delivery for all CalHEERS Project staff to include: 1. Providing training facilities (if needed) 2. Providing training equipment 3. Providing Training materials, 4. Organization, logistics, and staffing
3.14.2-04 (existing)	The Contractor shall tailor training specific to each user group within the scope of the CalHEERS Project Training.
3.14.2-05 (existing)	Under the guidance and direction of the State, the Contractor shall document when and by which method new Project Staff will: 1. Receive CalHEERS Project orientation and all appropriate training; 2. Receive and review the CalHEERS Project Process Guide; and 3. Receive training in the processes and procedures for Project communication and problem resolution.
3.14.2-06 (existing)	The Contractor shall provide training to all new CalHEERS Project staff on the curriculum based on the designated staff roles and responsibilities within the CalHEERS Project.
3.14.2-07 (existing)	The Contractor shall provide data warehouse and analytic users training and knowledge transfer on the data model, OBIEE, and Business Intelligence (BI) Publisher.

3.14.3 CalHEERS Project Process Guide Self-Paced Training

The following requirements apply to the Contractor's responsibility to provide self-paced user training.

Table 3-60: CalHEERS Project Process Guide - Self-Paced User Training

Req #	SOW Requirement
3.14.3-01 (existing)	The Contractor shall develop, maintain, and deliver to the State Project Director or designee, a Self-Paced CalHEERS Project Process Training Guide Solution that can be accessed from a CalHEERS end user's workstation.
3.14.3-02 (existing)	For the CalHEERS Project Process Training Guide self-paced training, the Contractor shall administer a Training Module Evaluation, developed by the State, to rate the instruction content and presentation, and to provide suggestions for improvement. The Training Module Evaluation must be available to anyone with access to the self-paced training.

3.14.4 CalHEERS Project Training Courses

Table 3-61: CalHEERS Project Training Courses

Req #	SOW Requirement
3.14.4-01 (existing)	The Contractor shall develop training courses in support of its overall training approach.

3.14.5 CalHEERS Project Training Materials

Table 3-62: CalHEERS Project Training Materials (CD-3.14-2)

Req #	SOW Requirement
3.14.5-01 (modified)	The Contractor shall adopt, enhance, deliver, and maintain the CalHEERS Project Training Materials, which includes but is not limited to: 1. INTRODUCTION 1.1 Course Name and Purpose 1.2 List of Reference Documents 1.3 Tools and Applications Required for Course 1.4 Process Training Course Audience 1.5 Course Glossary and Terms 2. COURSE DETAILS 2.1 Learning Objective 2.2 Prerequisite Knowledge 2.3 Course Agenda 2.4 Course Modules and Lessons (Course Content) 2.5 Course Review Process 3. EVALUATION 3.1 Instruction Evaluation 3.2 Content Evaluation 3.3 Suggestions for Improvement: 4. GLOSSARY AND ACRONYMS 4.1 New Acronyms and Terms from this Course APPENDIX 1: SOW TO DELIVERABLE TRACEABILITY CHECKLIST APPENDIX 2: DELIVERABLE COMPLIANCE AND VALIDATION CHECKLIST APPENDIX 3: MATERIALS DEVELOPMENT PROCESS - App 3.1 Summary - App 3.2 List of Reference Documents - App 3.3 Audience - App 3.4 Course Development Approach - App 3.5 Assumptions, Constraints, and Risks for Materials Development - App 3.5.1 Assumptions - App 3.5.2 Constraints - App 3.5.3 Risks - App 3.6 Requirements - App 3.7 Roles and Responsibilities for Materials Development - App 3.7.1 Contractor Roles and Responsibilities - App 3.7.2 State Roles and Responsibilities
3.14.5-02 (new)	The Contractor shall only alter or modify this Deliverable's structure or content with the approval of the State Project Director or designee.
3.14.5-03 (new)	The Contractor shall adopt and maintain all Project Artifacts that are associated with this Deliverable in the Project Artifact Inventory and manage them in accordance with the Project Artifact process.

Req #	SOW Requirement
3.14.5-04 (new)	The Contractor shall attach to the Project Training Materials the following appendices: Appendix 1—SOW to Deliverable Traceability Checklist Description: A table that identifies the SOW requirements for this Deliverable, as specified within SOW Section 8, DELIVERABLES, and includes but is not limited to: 1. SOW Requirement ID # 2. SOW Requirement Text 3. Requirement Traceability (Define traceability of the requirements to the Deliverable) 4. Requirement Fulfillment (Define how the SOW requirements have been fulfilled by this Deliverable) Appendix 2—Deliverable Compliance and Validation Checklist Description: A QA Checklist that includes, but is not limited to: 1. Deliverable Section Number and Title 2. Deliverable Requirement Statement(s) 3. Requirement Completion (How the Contractor will comply with or has complied with the requirement statements within the plan) 4. Validation Method (The method the Contractor used to validate Deliverable compliance) 5. The Contractor's QA Manager sign-off on compliance Appendix 3—Associated Artifacts Description: An extract from the Project Artifact Inventory List of artifacts associated with this Deliverable, and will include but is not limited to the following examples: 1. Artifact Name 2. Associated Parent DEL 3. State Approver 4. SI Point of Contact 5. Review Frequency 6. Submission Frequency 7. Artifact File Format 8. Artifact Location (e.g., SharePoint breadcrumb) 9. Link to artifact

3.14.6 CalHEERS Project Training Materials Execution

Table 3-63: CalHEERS Project Training Materials Execution

Req #	SOW Requirement
3.14.6-01 (new)	The Contractor shall staff, manage, lead and execute Training Materials Management on the CalHEERS as defined in this Statement of Work and in accordance with the CD-3.14-2 – CalHEERS Training Materials.
3.14.6-02 (new)	The Contractor shall provide a document management methodology that makes the training documentation easy to find for all project members. At a minimum, an easy-to-find internal training site or page with categories to easily find the guide required for any given user. Training documentation must be in small, organized groups for different user types and levels (e.g., the basics of signing in would be in the first document with more complex guides available for other project team training needs, organized by each different team's needs, where applicable.

Req #	SOW Requirement
3.14.6-03 (new)	The Contractor shall provide training documentation in a uniform and consistent format so that project teams can easily jump from one training document to another and understand organization and formats, etc. A table of contents should provide links or guidance on where to jump to find common topics, including guidance on where to jump to in a video training for different topics.
3.14.6-04 (new)	The Contractor shall collaborate with the State to develop and maintain any new Project Artifacts necessary to support this section. New artifacts shall be added to the Project Artifacts Repository and managed in accordance with the Project Artifact process.

3.15 STRATEGIC PLANNING AND MANAGEMENT

The strategic planning process optimizes resources and keeps CalHEERS relevant over the life of the Contract with comprehensive and collaborative planning for organizational changes, Technical/Architectural decision making, and system and service modifications to meet evolving DHCS and Covered California program needs and keep pace with technology innovations for functionality within the scope of the Contract.

3.15.1 Strategic Plan

The CalHEERS Strategic Plan reflects a “Future Vision” approach that encompasses a five (5) year planning window.

Table 3-64: CalHEERS Strategic Plan (CD-3.15-1)

Req #	SOW Requirement
3.15.1-01 (new)	The Contractor shall adopt, enhance, deliver, and maintain a CalHEERS Strategic Plan, which includes but is not limited to: 1. INTRODUCTION AND BACKGROUND 1.1 Message from the Director 1.2 Introduction 1.3 Accomplishments 2. Assumptions, Constraints, and Risks 3. REQUIREMENTS 4. ZOOM OUT 4.1 Mission and Vision 4.2 Six Key Disruptors in the Future of Health 2.2.1 Key Disruptor 1: X 2.2.2 Key Disruptor 2: X 2.2.3 Key Disruptor 3: X 2.2.4 Key Disruptor 4: X 2.2.5 Key Disruptor 5: X 2.2.6 Key Disruptor 6: X 5. Focus Areas 6. Zoom In 6.1 Strategic Priorities 6.2 Action Plans 6.2.1 Focus Area 1: Be secured, faster, better, and cost-effective 6.2.2 Focus Area 2: Continue to operate as “one team” 6.2.3 Focus area 3: enable innovation and continuous improvement 7. CONCLUSION 8. GLOSSARY AND ACRONYMS APPENDIX 1: SOW TO DELIVERABLE TRACEABILITY CHECKLIST APPENDIX 2: DELIVERABLE COMPLIANCE AND VALIDATION CHECKLIST APPENDIX 3 Associated Artifacts

Req #	SOW Requirement
	APPENDIX 4: STRATEGIC PLANNING SESSIONS APPENDIX 5: STRATEGIC PLAN ACTIVITY TIMELINE
3.15.1-02 (new)	The Contractor shall only alter or modify this Deliverable's structure or content with the approval of the State Project Director or designee.
3.15.1-03 (modified)	The Contractor shall support the CalHEERS Management Team and stakeholders in the development, enhancement and continued refinement of the CalHEERS Strategic Plan. The plan shall include, at a minimum, the following considerations for ongoing system and service modifications and improvements: 1. The Plan shall cover a period of five (5) years 2. Ensure the strategic plan aligns with the vision, goals and desired innovation of the CalHEERS Project. 3. Ensure CalHEERS continues to meet the evolving needs of Federal and State healthcare affordability programs 4. Ensure the strategic plan aligns with guiding principles for CalHEERS System changes. 5. Ensure the strategic plan aligns with the strategic plans of CalHEERS' Sponsors, as well as the California Health and Human Services IT and Data Strategic Plan.
3.15.1-04 (new)	The Contractor shall adopt and maintain all Project Artifacts that are associated with this Deliverable in the Project Artifact Inventory and manage them in accordance with the Project Artifact process.
3.15.1-05 (new)	The Contractor shall update or develop the following appendices and attach them to the Strategic Plan deliverable: Appendix 1—SOW to Deliverable Traceability Checklist Description: A table that identifies the SOW requirements for this Deliverable, as specified within SOW Section 8, DELIVERABLES, and includes but is not limited to: 1. SOW Requirement ID # 2. SOW Requirement Text 3. Requirement Traceability (Define traceability of the requirements to the Deliverable) 4. Requirement Fulfillment (Define how the SOW requirements have been fulfilled by this Deliverable) Appendix 2—Deliverable Compliance and Validation Checklist Description: A QA Checklist that includes, but is not limited to: 1. Deliverable Section Number and Title 2. Deliverable Requirement Statement(s) 3. Requirement Completion (How the Contractor will comply with or has complied with the requirement statements within the plan) 4. Validation Method (The method the Contractor used to validate Deliverable compliance) 5. The Contractor's QA Manager sign-off on compliance Appendix 3—Associated Artifacts Description: An extract from the Project Artifact Inventory List of artifacts associated with this Deliverable, and will include but is not limited to the following examples: 1. Artifact Name 2. Associated Parent DEL 3. State Approver 4. SI Point of Contact 5. Review Frequency 6. Submission Frequency 7. Artifact File Format 8. Artifact Location (e.g., SharePoint breadcrumb) 9. Link to artifact

3.15.2 Strategic Roadmap

The CalHEERS Strategic Planning Roadmap is graphic representation of system and service modifications for a twenty-four (24) month planning window. The roadmap is a graphic presentation of the planned modifications, supplemented by a list of planned changes by release with cost estimates for each change and subtotal estimates for each release.

Table 3-65: Strategic Roadmap (CD-3.15-2)

Req #	SOW Requirement
3.15.2-01 (new)	The Contractor shall adopt, enhance, deliver, and maintain a CalHEERS Strategic Roadmap, which includes but is not limited to: 1 INTRODUCTION 1.1 Purpose 1.2 List of Reference Documents 1.3 Audience 2. Summary 2.1 Scope 3. Approach 4. ASSUMPTIONS, CONSTRAINTS, AND RISKS 4.1 Assumptions 4.2 Constraints 4.3 Risks 5. REQUIREMENTS 6. ROLES AND RESPONSIBILITIES 6.1 Roles and Responsibilities 6.1.1 Contractor Roles and Responsibilities 6.1.2 State Roles and Responsibilities 6.1.3 Sponsor Roles and Responsibilities 7. STRATEGIC ROADMAP 7.1 Timeline for the Roadmap 7.2 Creation of the Roadmap 7.2.1 Cover Sheet 7.2.2 IAP Roadmap 7.2.3 24 Month Release Roadmap 7.2.4 Pipeline 7.3 Maintenance of the Roadmap 7.4 Assembly Bill 1296 Stakeholder Meetings 8. GLOSSARY AND ACRONYMS 8.1 New Acronyms and Terms APPENDIX 1: SOW TO DELIVERABLE TRACEABILITY CHECKLIST APPENDIX 2: DELIVERABLE COMPLIANCE AND VALIDATION CHECKLIST APPENDIX 3 ASSOCIATED ARTIFACTS APPENDIX 4: STRATEGIC PLANNING SESSIONS
3.15.2-02 (new)	The Contractor shall only alter or modify this Deliverable's structure or content with <u>the approval</u> of the State Project Director or designee.
3.15.2-03 (existing)	The Contractor shall develop, maintain and deliver to the State the following Strategic Roadmap deliverables: 1. Functional Strategic Roadmap (24-month Roadmap) 2. Technical Strategic Roadmap (24-month Roadmap)
3.15.2-04 (new)	The Contractor shall integrate both Transition-In (system takeover and baselining & transformation) planning into both the Functional and Technical Strategic 24-month Roadmap deliverables.

Req #	SOW Requirement
3.15.2-05 (new)	The Contractor shall adopt and maintain all Project Artifacts that are associated with this Deliverable in the Project Artifact Inventory and manage them in accordance with the Project Artifact process.
3.15.2-06 (new)	The Contractor shall collaborate with the State to develop and maintain any new Project Artifacts necessary to support this section. New artifacts shall be added to the Project Artifacts Repository and managed in accordance with the Project Artifact process.
3.15.2-07 (new)	The Contractor shall update or develop the following appendices and attach them to the Strategic Roadmap deliverable: Appendix 1—SOW to Deliverable Traceability Checklist Description: A table that identifies the SOW requirements for this Deliverable, as specified within SOW Section 8, DELIVERABLES, and includes but is not limited to: 1. SOW Requirement ID # 2. SOW Requirement Text 3. Requirement Traceability (Define traceability of the requirements to the Deliverable) 4. Requirement Fulfillment (Define how the SOW requirements have been fulfilled by this Deliverable) Appendix 2—Deliverable Compliance and Validation Checklist Description: A QA Checklist that includes, but is not limited to: 1. Deliverable Section Number and Title 2. Deliverable Requirement Statement(s) 3. Requirement Completion (How the Contractor will comply with or has complied with the requirement statements within the plan) 4. Validation Method (The method the Contractor used to validate Deliverable compliance) 5. The Contractor's QA Manager sign-off on compliance Appendix 3—Associated Artifacts Description: An extract from the Project Artifact Inventory List of artifacts associated with this Deliverable, and will include but is not limited to the following examples: 1. Artifact Name 2. Associated Parent DEL 3. State Approver 4. SI Point of Contact 5. Review Frequency 6. Submission Frequency 7. Artifact File Format 8. Artifact Location (e.g., SharePoint breadcrumb) 9. Link to artifact

3.15.3 Strategic Planning Activities

The Contractor is responsible for developing and maintaining a strategic planning methodology for the management, execution, and reporting of associated goals and activities, as directed by the State. The CalHEERS strategic planning methodology ensures that CalHEERS major goals and objectives, for system and service modifications, are captured, planned, and communicated. As part of these activities the Contractor will take a lead role in coordinating and building system interface relationships with partners, sponsors and stakeholders to create an environment where the strategic planning methodology results in a strong sense of buy-in with all stakeholder groups.

Table 3-66: Strategic Planning Activities

Req #	SOW Requirement
3.15.3-01 (new)	The Contractor shall staff, manage, lead, and execute Strategic Planning on the CalHEERS as defined in this Statement of Work and in accordance with the CD-3.15-1 – CalHEERS Strategic Plan, as well as the Strategic Roadmap activities as defined in this Statement of Work and in accordance with the CD-3.15-2 – Strategic Roadmap.
3.15.3-02 (existing)	The Contractor shall develop, document, facilitate, and execute a CalHEERS strategic planning methodology and process that optimizes resources and keeps CalHEERS relevant over the life of the Contract with comprehensive and collaborative planning system and service modifications.
3.15.3-03 (existing)	The Contractor shall provide strategic planning in the areas of organizational change, technical/architectural decision making, and Change Management/Change Support facilitation, which includes but is not limited to: 1. Complete, accurate and current (as of the date of the build or implementation) documentation 2. Build and coordinate system interface relationships with other groups or stakeholders such as, but not limited to, federal, State, county, and insurance carrier interface partners (i.e., FedHUB, CMS, IRS, MEDS, SAWS, and Carriers) 3. Breakdown of Schedule, which at a minimum shall include the activity, Staff assigned, estimated and actual hours, and cost breakdown for each activity.
3.15.3-04 (existing)	The Contractor shall actively participate in the CalHEERS Project Strategic Planning activities, providing functional and technical expertise on behalf of the CalHEERS Application components.
3.15.3-05 (existing)	The Contractor shall participate in Strategic Roadmap activities as directed by the State Project Director or designee on behalf of CalHEERS System sponsors and stakeholders.

3.16 POLICY AND LEGISLATIVE IMPACT ANALYSIS AND CHANGE SUPPORT

State and Federal Statutory and Regulatory changes in support of the healthcare affordability options provided to consumers within the CalHEERS Application are subject to constant change. Analysis of these changes and assessment of system and project impact are a large part of ongoing project work. The Contractor's duties include working with the CalHEERS Project staff on the ongoing analysis and impact of these changes. The requirements below outline the Contractor's responsibilities as part of this process. The Contractor shall perform the legislative Impact Analysis Services described in this section.

Table 3-67: Policy and Legislative Impact Analysis and Change Support Plan (CD-3.16-1)

Req #	SOW Requirement
3.16-01 (new)	The Contractor shall staff, manage, lead and execute Policy and Legislative Impact Analysis and Change Support activities on the CalHEERS as defined in this Statement of Work and in accordance with the CD-3.16-1 – Policy and Legislative Analysis and Change Support Plan.
3.16-02 (new)	The Contractor shall only alter or modify this Deliverable's structure or content with the approval of the State Project Director or designee.
3.16-03 (new)	The Contractor shall, in partnership with the State, develop, adopt, implement and deliver CalHEERS Policy and Legislative Change Support Plan. This support, will at a minimum, define the tasks, roles, responsibility, and approach for supporting policy and legislative activities associated with maintaining CalHEERS and ensuring it is relevant including all back-office support tasks, including: • Policy Impact Analysis • Legislative Impact Analysis • Approach for monitoring/tracking Policy & Legislative Developments

Req #	SOW Requirement
3.16-04 (existing)	The Contractor shall continuously and independently determine and validate all legislative requirements necessary for the lawful operation of CalHEERS and present their analysis to the State Project Director for review.
3.16-05 (existing)	The Contractor shall assist the State in evaluating the impact and cost of implementing statutory and/or regulatory changes on behalf of the CalHEERS Project. Assessment detail must, at a minimum include but not be limited to, providing a comprehensive list of the impacted design components, known constraints, and rough order of magnitude (ROM) for cost and schedule.
3.16-06 (existing)	The Contractor shall assist the State in determining and validating impact to all CalHEERS System components due to a change in federal and/or state policy or procedure.
3.16-07 (existing)	The Contractor's Impact Assessment detail must include but not be limited to, a comprehensive list of the impacted design components, known constraints, and rough order of magnitude (ROM) for cost and schedule.
3.16-08 (existing)	The Contractor shall assist the State in evaluating the impact and cost of implementing the statutory and/or regulatory changes on behalf of the CalHEERS Project. Assessment detail must, at a minimum, provide a comprehensive list of the impacted design components, known constraints and ROM for cost and schedule.
3.16-09 (new)	The Contractor shall adopt and maintain all Project Artifacts that are associated with this Deliverable in the Project Artifact Inventory and manage them in accordance with the Project Artifact process.
3.16-10 (new)	The Contractor shall collaborate with the State to develop and maintain any new Project Artifacts necessary to support this section. New artifacts shall be added to the Project Artifacts Repository and managed in accordance with the Project Artifact process.
3.16-11 (new)	The Contractor shall update or develop the following appendices and attach them to the CalHEERS Policy and Legislative Change Support Plan deliverable: Appendix 1—SOW to Deliverable Traceability Checklist Description: A table that identifies the SOW requirements for this Deliverable, as specified within SOW Section 8, DELIVERABLES, and includes but is not limited to: 1. SOW Requirement ID # 2. SOW Requirement Text 3. Requirement Traceability (Define traceability of the requirements to the Deliverable) 4. Requirement Fulfillment (Define how the SOW requirements have been fulfilled by this Deliverable) Appendix 2—Deliverable Compliance and Validation Checklist Description: A QA Checklist that includes, but is not limited to: 1. Deliverable Section Number and Title 2. Deliverable Requirement Statement(s) 3. Requirement Completion (How the Contractor will comply with or has complied with the requirement statements within the plan) 4. Validation Method (The method the Contractor used to validate Deliverable compliance) 5. The Contractor's QA Manager sign-off on compliance Appendix 3—Associated Artifacts Description: An extract from the Project Artifact Inventory List of artifacts associated with this Deliverable, and will include but is not limited to the following examples: 1. Artifact Name 2. Associated Parent DEL 3. State Approver 4. SI Point of Contact 5. Review Frequency

Req #	SOW Requirement
	6. Submission Frequency 7. Artifact File Format 8. Artifact Location (e.g., SharePoint breadcrumb) 9. Link to artifact

3.17 AUDIT EVALUATION AND FINDINGS SERVICES

The Contractor shall, in partnership with the CalHEERS Project staff and sponsors participate in the assessment of any Audit request from oversight agencies as requested by the State Project Director or designee.

3.17.1 Audit Evaluation and Findings Validation

The Contractor shall perform services as described in this section.

Table 3-68: Audit Evaluation and Findings

Req #	SOW Requirement
3.17.1-01 (modified)	The Contractor shall provide a dedicated Audit Support Team to the State in the evaluation, and response to, of all requests for audits. The Evaluation criteria must include, both functional and data evaluation components that include, but are not limited to: 1. Assessment of audit request 2. Retrieval and analysis of requested data 3. Response recommendations for consideration
3.17.1-02 (modified)	The Contractor dedicated Audit Support Team shall assist the State in the development, review, and update of formal responses to audit requests in the format prescribed by the State.
3.17.1-03 (modified)	The Contractor dedicated Audit Support Team shall actively participate and assist auditors in conducting annual audits.
3.17.1-04 (modified)	The Contractor dedicated Audit Support Team shall work collaboratively with these auditors and provide complete and accurate information and Documentation in a timely manner.
3.17.1-05 (new)	The Contractor dedicated Audit Support Team shall provide detailed walkthroughs of audit responses and supporting data at the request of the State, Sponsors and/or Auditors.
3.17.1-06 (new)	The Contractor dedicated Audit Support Team shall communicate all audit findings to the intake point of contact for the related service area(s) of the CalHEERS Contract for assessment, mitigation/solution determination and implementation.
3.17.1-07 (new)	The Contractor dedicated Audit Support Team shall analyze and communicate audit findings that may require a process change by the CalHEERS Project Team, Sponsor related CalHEERS Program(s), code changes into the CalHEERS solution, other production code changes, or other recommendations for the State to mitigate the audit finding.

3.17.2 Audit Findings Implementation

The Contractor shall perform services as described in this section.

Table 3-69: Audit Findings Implementation

Req #	SOW Requirement
3.17.2-01 (new)	The Contractor shall assess all audit findings related to any service area of the CalHEERS Contract, determine proposed short-term mitigations and/or long-term solutions, and present to the State, Sponsors and/or Auditors for approval.

Req #	SOW Requirement
3.17.2-02 (new)	The Contractor shall implement the State approved short-term mitigation and/or long-term solution related to any audit finding within all service areas of the CalHEERS Contract, via process, system, or technical change request as directed by the State Project Director or designee.
3.17.2-03 (new)	The Contractor shall work with the State when a mitigation of an audit finding requires the implementation of a system change and may request for costs to be evaluated and approved as no cost, a project cost, or a shared cost via the State Assess Impact process, as defined in the CD-4.2-1 Change Request Process deliverable.

SOW Section 4 System Change & Enhancements REQUIREMENTS

SOW SECTION 4 – SYSTEM CHANGE & ENHANCEMENTS REQUIREMENTS

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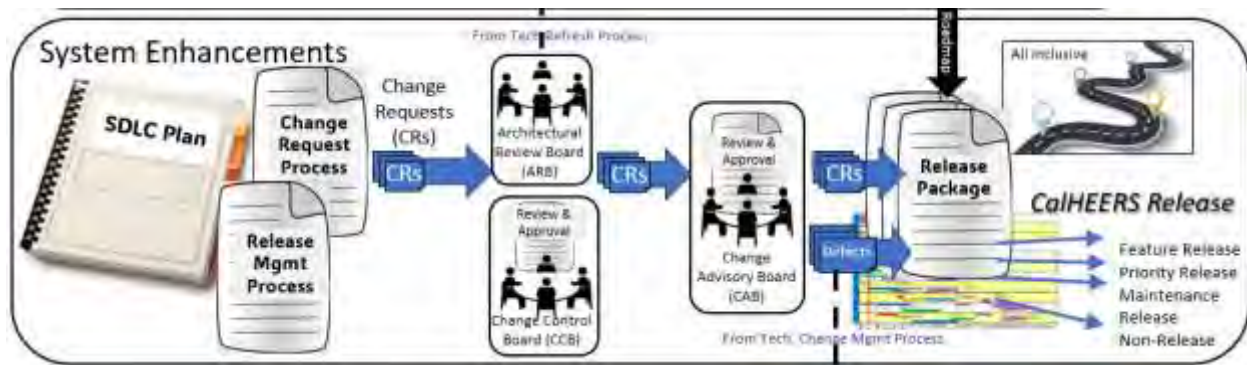
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4 SYSTEM CHANGE & ENHANCEMENTS

The purpose of System Change and Enhancements is to ensure the CalHEERS system is operating properly and is enhanced to keep the system current and relevant. The processes include the services required to perform the System/Software Development Life Cycle (SDLC) activities to update, test, implement, operate, and maintain CalHEERS and support the Affordable Healthcare Act (ACA) Programs. These processes also ensure that sufficient controls are in place to reduce system defects, minimize disruption and manage to the current Contract requirements.

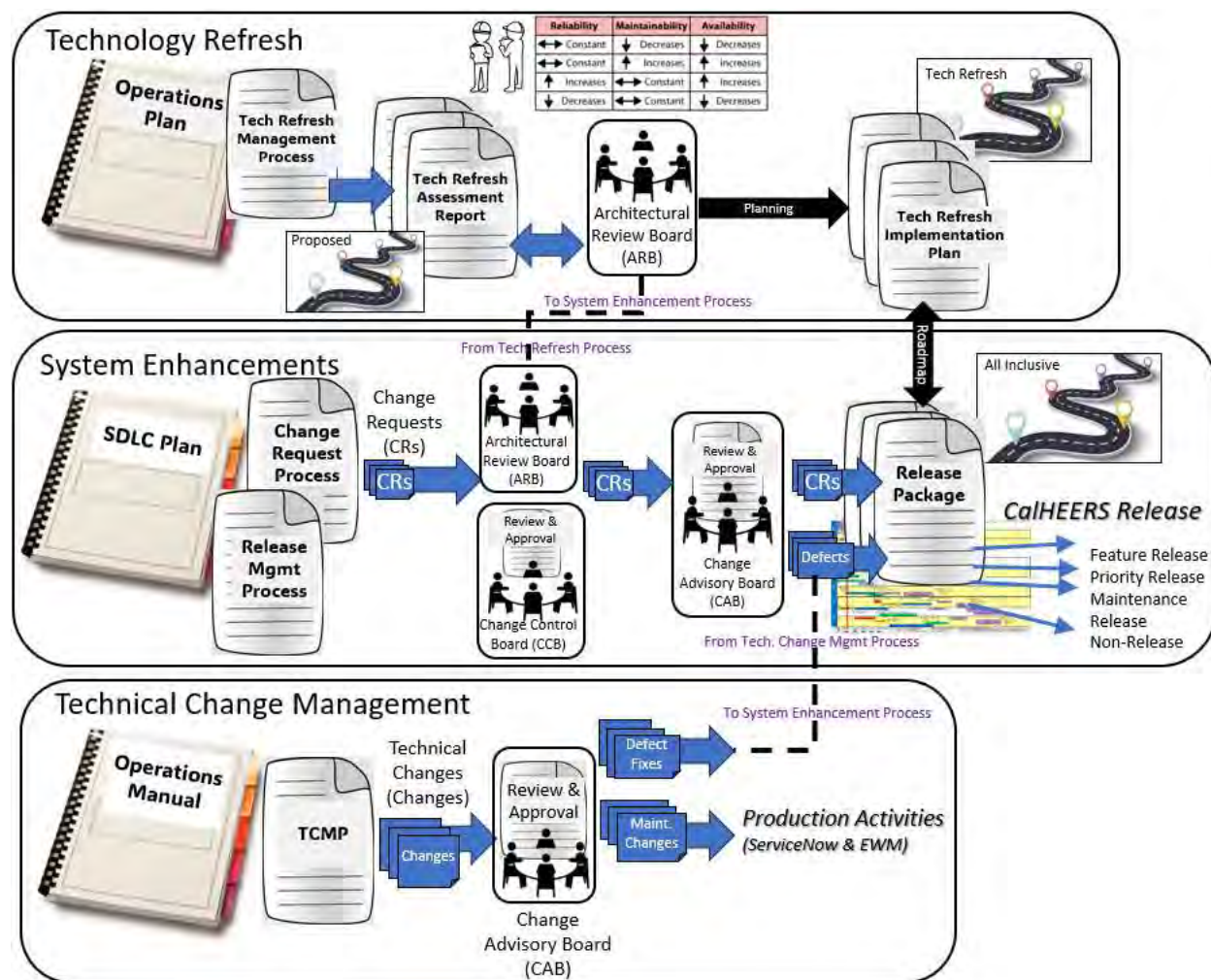
As shown in Figure 4-1 System Enhancements Flow below, system enhancements are coordinated IAW the System Development Life Cycle (SDLC) Plan along with other important processes like the Change Request Process and the Release Management Process. The CalHEERS uses Change Requests (CRs) to consider and approve fixes, updates, or enhancements to the system and relies on several governing bodies like the Architectural Review Board (ARB), Change Control Board (CCB), and the Change Advisory Board (CAB) to ensure changes are appropriate and coordinated with the highest of quality. In cooperation between the established processes and governing bodies, the CalHEERS system updated via Release Packages in precisely timed release which are planned in in repeatable cycles throughout the year.

Figure 4-1 - System Enhancements Flow



System Enhancements (while the primary change mechanism) is not the only changes that are managed by the CalHEERS team. As shown in Figure 4-2 Technology Refresh Flow below, there are two other types of changes that CalHEERS team must manage and integrate with the System Enhancements process. These processes are the Technology Refresh and Technology Change Management. Both of these processes are discussed in SOW 6 Operations.

Figure 4-2 - Technology Refresh Flow



Please note that this section of the statement of work (SOW) references multiple sets of standards, which are subject to change over time. Please refer to Appendix A-2, SPECIAL PROVISIONS, Section 7.7, UPDATES TO STANDARDS, REGULATIONS, AND CODES, regarding project processes around standard updates.

4.1 SYSTEM/SOFTWARE DEVELOPMENT LIFECYCLE (SDLC)

The SDLC processes include the services required to perform the system/software development life cycle activities to update, test, implement, operate, and maintain the CalHEERS IT Solution supporting the Covered California and DHCS healthcare affordability programs housed within the application. These processes also ensure that sufficient controls are in place to minimize disruption to our clients, sponsors, and interface partners. Focus on quality with a significant reduction in system defects, and reduction in overall cost of change will be significant factors in assessing the viability of change.

4.1.1 SDLC Plan

The SDLC Plan identifies the system development tools, techniques, and standards and how they relate to the Contractor's development team's activities. The plan provides guidelines for the software activities and states that the Contractor shall employ software engineering best

practices to accomplish the planning, design, development, implementation, maintenance and operation of the CalHEERS Application.

Table 4-1: System/Software Development Lifecycle (SDLC) Plan (CD-4.1-1)

Req #	SOW Requirement
4.1.1-01 (new)	The Contractor shall adopt, enhance, deliver, and maintain a CalHEERS System/Software Development Lifecycle (SDLC) Plan, which includes but is not limited to: 1. INTRODUCTION 1.1 Purpose 1.2 List of Reference Documents 1.3 Audience 2. SUMMARY 2.1 Scope 2.1.1 Scope for Waterfall Model 2.1.2 Scope for Agile Model 2.1.3 Scope for Hybrid/Waterfall Model 2.2 Update Frequency 2.3 SDLC Release Types 2.4 SDLC For Non-Release Based CRs 3. APPROACH 3.1 SDLC Plan Approach 3.2 SDLC Deliverables and Work Products 3.2.1 SDLC Plan Deliverable Hierarchy Diagram 3.2.2 Deliverables Associated with the SDLC Plan 3.2.3 Work Products Developed During Transition 3.2.4 SDLC SOW Requirement Owners 4. ASSUMPTIONS, CONSTRAINTS, AND RISKS 4.1 Assumptions 4.2 Constraints 4.3 Risks 5. REQUIREMENTS 6. ROLES AND RESPONSIBILITIES 7. TOOLS 8. SDLC METHODOLOGY 8.1 Overarching Change Request Process 8.2 SDLC Methodology for Traditional Waterfall Initiatives 8.2.1 Strategic Planning and Prioritization Phase 8.2.2 Methodology 8.2.3 Strategic Planning – Prioritization Process 8.2.4 Activities 8.2.5 Outcomes 8.2.6 Pre-JAD Phase 8.2.7 Impact Assessment Phase 8.2.8 Design Phase 8.2.9 Build Phase 8.2.10 Test Phase 8.2.11 Deployment and Post-Deployment Phases 8.2.12 Change Management Phase 8.3 SDLC Methodology for Agile Initiatives 8.3.1 Overall Approach for Agile Initiatives 8.3.2 Key Ceremonies/Events including Responsibilities 8.3.3 Artifacts 8.3.4 Hybrid Waterfall/Agile Models 9. GLOSSARY AND ACRONYMS 9.1 New Acronyms and Terms

Req #	SOW Requirement
	APPENDIX 1: SOW TO DELIVERABLE TRACEABILITY CHECKLIST APPENDIX 2: DELIVERABLE COMPLIANCE AND VALIDATION CHECKLIST APPENDIX 3: ASSOCIATED ARTIFACTS APPENDIX 4: ISO STANDARDS MAPPING
4.1.1-02 (new)	The Contractor shall only alter or modify this Deliverable's structure or content with the approval of the State Project Director or designee.
4.1.1-03 (modified)	The Contractor shall document and deliver for review and acceptance by the State, the Systems Development Lifecycle Methodology to be used in support of changes, including but not limited to: 1. A traditional waterfall process 2. An Agile process 3. A hybrid waterfall/agile process Note: If Human Centered Design (HCD) is utilized within any of the above SDLC types, it will be done under the fixed price per SOW Section 5.2, CONSUMER EXPERIENCE SERVICES.
4.1.1-04 (modified)	The Contractor shall clarify each required Centers for Medicare and Medicaid Services Exchange Life Cycle Model (CMS ELC) artifacts as part of the Requirements, Analysis and Design phase for any Change Request (CR) and include reference and supporting deliverables as required in all project management plans and schedules as required to remain in federal compliance.
4.1.1-05 (modified)	The Contractor shall maintain the SDLC Plan in accordance with ISO/IEC/IEEE 12207-2008 Software Life Cycle Processes (Section 5.2.2.2 – Software Specific Processes, Section 6 – System Life Cycle Processes, Section 7 – Software Specific Processes) pertaining to the Development Process and the standard for IT – Software Life Cycle Processes – Life Cycle Data, Development Process Plan. As new versions of standards are available, adoption of the new standard will be considered through the change control process and approved by the State Project Director or designee.
4.1.1-06 (modified)	The Contractor shall specify and maintain within the SDLC Plan the development process model, technical methods, development tools, techniques and standards used by the Contractor to develop the various work products and plans for maintaining the Contractor's infrastructure for change request development and testing. Additionally, the Contractor will identify how these methods, tools, and standards related to the Contractor's development team's activities.
4.1.1-07 (new)	The Contractor shall include the following SDLC Plan process costs as part of Maintenance & Operations (M&O) services: • Annual Prioritization • Monthly Prioritization • Ad-Hoc Prioritization
4.1.1-08 (new)	The Contractor shall, in collaboration with the State, update the SDLC Plan to define the Architectural Review Board (ARB), describe the ARB process, and identify how the ARB process fits within the SDLC on CalHEERS.
4.1.1-09 (new)	The Contractor shall adopt and maintain all Project Artifacts that are associated with this Deliverable in the Project Artifact Inventory and manage them in accordance with the Project Artifact process.
4.1.1-10 (new)	The Contractor shall update or develop the following appendices and attach them to the System/Software Development Lifecycle (SDLC) Plan: Appendix 1–SOW to Deliverable Traceability Checklist Description: A table where the Contractor identifies the SOW requirements for this Deliverable, as specified within SOW Section 8, DELIVERABLES, and includes but is not limited to: 1. SOW Requirement ID #

Req #	SOW Requirement
	- SOW Requirement Text - Requirement Traceability (Contractor identified traceability from the requirements to the Deliverable) - Requirement Fulfillment (Define how the Contractor has fulfilled the SOW requirements in the Deliverable) Appendix 2—Deliverable Compliance and Validation Checklist Description: A QA Checklist that includes, but is not limited to: - Deliverable Section Number and Title - Deliverable Requirement Statement(s) - Requirement Completion (How the Contractor has complied with or will comply with the requirement statements within the Deliverable) - Validation Method (The method the Contractor used to validate Deliverable compliance) - The Contractor's QA Manager sign-off on compliance Appendix 3—Associated Artifacts Description: An extract from the Project Artifact Inventory List of artifacts associated with this Deliverable, and will include but is not limited to the following examples: - Artifact Name - Associated Parent DEL - State Approver - SI Point of Contact - Review Frequency - Submission Frequency - Artifact File Format - Artifact Location (e.g., SharePoint breadcrumb) - Link to artifact

4.1.2 System/Software Development Lifecycle Execution

Table 4-2: System/Software Development Lifecycle Execution

Req #	SOW Requirement
4.1.2-01 (new)	The Contractor shall staff, manage, lead and execute the System/Software Development Lifecycle on the CalHEERS as defined in this Statement of Work and in accordance with the CD-4.1-1 – SDLC Plan.
4.1.2-02 (new)	The Contractor shall collaborate with the State to develop and maintain any new Project Artifacts necessary to support this section. New artifacts shall be added to the Project Artifacts Repository and managed in accordance with the Project Artifact process.
4.1.2-03 (existing)	The Contractor shall adhere to the technical processes outlined in the SDLC Plan to plan, develop, and implement State authorized enhancements.

4.1.3 System Technical Design Documents

Table 4-3: System Technical Design Documents (CD-4.1-2)

Req #	SOW Requirement
4.1.3-01 (modified)	The Contractor shall adopt, enhance and maintain the System Technical Design Documents, which is comprised of the following design documents by system component, including but not limited to: - Portal - Eligibility - Interfaces

Req #	SOW Requirement
	4. Enrollment 5. Notices 6. Security 7. Reporting 8. FPACT
4.1.3-02 (modified)	Per the deliverable management and CR Process, the Contractor shall adopt, enhance and maintain all system batch descriptions within the System Technical Design Documents Deliverable.
4.1.3-03 (modified)	The Contractor shall update in the System Technical Design Documents deliverable, interface design details which include but not limited to: 1. COTS Based Approach to Interfaces a. Supporting Documents: 2. Interface Communications Classifications by Interface 3. Partner or between program components 4. CalHEERS Interface List 5. Interface Process Narrative 6. Interface Identification and Diagrams a. External Interfaces: i. Real-Time ii. Batch iii. External Interfaces Listing 7. Updates resulting from Technology Refresh
4.1.3-04 (modified)	The Contractor shall identify the interface design for each external interface in the System Technical Design Documents including the interface partner, interface method, connectivity, data elements, frequency, format, and media.
4.1.3-05 (modified)	The Contractor shall provide information in the System Technical Design Documents that supports the identification, creation and utilization of all incoming and outgoing interface files and Application Program Interface calls.
4.1.3-06 (modified)	The Contractor shall provide in the System Technical Design Documents the detailed documentation for all external interfaces to include the utilization for component integration, external or internal communication, and associated data exchange requirements and dependencies.
4.1.3-07 (modified)	The Contractor shall provide an interface design in the System Technical Design Documents for external interfaces, that includes but is not limited to: 1. Documenting the CalHEERS fulfillment of each interface's requirements. 2. Description of the CalHEERS System components for implementing and maintaining an interface design that is traceable to system, data, and application requirements. 3. Consistent, unambiguous design description, including API, WSDL, Schema, XSD, file layouts, and associated communication protocols.
4.1.3-08 (modified)	The Contractor shall maintain the System Technical Design Documents in accordance with ISO/IEC/IEEE 12207 – 2008 Systems and Software Engineering – Software Life Cycle Process (Section 7-Software Specific Processes) and ISO/IEC/IEEE 16326-2009 Systems and Software Engineering – Life Cycle Processes – Project Management (Section 5.8.5.1 – Documentation). As new versions of standards are available, adoption of the new standard will be considered through the change control process and approved by the State Project Director or designee.
4.1.3-09 (modified)	The Contractor shall maintain the Interface Control Document (ICD), all Interface Design Documents (IDD), and all Business Services Definitions (BSD) as required per the CR Process.
4.1.3-10 (new)	The Contractor shall adopt and maintain all Project Artifacts that are associated with this Deliverable in the Project Artifact Inventory and manage them in accordance with the Project Artifact process.
4.1.3-11 (new)	The Contractor shall update or develop the following appendices and attach them to the System Technical Design deliverable:

Req #	SOW Requirement
	Appendix 1—SOW to Deliverable Traceability Checklist Description: A table that identifies the SOW requirements for this Deliverable, as specified within SOW Section 8, DELIVERABLES, and includes but is not limited to: 1. SOW Requirement ID # 2. SOW Requirement Text 3. Requirement Traceability (Define traceability of the requirements to the Deliverable) 4. Requirement Fulfillment (Define how the SOW requirements have been fulfilled by this Deliverable) Appendix 2—Deliverable Compliance and Validation Checklist Description: A QA Checklist that includes, but is not limited to: 1. Deliverable Section Number and Title 2. Deliverable Requirement Statement(s) 3. Requirement Completion (How the Contractor will comply with or has complied with the requirement statements within the plan) 4. Validation Method (The method the Contractor used to validate Deliverable compliance) 5. The Contractor's QA Manager sign-off on compliance Appendix 3—Associated Artifacts Description: An extract from the Project Artifact Inventory List of artifacts associated with this Deliverable, and will include but is not limited to the following examples: 1. Artifact Name 2. Associated Parent DEL 3. State Approver 4. SI Point of Contact 5. Review Frequency 6. Submission Frequency 7. Artifact File Format 8. Artifact Location (e.g., SharePoint breadcrumb) 9. Link to artifact

4.1.4 System Technical Design Execution

Table 4-4: System Technical Design Execution

Req #	SOW Requirement
4.1.4-01 (new)	The Contractor shall staff, manage, lead and execute the System Technical Design on CalHEERS as defined in this Statement of Work and in accordance with the System Technical Design Documents.
4.1.4-02 (existing)	The Contractor shall ensure that all data and data formats provided through interfaces meets the standards established by the interface organization.
4.1.4-03 (new)	The Contractor shall collaborate with the State to develop and maintain any new Project Artifacts necessary to support this section. New artifacts shall be added to the Project Artifacts Repository and managed in accordance with the Project Artifact process.

4.1.5 System Functional Design Documents

Table 4-5: System Functional Design Documents (CD-4.1-3)

Req #	SOW Requirement
4.1.5-01 (modified)	The Contractor shall maintain the System Functional Design Documents Deliverable, which is comprised of the following design documents by system component, including but not limited to: 1. Portal 2. Eligibility 3. Interfaces 4. Enrollment 5. Notices 6. Security 7. Reporting 8. FPACT
4.1.5-02 (modified)	The Contractor shall adopt, enhance and maintain all system business rule designs required to support the eligibility determination functionality of the CalHEERS application within the System Functional Design Documents Deliverables.
4.1.5-03 (new)	The State identifies and associates the following artifacts to the Schedule Management Plan. The Contractor shall adopt, update, maintain, and deliver these artifacts in accordance with Appendix 3 of this deliverable including, but not limited to: • Joint Application Design Guidelines
4.1.5-04 (new)	The Contractor shall update or develop the following appendices and attach them to the System Functional Design deliverable: Appendix 1—SOW to Deliverable Traceability Checklist Description: A table that identifies the SOW requirements for this Deliverable, as specified within SOW Section 8, DELIVERABLES, and includes but is not limited to: 1. SOW Requirement ID # 2. SOW Requirement Text 3. Requirement Traceability (Define traceability of the requirements to the Deliverable) 4. Requirement Fulfillment (Define how the SOW requirements have been fulfilled by this Deliverable) Appendix 2—Deliverable Compliance and Validation Checklist Description: A QA Checklist that includes, but is not limited to: 1. Deliverable Section Number and Title 2. Deliverable Requirement Statement(s) 3. Requirement Completion (How the Contractor will comply with or has complied with the requirement statements within the plan) 4. Validation Method (The method the Contractor used to validate Deliverable compliance) 5. The Contractor's QA Manager sign-off on compliance Appendix 3—Associated Artifacts Description: An extract from the Project Artifact Inventory List of artifacts associated with this Deliverable, and will include but is not limited to the following examples: 1. Artifact Name 2. Associated Parent DEL 3. State Approver 4. SI Point of Contact 5. Review Frequency 6. Submission Frequency 7. Artifact File Format 8. Artifact Location (e.g., SharePoint breadcrumb)

Req #	SOW Requirement
	9. Link to artifact

4.1.6 System Functional Design Execution

Table 4-6: System Functional Design Execution

Req #	SOW Requirement
4.1.6-01 (new)	The Contractor shall staff, manage, lead and execute the System Functional Design on CalHEERS as defined in this Statement of Work and in accordance with the System Functional Design Documents.
4.1.6-02 (existing)	The Contractor shall ensure that all data and data formats provided through interfaces meets the standards established by the interface organization.
4.1.6-03 (new)	The contractor shall maintain and enhance the CalHEERS system to support translations required by DHCS and CCA, or as directed by the State Project Director or Designee.
4.1.6-04 (new)	The Contractor shall collaborate with the State to develop and maintain any new Project Artifacts necessary to support this section. New artifacts shall be added to the Project Artifacts Repository and managed in accordance with the Project Artifact process.

4.2 CHANGE MANAGEMENT AND CONFIGURATION MANAGEMENT (SYSTEM)

This section pertains to managing changes to the CalHEERS system (not to be confused with the management of Contract Changes), see SOW 3.11, CONTRACT MANAGEMENT.

4.2.1 Change Request Process

The Change Request Process identifies the approved methodology to enhance the CalHEERS System. The Change Request Process incorporates the various processes used to manage change on the CalHEERS Project.

Table 4-7: Change Request Process (CD-4.2-1)

Req #	SOW Requirement
4.2.1-01 (modified)	The Contractor shall adopt, enhance, deliver, and maintain the CalHEERS Change Request Process deliverable, which includes but is not limited to: 1. INTRODUCTION 1.1 Purpose 1.2 List of Reference Documents 1.3 Audience 2. SUMMARY 2.1 Scope 2.2 Out-Of-Scope 2.3 Update Frequency 3. APPROACH 3.1 Approach to the CR Process 3.1.1 Waterfall Model 3.1.2 Agile Model 3.1.3 Agile-Hybrid Model 4. ASSUMPTIONS, CONSTRAINTS AND RISKS 4.1 Assumptions 4.2 Constraints 4.3 Risks 5. REQUIREMENTS 6. ROLES AND RESPONSIBILITIES

Req #	SOW Requirement
	6.1 Contractor Roles and Responsibilities 6.2 State Roles and Responsibilities 6.3 Sponsor and Stakeholder Roles and Responsibilities 7. TOOLS 8. OVERVIEW OF SDLC CR PROCESS 8.1 CR Intake and Prioritization 8.1.1 Initiate Change Request (ICR) Process 8.1.2 Strategic Planning and Prioritization Process 8.2 Types of CRs 8.3 Exceptions to the CR Process 8.3.1 App Maintenance CRs 8.3.3 Data Warehouse CRs 8.3.4 Feature Release-Level CRs 8.3.5 Expedited CR Process 8.3.6 Late Entry CRs 8.3.7 Service Center CRs with no Infrastructure impacts 8.4 Multiple Milestones 8.5 Cost Summary Amendment 8.6 Request to discontinue a CR (Impact Assessment not approved) 8.7 Stop Work Order and Terminate Work Order Process 9. CR PROCESS FOR TRADITIONAL WATERFALL INITIATIVES 9.1 Discovery & Pre-JAD Phase 9.1.1 Discovery Process 9.1.2 Pre-JAD Process Flow 9.1.3 Pre-JAD Detailed Process Guidelines 9.2 Impact Assessment Phase 9.2.1 Impact Assessment Process Flow 9.2.2 Impact Assessment Detailed Process Guidelines 9.2.3 Impact Assessment Expedite and Extension Process 9.3 Design Phase 9.3.1 Design Process Flow 9.3.2 Design Detailed Process Guidelines 9.4 Build Phase 9.4.1 Build Process Flow 9.4.2 Build Detailed Process Guidelines 9.5 Test Phase 9.5.1 Test Process Flow 9.5.2 Test Detailed Process Guidelines 9.6 Deployment Phase 9.6.1 Deployment Process Flow 9.6.2 Deployment Detailed Process Guidelines 9.7 Post-Deployment Phase 9.7.1 Post-Deployment Process Flow 9.7.2 Post-Deployment Detailed Process Guidelines 9.8 Change Management Phase 9.8.1 Business Change Management 9.8.2 Organization Change Management 9.8.3 Change Readiness 9.8.4 OCM Readiness 9.8.5 OCM Training 10. CR PROCESS FOR AGILE INITIATIVES 10.1 CR Creation 10.1.1 CR Creation Process Flow 10.1.2 CR Creation Detailed Process Guidelines 10.2 Discovery Phase 10.2.1 Discovery Process Flow

Req #	SOW Requirement
	10.2.2 Discovery Detailed Process Guidelines 10.3 Implementation Phase 10.3.1 Implementation Process Flow 10.3.2 Implementation Detailed Process Guidelines 11. COST ESTIMATION FOR THE CR PROCESS 11.1 Overview 11.2 CR Cost BOE and CR Cost Reconciliation 12. GLOSSARY AND ACRONYMS 12.1 New Acronyms and Terms APPENDIX 1: SOW TO DELIVERABLE TRACEABILITY CHECKLIST APPENDIX 2: DELIVERABLE COMPLIANCE AND VALIDATION CHECKLIST APPENDIX 3: ASSOCIATED ARTIFACTS APPENDIX 4: STANDARDS MAPPING
4.2.1-02 (new)	The Contractor shall only alter or modify this Deliverable's structure or content with the approval of the State Project Director or designee.
4.2.1-03 (modified)	The Contractor shall update the CR Process DEL to identify how the Change Request Process will remain compliant with ISO/IEC/IEEE 29148-2011 Systems and Software Engineering – Life Cycle Processes – Requirements Engineering, First Edition 2011-12-01 (Section 8.4. – Software Requirements Specification Document). As new versions of standards are available, adoption of the new standard will be considered through the change control process and approved by the State Project Director or designee (see also guidance in Special Provisions)
4.2.1-04 (modified)	The Contractor shall update the CR Process DEL to incorporate the term "Outcome Realization". Outcome realization shall be the mechanisms added to the existing CR process to aid the State in assess the business or technical value of a desired/executed change for the cost incurred to achieve the outcome. The Outcome Realization process shall originate with the creation of a CR, or approved requirement(s) within a CR (prior to implementation), and extend through design, implementation and rollout- with tracking and reporting to validate and quantifiably determine exactly if and how a change resulted in a benefit(s) for the actual cost incurred to achieve the benefit. Outcome Realization reporting (using costs and benefits) shall be collected and tracked for a period of at least 5 years following production release of a change.
4.2.1-05 (new)	The Contractor shall update the CR Process DEL, in coordination with the State, to include instructions for the use of EWM for workflow tracking and streamlining of the CR Intake and Prioritization.
4.2.1-06 (new)	The Contractor shall update the CR Process DEL, in coordination with the State to add and/or expand on the following specific types of CRs in addition to delineating how costs are identified and paid out to increase cost transparency, reduce the chance of double-dipping, and clarify how billing and overhead costs are accounted for. Some of the additions include but are not limited to: • Time and Material (T&M) CRs • Fixed Cost CRs • Special Large-scale Project CRs (e.g., PCAP, FPACT, IDP & Drools)
4.2.1-07 (new)	The Contractor shall update the CR Process DEL, to strengthen and include additional guardrails, entry/exit criteria, and conditions to monitor expenditures that reduce lack of State cost transparency, accountability of specific work performed for the work being paid.
4.2.1-08 (new)	The Contractor shall update the CR Process DEL, in coordination with the State, to define working at risk, identifying within the SDLC process where there may be a need to work at risk, and if a request for stop work, any work completed at risk will not be paid unless specifically approved by the State Project Director or designee.
4.2.1-09 (new)	The Contractor shall update the CR Process DEL, integrating with updates being incorporated into the DEL CD-3.3-1 Cost Management Plan. Updates shall be done in coordination with the State to add a new section(s) which identify how CR costs are tracked from beginning to end, and the method used to improve cost estimations for system changes, and to establish a means to reconcile costs at the end of the CR

Req #	SOW Requirement
	lifecycle. Refer to the DEL CD-4.2-2 CR Basis of Estimate (BOE) Deliverable that will be moved into this new section to include topics such as but not limited to: • CR Basis of Estimate (BOE) • T-shirt size • Total Cost of Ownership (TCO) (replacing the Rough Order of Magnitude (ROM)) • Cost Summary • Workplan PDF • Level of Effort (LOE) • True-Up Process • True-Up Report • CR Level Summary • Release Level Summary • Outcome Realization (as applicable) • Integration with the Cost Tracking Tool (See SOW Section 3.3)
4.2.1-10 (new)	The Contractor shall collaborate with the State to update the True-Up Process outlined in the CR Process DEL CD-4.2-1 to ensure the following conditions are satisfied, including but not limited to: • Memorializing not-to-exceed/condition in a measurable fashion that is documented and communicated to all relevant parties. • Transparency conditions for review of CR estimates versus actuals so that “true up” calculations are accurate. • Identification of the formula, calculated at the CR level, that defines when the State is owed a credit (e.g., If a CR’s actuals are less than 90% of the approved estimate).
4.2.1-11 (new)	The Contractor shall update the CR Process DEL, in coordination with the State, to include an outline of all test phases and test sub-phases (e.g., code drop, testing (within system test), full end-to-end system test, regression test, and automation testing), as well as identify the testing coverage within each sub-phase.
4.2.1-12 (new)	The Contractor shall update the CR Process DEL, in coordination with the State, to include greater granularity in cost breakouts for effort such as but not limited to the following examples: • In the Cost Summary (provided per CR) on the CR Summary tab, multiple efforts are being grouped together under a single category, e.g., “Development,” including coding, testing, etc., and therefore being billed at incorrect rates. • Provide true traceability from hours charged on a given rate card to the individual Contractor staff member working on the item. • Consider, the identification and use of percentages (standardized pricing) in the Cost Summary template. • Clear definition and tracking of effort (planned and actual) for Pre-Joint Application Design (Pre-JAD) meetings, ~~State involved meetings, and any SI only meetings.~~ • The process for reducing the M&O Monthly payment associated to processes where the State pays the SI to automate, which reduces the overall process costs.
4.2.1-13 (new)	The Contractor shall create a new section within the CR Process DEL, in coordination with the State, of this DEL, for the Discovery Phase; identify the process for estimating all Discovery efforts (internal to the Contractor or with State participation), obtaining State approval prior to commencing those efforts, an amended process (if needed), tracking actuals throughout the Discovery process, and reporting the total actual labor and cost in the CR Cost Summary.
4.2.1-14 (new)	The Contractor shall collaborate with CalHEERS Project staff and its Sponsors to review/refine the exit criteria for closing out the Discovery Phase of a CR, and update the CR Process DEL, in coordination with the State, of the Change Request Process deliverable to reflect the State approved updates.
4.2.1-15 (new)	The Contractor shall update the CR Process DEL, in coordination with the State, of this DEL to identify the process used by the Contractor for estimating all Pre-JAD efforts

Req #	SOW Requirement
	(internal to the contractor or with State participation), populating them in the Pre-JAD & JAD Tracker, obtaining State approval prior to commencing those efforts, an amended process (if needed), tracking actuals throughout the Pre-JAD process (via the tracker), and reporting the total actual labor and cost in the CR Cost Summary.
4.2.1-16 (new)	The Contractor shall update the CR Process DEL, in coordination with the State, adding a subsection that lists and defines the State approved activities that are permitted to be included in an Application Maintenance CR.
4.2.1-17 (new)	The Contractor shall update the CR Process DEL, in coordination with the State, adding a subsection that defines Service Center CRs, with no infrastructure impacts, as exceptions to the CR process and describes the process they will follow to implementation.
4.2.1-18 (new)	The Contractor shall update the CR Process DEL, in coordination with the State, to replace the Rough Order of Magnitude (ROM) estimation methodology with the Total Cost of Ownership (TCO) methodology. The TCO estimates shall provide all the details around initial development plus identify 5 years of annualized maintenance and operations costs, if applicable.
4.2.1-19 (new)	The Contractor shall, in collaboration with the State, update the CR Process DEL to define, including diagrams, the interaction the Architectural Review Board (ARB) has with the CalHEERS change request processes.
4.2.1-20 (new)	The Contractor shall, in collaboration with the State, update the CR Process DEL to convey, including diagrams, how Technical Change Requests (TCRs), as defined in the Technical Change Management Plan, interact with the change request process.
4.2.1-21 (new)	The State identifies and associates the following artifacts to the Change Request Process. The Contractor shall adopt, update, maintain, and deliver these artifacts in accordance with Appendix 3 of this deliverable including, but not limited to: • Amending a CR Guide • Amendment Process Flow • CalHEERS CR Intake Form - Roles and Responsibilities • CalHEERS CR Intake Form.pdf • CalHEERS Impact Assessment Process and Checklist • Change Control Board (CCB) Process • Change Evaluation (CET) Process • Change Request (CR) Process • CR Budget Process Flow • CR Milestone-Schedule Escalation Approach • CR Process and RTC Guide • CR Process Flow • CR XXXXX - Implementation Complete Checklist • CR XXXXX - Supporting Document - Requirement Detail • CR XXXXX - Supporting Document - User Stories • CR_Intake_Flow • DCR Process Flow • EWM Data Dictionary • Implementation Complete Checklist • Initiate Change Request (ICR) Process • Joint Application Design Guidelines • Master CR Processes Visios • Ongoing Prioritization Process Guide • Outcome Realization Process Guide • PowerPoint_CalHEERS CR Intake • Process Guide for changing RTC Status to CET Review • SOP - CR Actuals • Stop Work Order Process • Text Update Process Flow (TURF Request)

Req #	SOW Requirement
4.2.1-22 (new)	The Contractor shall adopt and maintain all Project Artifacts that are associated with this Deliverable in the Project Artifact Inventory and manage them in accordance with the Project Artifact process.
4.2.1-23 (new)	The Contractor shall update or develop the following appendices and attach them to the Change Request Process deliverable: Appendix 1—SOW to Deliverable Traceability Checklist Description: A table where the Contractor identifies the SOW requirements for this Deliverable, as specified within SOW Section 8, DELIVERABLES, and includes but is not limited to: 1. SOW Requirement ID # 2. SOW Requirement Text 3. Requirement Traceability (Contractor identified traceability from the requirements to the Deliverable) 4. Requirement Fulfillment (Define how the Contractor has fulfilled the SOW requirements in the Deliverable) 5. Appendix 2—Deliverable Compliance and Validation Checklist Description: A QA Checklist that includes, but is not limited to: 6. Deliverable Section Number and Title 7. Deliverable Requirement Statement(s) 8. Requirement Completion (How the Contractor has comply with or will comply with the requirement statements within the Deliverable) 9. Validation Method (The method the Contractor used to validate Deliverable compliance) 10. The Contractor's QA Manager sign-off on compliance Appendix 2—Deliverable Compliance and Validation Checklist Description: A QA Checklist that includes, but is not limited to: 1. Deliverable Section Number and Title 2. Deliverable Requirement Statement(s) 3. Requirement Completion (How the Contractor will comply with or has complied with the requirement statements within the plan) 4. Validation Method (The method the Contractor used to validate Deliverable compliance) 5. The Contractor's QA Manager sign-off on compliance Appendix 3—Associated Artifacts Description: An extract from the Project Artifact Inventory List of artifacts associated with this Deliverable, and will include but is not limited to the following examples: 1. Artifact Name 2. Associated Parent DEL 3. State Approver 4. SI Point of Contact 5. Review Frequency 6. Submission Frequency 7. Artifact File Format 8. Artifact Location (e.g., SharePoint breadcrumb) 9. Link to artifact

4.2.2 Change Request Process Execution

Table 4-8: Change Request Process Execution

Req #	SOW Requirement
4.2.2-01 (new)	The Contractor shall staff, manage, lead, and execute the change request process on the CalHEERS as defined in this Statement of Work and in accordance with the CD-4.2-1 – Change Request Process.
4.2.2-02 (existing)	The Contractor shall implement and control modifications to the system's design, hardware, firmware, and software using change management and configuration management processes.
4.2.2-03 (existing)	The Contractor shall be responsible for the structure, planning, development, and implementation of all Change Requests.
4.2.2-04 (existing)	The Contractor shall provide, for all Change Requests, information that includes but is not limited to the following: 1. List and description of State approved business requirements 2. A feasible solution to fulfill the approved requirements 3. Description of how solution satisfies the State's approved business requirements 4. Description of training approach and impacts 5. Description of implementation approach and impacts 6. System components that are traceable to the system requirements 7. A consistent, unambiguous technical design description 8. Demonstrate that the CalHEERS System shall result in efficient and cost-effective operations and maintenance, as determined by the State Project Director or designee 9. Optimize software releases to bundle CRs to minimize costs to the State
4.2.2-05 (existing)	The Contractor shall provide a version of all CR documents prior to implementation that include complete information regarding the change. Additional information includes, but is not limited to, the creation of new requirements and Configuration Item (CI) numbers and changes uncovered in the development and testing phase. The Contractor shall provide this CR version in support of a complete audit trail of design decisions and modifications.
4.2.2-06 (new)	The Contractor shall submit the following documentation at the entrance into State Assess Impact (SAI): 1. Cost Summary, identifying the Total Discovery/Pre-JAD Actuals, including a breakout of hours by role. 2. Workplan, in both a Microsoft Project (.mpp) and PDF format.
4.2.2-07 (new)	The Contractor shall, upon request of the State Project Director or designee, provide a dedicated project manager for special large scale CR-related projects (typically where size, scope, and/or complexity dictates the need), e.g., Tech Refresh, PCAP, FPACT.
4.2.2-08 (new)	The Contractor shall, upon request of the State Project Director or designee, provide outcome realization support and reporting as defined by the State Project Director or designee.
4.2.2-09 (new)	The Contractor shall record all required outcomes as defined by the State and partners and assist State in clearly defining key performance indicators and related milestones and payments tied to them. All related outcome realization activities, including reporting and support, are to be tracked and included in reported CR hours for transparency of efforts, but are not to be included in the total cost of the CR as they are part of fixed price cost.
4.2.2-10 (new)	The Contractor shall provide a Pre-JAD, JAD, & Discovery Tracker that documents all Pre-JAD & JAD meetings and effort (both planned/historical) for State analysis and review.
4.2.2-11 (new)	At the time of any CR submission to the State, the Contractor shall: 1. Identify whether there are proposed modifications to existing M&O services that the State will be expected to fund on an ongoing basis. 2. When modifications to existing M&O services become necessary, the Contractor shall identify how those M&O services will be provided and submit a cost workbook that details the increase to M&O scope and effort (e.g., labor hours). 3. Provide, at a minimum, baseline data to support and justify the increases.

Req #	SOW Requirement
4.2.2-12 (new)	The Contractor shall execute the Discovery support process as detailed in Waterfall Methodology, and as documented in the CR Process DEL.
4.2.2-13 (new)	The Contractor shall execute the Pre-JAD process as detailed in Waterfall Methodology, and as documented in the CR Process DEL.
4.2.2-14 (new)	The Contractor shall work in collaboration with the State to monitor and track differences between estimated and actual labor/costs (for Discovery and Pre-JAD support) in order to improve the processes that diminishes the likelihood of excessive hours/costs and large planned/actual variances.
4.2.2-15 (new)	The Contractor shall collaborate with the State to develop and maintain any new Project Artifacts necessary to support this section. New artifacts shall be added to the Project Artifacts Repository and managed in accordance with the Project Artifact process.
4.2.2-16 (new)	The Contractor shall, following the implementation of a CR, provide the CR costs to both Contractor and State Cost Management Teams, for incorporation into the Cost Tracking Tool and in accordance with the Cost Management processes defined by the Cost management Plan DEL. This information will be used for consideration in budget re-baselining.

4.2.3 System Change Cost Estimating & CR Basis of Estimate (BOE)

The CR Basis of Estimate (BOE) describes the Contractor's Change Request estimating methods used to develop fair and reasonable effort estimates for a release's scope of change, as outlined in each CR approved by the State. The process for developing and implementing these requirements will be described in the CR Basis of Estimate (BOE) Deliverable.

Table 4-9: CR Basis of Estimate (BOE) Deliverable (CD-4.2-2)

Req #	SOW Requirement
4.2.3-01 (existing)	The Contractor shall develop and use a detailed, specific, and transparent cost estimation methodology to develop costs/services billed to the State by the Contractor or the Contractor's Subcontractors to be included as part of the COST MANAGEMENT PLAN in SOW 3, Section 3.3.1.
4.2.3-02 (new)	The Contractor shall only alter or modify this Deliverable's structure or content with the approval of the State Project Director or designee.
4.2.3-03 (existing)	The Contractor shall include and use two or more estimation approaches (e.g., top down, bottom up, parametric) in their methodology to refine estimates.
4.2.3-04 (modified)	The Contractor shall describe the following within their estimate for each Change Request: 1. Estimated Key Staff effort, which is at no cost. Key Staff effort is paid under the SDMO Fixed Price Cost. The names of the Key Staff must be provided. 2. Estimated Applicable support staff effort, which is at no cost. Support staff effort is paid under the SDMO Fixed Price Cost. The names of the support staff must be provided. 3. Estimated Non-Key (System Change) Staff effort, which will reflect the hourly maximum rate as outlined under System Changes Costs. The names of the Non-Key (System Change) Staff must be provided with the cross-referenced role identified in the CD-3.4-1 Staff Matrix. 4. Estimated Hardware and Software costs, including all ongoing costs 5. Estimated Subcontractor support 6. Outcome Realization (Incorporating TCO) as defined with Sponsors' input The State may at its sole discretion approve Key Staff (at no additional cost) or individuals who provide support staff roles to work in a Non-Key Staff role on a change request if that individual meets the qualifications for the Non-Key Staff role.

Req #	SOW Requirement
4.2.3-05 (new)	The Contractor shall update the CR Basis of Estimate DEL, in coordination with the State, to replace the Rough Order of Magnitude (ROM) estimation methodology, with the Total Cost of Ownership (TCO) methodology. The TCO estimates shall provide all the details around initial development plus identify 5 years of annualized maintenance and operations costs.
4.2.3-06 (modified)	The Contractor shall, in accordance with the California Department of Technology Agency, Information Technology Project Oversight Framework, SIMM Section 45 (https://cdt.ca.gov/), use a formal software size estimation method where custom software development or Commercial off the Shelf (COTS) modifications are a significant component of the cost. Refer to Appendix A-2, SPECIAL PROVISIONS, Section 7.7, UPDATES TO STANDARDS, REGULATIONS, AND CODES.
4.2.3-07 (existing)	The Contractor shall provide one of more cost estimation tools/models that can account for either “Waterfall/Hybrid SDLC” or “Agile” CR implementations. The costing tool(s) or model(s) shall be fully accessible and available to the staff designated by the State for cost reporting and analysis. The models shall include / accommodate alternative Fixed Capacity and Timeline / Variable Scope type of structures that may be proposed by the Contractor for Agile SDLC approaches. Specific features of the tool shall include: • The cost estimation tool shall provide both estimations and actual costs (commensurate to planned estimations) available to the State (for third-party validation) • The Contractor shall operationalize self-help reporting capability, so the State can inquire on the actual versus planned labor usage /cost on any given CR (throughout the entire lifecycle of the CR), whenever it needs it. • The Contractor shall coordinate periodic reviews by a third-party entity to allow for the State to provide input with adjusting of the estimation model as lessons learned
4.2.3-08 (new)	The Contractor shall develop, deliver, and maintain a CR Basis of Estimate (BOE), which must include: • A description of the rational for estimating scope, effort (onshore and offshore breakout), • Cost for the activities and tasks defined within the Cost Worksheets, • Software Release work plans developed by the Contractor
4.2.3-09 (new)	The Contractor shall develop and maintain the CR Basis of Estimate in accordance with the State approved version (Refer to Appendix A-2, SPECIAL PROVISIONS, Section 7.7, UPDATES TO STANDARDS, REGULATIONS, AND CODES) of the Project Management Institute (PMI ®), A Guide to the Project Management Body of Knowledge (PMBOK ® Guide), Estimate Costs section.
4.2.3-10 (new)	The Contractor shall develop and maintain the CR Basis of Estimate to include a minimum of two approaches to estimation, such as those described in the State identified version of the Project Management Institute (PMI ®), <i>A Guide to the Project Management Body of Knowledge (PMBOK ® Guide)</i> . The Contractor shall use the Analogous Method as one of the methods.
4.2.3-11 (new)	The Contractor shall develop and maintain a historical project estimation database that supports the Analogous Method of estimation.
4.2.3-12 (new)	The Contractor shall provide the State with access to the Contractor’s historical project estimation database, related data and analytical reports.
4.2.3-13 (new)	The Contractor shall submit the Basis of Estimate to the State Project Director or designee in accordance with the approved Transition Plan, as part of every change request and release, or as requested by the State Project Director or designee.
4.2.3-14 (new)	The Contractor shall factor in the State’s resource capacity model during prioritization and release planning, working with the State and Sponsor to understand and operate within State resource constraints.
4.2.3-15 (new)	The Contractor shall adopt and maintain all Project Artifacts that are associated with this Deliverable in the Project Artifact Inventory and manage them in accordance with the Project Artifact process.

Req #	SOW Requirement
4.2.3-16 (new)	The Contractor shall update or develop the following appendices and attach them to the CR Basis of Estimate Deliverable: Appendix 1–SOW to Deliverable Traceability Checklist Description: A table where the Contractor identifies the SOW requirements for this Deliverable, as specified within SOW Section 8, DELIVERABLES, and includes but is not limited to: 1. SOW Requirement ID # 2. SOW Requirement Text 3. Requirement Traceability (Contractor identified traceability from the requirements to the Deliverable) 4. Requirement Fulfillment (Define how the Contractor has fulfilled the SOW requirements in the Deliverable) Appendix 2–Deliverable Compliance and Validation Checklist Description: A QA Checklist that includes, but is not limited to: 1. Deliverable Section Number and Title 2. Deliverable Requirement Statement(s) 3. Requirement Completion (How the Contractor has comply with or will comply with the requirement statements within the Deliverable) 4. Validation Method (The method the Contractor used to validate Deliverable compliance) 5. The Contractor's QA Manager sign-off on compliance Appendix 3—Associated Artifacts Description: An extract from the Project Artifact Inventory List of artifacts associated with this Deliverable, and will include but is not limited to the following examples: 1. Artifact Name 2. Associated Parent DEL 3. State Approver 4. SI Point of Contact 5. Review Frequency 6. Submission Frequency 7. Artifact File Format 8. Artifact Location (e.g., SharePoint breadcrumb) 9. Link to artifact

4.2.4 CR Basis of Estimate (BOE) Execution

Table 4-10: CR Basis of Estimate (BOE) Execution

Req #	SOW Requirement
4.2.4-01 (new)	The Contractor shall staff, manage, lead, and execute the change request process on the CalHEERS as defined in this Statement of Work and in accordance with the CD-4.2-2 – CR Basis of Estimate Deliverable.
4.2.4-02 (existing)	The Contractor shall conduct walkthroughs of change requests that outline the scope of the change and the associated costing methodology. The cost methodology and estimate for each change shall be made available to the State for review. The State shall have access to the CR documentation and all related data during the term of the Contract.
4.2.4-03 (existing)	The Contractor shall analyze the code to fully define the design, code level of effort, and cost estimates for State approved change and enhancement requests.

Req #	SOW Requirement
4.2.4-04 (existing)	The Contractor shall provide as an option on any CR work, a “fixed price-fixed scope” estimate regardless of the SDLC methodology used to implement the change (e.g., Enterprise Agile, Waterfall, Hybrid). Note: The Contractor is not limited to exclusively using this method, rather they must offer it as another option.
4.2.4-05 (existing)	The State may, at its sole discretion, obtain the services of a third-party to review, validate, or advise the State regarding any Change Request (CR) estimate received from the Contractor. The Contractor will promptly work with the third-party to assist in understanding and reviewing the Contractor estimating model, data, and assumptions. The Contractor will work with the State and the third-party to reconcile the Contractor estimate with any estimate from the third-party and to reach an agreement with the State on an appropriate fixed scope and cost estimate for the CR.
4.2.4-06 (new)	The Contractor shall incorporate the Basis of Estimate at the Change Request (CR) level and at the Release level (sum of effort/cost for all CR's in any given release).
4.2.4-07 (new)	The Contractor shall incorporate the Basis of Estimate into the Contractor's estimation tool(s).
4.2.4-08 (new)	The Contractor shall provide the State with access to the Contractor's estimation tool(s), supporting data and analytical reports.
4.2.4-09 (new)	The Contractor shall collaborate with the State to develop and maintain any new Project Artifacts necessary to support this section. New artifacts shall be added to the Project Artifacts Repository and managed in accordance with the Project Artifact process.

4.2.5 Configuration Management Plan

The Configuration Management Plan describes the methods, processes, tools and procedures to be used for identification, control, status, auditing, evaluation and release management for all configured items (CI).

Table 4-11: Configuration Management Plan (CD-4.2-3)

Req #	SOW Requirement
4.2.5-01 (modified)	The Contractor shall adopt, enhance, deliver, and maintain a CalHEERS Configuration Management Plan, which includes but is not limited to: 1. INTRODUCTION 1.1 Purpose 1.1.1 Objectives of Configuration Management 1.1.2 High Level Process Management Overview 1.2 List of Reference Documents 1.3 Audience 2. SUMMARY 2.1 Scope 3. APPROACH 3.1 Approach to Configuration Management 3.2 Configuration Management Tools 4. ASSUMPTIONS, CONSTRAINTS, AND RISKS 4.1 Assumptions 4.2 Constraints 4.3 Risks 5. REQUIREMENTS 6. ROLES AND RESPONSIBILITIES 6.1 Roles and Responsibilities 7. CONFIGURATION MANAGEMENT PROCESSES 7.1 Configuration Item Class Processes 7.1.1 Configuration Item Class Identification 7.1.2 Modify Existing Configuration Item Class

Req #	SOW Requirement
	7.2 Configuration Item Instance Processes 7.2.1 ServiceNow Configuration Item Processes 7.2.2 ServiceNow Configuration Item Lifecycle 7.3 Configuration Item Discovery 7.3.1 Flexera Discovery 7.3.2 Manual Discovery 7.4 Configuration Management System Baseline 7.4.1 Create New Baseline 7.5 Configuration Management System Audit 7.5.1 Detailed Process 7.6 Change Review and Validation 7.7 Functional Configuration Items 8. CHANGE MANAGEMENT 8.1 Infrastructure Change Management 8.2 Application Change Management 8.3 Database Change Management 8.4 Project Documentation Change Management 9. PROCEDURAL APPENDICES 10. GLOSSARY AND ACRONYMS 10.1 New Acronyms and Terms APPENDIX 1: SOW TO DELIVERABLE TRACEABILITY CHECKLIST APPENDIX 2: DELIVERABLE COMPLIANCE AND VALIDATION CHECKLIST APPENDIX 3: ASSOCIATED ARTIFACTS APPENDIX 4: STANDARDS MAPPING APPENDIX 5: CI SUMMARY
4.2.5-02 (new)	The Contractor shall only alter or modify this Deliverable's structure or content with the approval of the State Project Director or designee.
4.2.5-03 (existing)	The Contractor shall adopt, enhance and maintain the Configuration Management Plan that addresses but is not limited to the following configuration categories: 1. CalHEERS Solution Software and Hardware - Commercial software, third party software, custom software, and hardware acquired through the SI Contract for the CalHEERS solution, as defined within the Contract, DEDs and Deliverables. 2. Project Documents - Any document formally approved and requiring any form of change management will be managed by configuration management and recorded in the software configuration management tool. This includes documents such as deliverables, work products, testing documents, design artifacts, and build artifacts. 3. Requirements - Conditions or requirements that must be met or possessed by the CalHEERS solution or system components to satisfy the Contract, standards, specifications, or other formally imposed documents. 4. Business Rule-Based Data - Rules and associated data that are defined and determined by Project Sponsor and Program Partner staff and maintained in the application. For example: Eligibility and enrollment business rules.
4.2.5-04 (existing)	The Configuration Management Plan shall include but not be limited to: 1. Configuration management approach 2. Contractor, Project Staff and State roles and responsibilities 3. Description of tools 4. Processes and procedures for configuration base lining and management of all System components including, but not limited to: a. Application code b. Server Equipment and Software c. Database Equipment and Software d. Network Equipment and Software 5. Processes and procedures for change control of equipment and software 6. Processes and procedures for build management

Req #	SOW Requirement
	7. Processes and procedures for release management for pre-production and production environments 8. Processes and procedures for audits to identify 9. Configuration management Deficiencies, refine procedures and validate that procedures are being followed 10. Processes and procedures for Configuration management audit activities and findings
4.2.5-05 (modified)	The Contractor shall take over, update, deliver, maintain and execute the Configuration Management Plan in accordance with 828-2012 – IEEE Standard for Configuration Management in Systems and Software Engineering (6.2.1 – Develop CM plan) and ISO/IEC/IEEE 16326-2009 Systems and Software Engineering – Life Cycle Processes – Project Management (Section 5.8.4 – Configuration Management) standards pertaining to: 1. Software Configuration Management Plans 2. Configuration Management Processes (ISO/IEC/IEEE 16326-2009, Systems and Software Engineering – Life Cycle Processes – Project Management (Section 5.8.4 – Configuration Management) As new versions of standards are available, adoption of the new standard will be considered through the change control process and approved by the State Project Director or designee.
4.2.5-06 (existing)	The Contractor shall ensure that the Configuration Management Plan describes the methods, processes, and procedures used for: 1. Configuration Identification 2. Configuration Control 3. Status Accounting 4. Configuration Auditing 5. Evaluation 6. Release Management 7. Application and Operations Folder Structures 8. Reporting 9. Data Fix
4.2.5-07 (existing)	The Contractor shall ensure that the Configuration Management Plan identifies that a CI must be unique and assigned to each design feature in the CR. These design features shall include, but are not limited to: 1. Hardware 2. Software 3. Code/Source Code 4. Linkages 5. Interfaces 6. Batches 7. Screens 8. Business Rules 9. Error Messages 10. Tasks 11. Notifications 12. Reports 13. Forms 14. Database Tables
4.2.5-08 (existing)	The Contractor shall ensure that the Configuration Management Plan identifies and baselines all CIs including, but not limited to: 1. System Requirements Specification 2. Project Master Plan 3. User Documentation 4. Detailed System Design Specification

Req #	SOW Requirement
	5. Interface Design Description 6. CalHEERS Source Code 7. Test Specifications 8. Operation and Installation Manuals 9. CalHEERS Application including Executable Programs and Scripts 10. Database Design Documents 11. Maintenance Documents 12. Hardware Configurations 13. System Software including O/S COTS Standard Products, e.g., databases, middleware software releases
4.2.5-09 (new)	The Contractor shall update the Configuration Management Plan (CD-4.2-3) to add the following to the Configuration Management Tools, in collaboration with the State, to incorporate the following requirement: The Contractor shall provide a configuration dashboard and Ad Hoc Reports, upon request by the State Project Director or designee, from any of the tools defined in this section and further collaborate with the State to identify those that should be provided on a recurring basis. For example, a report that is submitted with upon each software production release that provides in a report form, the changes to the configurable portions of the software (on/off switches). This information is found in the Service Now Configuration Management Database (CMDB) tool.
4.2.5-10 (new)	The State identifies and associates the following artifacts to the Configuration Management Plan. The Contractor shall adopt, update, maintain, and deliver these artifacts in accordance with Appendix 3 of this deliverable including, but not limited to: • CalHEERS 20YY R2Y.M Test Scripts Baseline • CalHEERS 20YY Q2 SharePoint Baseline • CALHEERS Development Workspace Setup - Enrollment • KB0012918 • KB0012919 • KB0013224 • KB0013227 • KB0013228 • KB0013272 • KB0013427 • KB0013443 • KB0013444 • KB0013445 • KB0013464 • KB0013704 • KB0013732 • Procedural Appendix 1 - CI Model Guidelines • Procedural Appendix 12 - Template - 20XX QX Audit Report • Procedural Appendix 13 - Template - 20XX QX Audit Data • Procedural Appendix 14 - Statistics Calculator • Procedural Appendix 2 - Scheduled CM Activities • SOP - Create SharePoint Baseline
4.2.5-11 (new)	The Contractor shall adopt and maintain all Project Artifacts that are associated with this Deliverable in the Project Artifact Inventory and manage them in accordance with the Project Artifact process.
4.2.5-12 (new)	The Contractor shall update or develop the following appendices and attach them to the Configuration Management Plan:

Req #	SOW Requirement
	Appendix 1–SOW to Deliverable Traceability Checklist Description: A table where the Contractor identifies the SOW requirements for this Deliverable, as specified within SOW Section 8, DELIVERABLES, and includes but is not limited to: 1. SOW Requirement ID # 2. SOW Requirement Text 3. Requirement Traceability (Contractor identified traceability from the requirements to the Deliverable) 4. Requirement Fulfillment (Define how the Contractor has fulfilled the SOW requirements in the Deliverable) Appendix 2–Deliverable Compliance and Validation Checklist Description: A QA Checklist that includes, but is not limited to: 1. Deliverable Section Number and Title 2. Deliverable Requirement Statement(s) 3. Requirement Completion (How the Contractor has complied with or will comply with the requirement statements within the Deliverable) 4. Validation Method (The method the Contractor used to validate Deliverable compliance) 5. The Contractor's QA Manager sign-off on compliance Appendix 3—Associated Artifacts Description: An extract from the Project Artifact Inventory List of artifacts associated with this Deliverable, and will include but is not limited to the following examples: 1. Artifact Name 2. Associated Parent DEL 3. State Approver 4. SI Point of Contact 5. Review Frequency 6. Submission Frequency 7. Artifact File Format 8. Artifact Location (e.g., SharePoint breadcrumb) 9. Link to artifact

4.2.6 Change Management and Configuration Management Execution

Table 4-12: Change Management and Configuration Management Execution

Req #	SOW Requirement
4.2.6-01 (new)	The Contractor shall staff, manage, lead and execute Configuration Management on CalHEERS as defined in this Statement of Work and in accordance with the CD-4.2-3 – Configuration Management Plan.
4.2.6-02 (existing)	The Contractor shall conduct interviews and studies with CalHEERS Project Staff within its respective organization as required to ensure that the CalHEERS Application remains relevant.
4.2.6-03 (existing)	The Contractor shall be responsible for managing and controlling all CalHEERS System configuration items, maintaining build areas, and maintaining the configuration management processes and procedures.
4.2.6-04 (existing)	The Contractor shall plan, develop, and conduct Organizational Change Management training for all appropriate staff as determined by the State Project Director or designee.
4.2.6-05 (new)	The Contractor shall implement configuration changes associated to a defect Corrective Action Plans (CAP) and Plan of Action Milestones (POAM) in accordance with the Configuration Management Plan at no additional cost to the State. Refer also to Special Provisions, Section 7.3 for a full definition of corrective actions covered under this contract.

Req #	SOW Requirement
4.2.6-06 (new)	The Contractor shall perform a configuration audit quarterly and review the audit results with the State.
4.2.6-07 (new)	The Contractor shall provide configuration management audit recommendations to the State for review and implementation as part of audit process.
4.2.6-08 (new)	The Contractor shall conduct all Change Management and Configuration Management Execution activities under the Fixed Price services.
4.2.6-09 (new)	The Contractor shall provide a real-time dashboard in the CMDB tool that shall at a minimum include functionality for the State to review a list of current configurations.
4.2.6-10 (new)	The Contractor shall provide Ad Hoc Reports from the CM Tools used on the project when requested, and at no additional cost to the State. Refer to the Configuration Management Plan (CD-4.2-3), subsection 3.2 Configuration Management Tools. For example, upon each software production release provide and deliver the changes to the configurable portions of the software (on/off switches). This information is found in the Service Now CMDB tool.
4.2.6-11 (new)	The Contractor shall collaborate with the State to develop and maintain any new Project Artifacts necessary to support this section. New artifacts shall be added to the Project Artifacts Repository and managed in accordance with the Project Artifact process.

4.2.7 Change Readiness Plan

This section includes the requirements for the Change Readiness Plan deliverable in support of Change Requests.

Table 4-13: Change Readiness Plan (CD-4.2-4)

Req #	SOW Requirement
4.2.7-01 (new)	The Contractor shall adopt, enhance, deliver, and maintain a CalHEERS Change Readiness Plan, which includes but is not limited to: 1. INTRODUCTION 1.1 Purpose 1.2 List of Reference Documents 1.3 Audience 2. SUMMARY 2.1 Scope of Release XX.x 3. APPROACH 3.1 CRP Approach 4. ASSUMPTIONS, CONSTRAINTS AND RISKS 4.1 Assumptions 4.2 Constraints 4.3 Risks 5. REQUIREMENTS 6. ROLES AND RESPONSIBILITIES 7. RXX.x BUSINESS CHANGE MANAGEMENT IMPACT ANALYSIS AND SUPPORT STRATEGIES 8. GLOSSARY AND ACRONYMS 8.1 New Acronyms and Terms APPENDIX 1: SOW TO DELIVERABLE TRACEABILITY CHECKLIST APPENDIX 2: DELIVERABLE COMPLIANCE AND VALIDATION CHECKLIST APPENDIX 3: ASSOCIATED ARTIFACTS
4.2.7-02 (new)	The Contractor shall only alter or modify this Deliverable's structure or content with the approval of the State Project Director or designee.

Req #	SOW Requirement
4.2.7-03 (modified)	Following the methodology approved in the Organizational and Business Change Management Plan, the Contractor shall produce a Change Readiness Plan, based on the discussions and analysis conducted in collaboration with the CalHEERS Project teams that accurately details and describes the process changes affecting the way staff will perform their jobs once the CR is implemented and in production.
4.2.7-04 (modified)	Following the methodology approved in the Organizational and Business Change Management Plan, the Contractor shall provide a Change Readiness Plan that accurately documents the steps the person in the role will complete once they begin using the CalHEERS System along with the steps that the person will stop completing once the CR is implemented and in production.
4.2.7-05 (modified)	Based on the methodology approved in the Organizational and Business Change Management Plan, the Contractor shall provide the following change preparation strategies: 1. Approach to change management support 2. Contractor, State Project staff and State roles and responsibilities 3. Communication processes and procedures 4. Tools and templates in support of Change Readiness
4.2.7-06 (new)	The Change Readiness Plan shall describe: 1. Organizational impacts (as appropriate) to: - a County Offices - b DHCS, Covered California - c Interface Partners - d Other Organizations 2. Business Process Gap Analysis 3. Business Process Impacts
4.2.7-07 (new)	The Contractor shall adopt and maintain all Project Artifacts that are associated with this Deliverable in the Project Artifact Inventory and manage them in accordance with the Project Artifact process.
4.2.7-08 (new)	The Contractor shall update or develop the following appendices and attach them to the Change Readiness Plan: Appendix 1—SOW to Deliverable Traceability Checklist Description: A table where the Contractor identifies the SOW requirements for this Deliverable, as specified within SOW Section 8, DELIVERABLES, and includes but is not limited to: 1. SOW Requirement ID # 2. SOW Requirement Text 3. Requirement Traceability (Contractor identified traceability from the requirements to the Deliverable) 4. Requirement Fulfillment (Define how the Contractor has fulfilled the SOW requirements in the Deliverable) Appendix 2—Deliverable Compliance and Validation Checklist Description: A QA Checklist that includes, but is not limited to: 1. Deliverable Section Number and Title 2. Deliverable Requirement Statement(s) 3. Requirement Completion (How the Contractor has complied with or will comply with the requirement statements within the Deliverable) 4. Validation Method (The method the Contractor used to validate Deliverable compliance) 5. The Contractor's QA Manager sign-off on compliance Appendix 3—Associated Artifacts

Req #	SOW Requirement
	Description: An extract from the Project Artifact Inventory List of artifacts associated with this Deliverable, and will include but is not limited to the following examples: 1. Artifact Name 2. Associated Parent DEL 3. State Approver 4. SI Point of Contact 5. Review Frequency 6. Submission Frequency 7. Artifact File Format 8. Artifact Location (e.g., SharePoint breadcrumb) 9. Link to artifact

4.2.8 Change Readiness Execution

Table 4-14: Change Readiness Execution

Req #	SOW Requirement
4.2.8-01 (new)	The Contractor shall staff, manage, lead and execute Change Readiness Management on the CalHEERS as defined in this Statement of Work and in accordance with the CD-4.2-4 – Change Readiness Plan.
4.2.8-02 (new)	The Contractor shall collaborate with the State to develop and maintain any new Project Artifacts necessary to support this section. New artifacts shall be added to the Project Artifacts Repository and managed in accordance with the Project Artifact process.

4.2.9 Change Request Cost Summary

This section includes the requirements for the Change Request Cost Summary deliverable.

Table 4-15: Change Request Cost Summary (CD-4.2-5)

Req #	SOW Requirement
4.2.9-01 (new)	The Contractor shall adopt, enhance, deliver, and maintain the Change Request (CR) Cost Summary for all CRs produced for the CalHEERS as directed by the Change Request Process deliverable (CD-4.2-1).
4.2.9-02 (new)	The Contractor shall only alter or modify this Deliverable's structure or content with the approval of the State Project Director or designee.
4.2.9-03 (new)	The Contractor shall collaborate with the State to incorporate several improvements to the existing CR Cost Summary to include but not be limited to the following: • More definition around what can be added and what cannot? Limit to fixed numbers/hours/percentages? • Transparency in hours specifically tied to individuals and specific activities. • Use of actuals instead of set percentages/hours based on Very High /High/ Medium/ Low/etc. • Elimination of the use of set percentages for hours/costs of estimates of actuals. • Tool considerations to tie into the historical cost database. • Incorporates TCO methodology updates (see SOW 4.2.1-CHANGE REQUEST PROCESS) • A separate cost summarization by Fiscal Cost Category (by Fiscal Year)
4.2.9-04 (new)	The Contractor shall adopt and maintain all Project Artifacts that are associated with this Deliverable in the Project Artifact Inventory and manage them in accordance with the Project Artifact process.
4.2.9-05 (new)	The Contractor shall update or develop the following appendices and attach them to the Change Request Cost Summary deliverable:

Req #	SOW Requirement
	Appendix 1—SOW to Deliverable Traceability Checklist Description: A table that identifies the SOW requirements for this Deliverable, as specified within SOW Section 8, DELIVERABLES, and includes but is not limited to: 1. SOW Requirement ID # 2. SOW Requirement Text 3. Requirement Traceability (Define traceability of the requirements to the Deliverable) 4. Requirement Fulfillment (Define how the SOW requirements have been fulfilled by this Deliverable) Appendix 2—Deliverable Compliance and Validation Checklist Description: A QA Checklist that includes, but is not limited to: 1. Deliverable Section Number and Title 2. Deliverable Requirement Statement(s) 3. Requirement Completion (How the Contractor will comply with or has complied with the requirement statements within the plan) 4. Validation Method (The method the Contractor used to validate Deliverable compliance) 5. The Contractor's QA Manager sign-off on compliance Appendix 3—Associated Artifacts Description: An extract from the Project Artifact Inventory List of artifacts associated with this Deliverable, and will include but is not limited to the following examples: 1. Artifact Name 2. Associated Parent DEL 3. State Approver 4. SI Point of Contact 5. Review Frequency 6. Submission Frequency 7. Artifact File Format 8. Artifact Location (e.g., SharePoint breadcrumb) 9. Link to artifact

4.2.10 Change Request Cost Summary Execution

Table 4-16: Change Request Cost Summary Execution

Req #	SOW Requirement
4.2.10-01 (new)	The Contractor shall staff, manage, lead and execute Change Request Cost Summary activities on the CalHEERS as defined in this Statement of Work and in accordance with the CD-4.2-5 – Change Request Cost Summary.
4.2.10-02 (new)	The Contractor shall not charge for any warranty cost(s) within a Change Request.
4.2.10-03 (new)	The Contractor shall collaborate with the State to develop and maintain any new Project Artifacts necessary to support this section. New artifacts shall be added to the Project Artifacts Repository and managed in accordance with the Project Artifact process.

4.3 CHANGE/REFRESH/UPGRADES

The Contractor shall design and develop changes, enhancements, and upgrades to CalHEERS based on approved Change Requests (CR) utilizing the methods described in this section.

4.3.1 System Development Outline

Table 4-17: System Development Outline (CD-4.3-1)

Req #	SOW Requirement
4.3.1-01 (modified)	The Contractor shall adopt, enhance, deliver, and maintain a CalHEERS System Development Outline, which includes but is not limited to: 1. INTRODUCTION 1.1 Purpose 2. CR Overview 3. Requirements 4. Summary of Changes 4.1 Placeholder for Impacted Component #1 4.1.1 As-is function. 4.1.2 To-be function. 4.2 Placeholder for Impacted Component #2 4.2.1 As-is function. 4.2.2 To-be function 5. Revision History 6. Terms and Definitions APPENDIX 1: SOW TO DELIVERABLE TRACEABILITY CHECKLIST APPENDIX 2: DELIVERABLE COMPLIANCE AND VALIDATION CHECKLIST APPENDIX 3: ASSOCIATED ARTIFACTS
4.3.1-02 (new)	The Contractor shall only alter or modify this Deliverable's structure or content with the approval of the State Project Director or designee.
4.3.1-03 (new)	For each approved CR, the Contractor shall provide a System Development Outline that includes but is not limited to: 1. Purpose of the Document 2. CR Overview 3. Requirements 4. Summary of Changes 5. Revision History 6. Terms and Definitions 7. Document References
4.3.1-04 (new)	The Contractor shall adopt and maintain all Project Artifacts that are associated with this Deliverable in the Project Artifact Inventory and manage them in accordance with the Project Artifact process.
4.3.1-05 (new)	The Contractor shall update or develop the following appendices and attach them to the System Development Outline deliverable: Appendix 1—SOW to Deliverable Traceability Checklist Description: A table where the Contractor identifies the SOW requirements for this Deliverable, as specified within SOW Section 8, DELIVERABLES, and includes but is not limited to: 1. SOW Requirement ID # 2. SOW Requirement Text 3. Requirement Traceability (Contractor identified traceability from the requirements to the Deliverable) 4. Requirement Fulfillment (Define how the Contractor has fulfilled the SOW requirements in the Deliverable) Appendix 2—Deliverable Compliance and Validation Checklist Description: A QA Checklist that includes, but is not limited to: 1. Deliverable Section Number and Title 2. Deliverable Requirement Statement(s)

Req #	SOW Requirement
	3. Requirement Completion (How the Contractor has complied with or will comply with the requirement statements within the Deliverable) 4. Validation Method (The method the Contractor used to validate Deliverable compliance) 5. The Contractor's QA Manager sign-off on compliance Appendix 3—Associated Artifacts Description: An extract from the Project Artifact Inventory List of artifacts associated with this Deliverable, and will include but is not limited to the following examples: 1. Artifact Name 2. Associated Parent DEL 3. State Approver 4. SI Point of Contact 5. Review Frequency 6. Submission Frequency 7. Artifact File Format 8. Artifact Location (e.g., SharePoint breadcrumb) 9. Link to artifact

4.3.2 System Development Execution

Table 4-18: System Development Execution

Req #	SOW Requirement
4.3.2-01 (new)	The Contractor shall staff, manage, lead and execute System Development on the CalHEERS as defined in this Statement of Work and in accordance with the CD-4.3-1 – System Development Outline.
4.3.2-02 (existing)	The Contractor shall obtain written approval from the State Project Director or designee, prior to the beginning of system development activities.
4.3.2-03 (new)	The Contractor shall collaborate with the State to develop and maintain any new Project Artifacts necessary to support this section. New artifacts shall be added to the Project Artifacts Repository and managed in accordance with the Project Artifact process.

4.3.3 Architectural Design Document

The Architectural Design Document details and reflects the CalHEERS architecture based on the validated requirements. The Architectural Design Document is to be maintained and kept current.

Table 4-19: Architectural Design Document (CD-4.3-2)

Req #	SOW Requirement
4.3.3-01 (modified)	The Contractor shall adopt, enhance, deliver, and maintain the Architectural Design Document deliverable, which includes but is not limited to: 1. INTRODUCTION 1.1 Purpose 1.2 List of Reference Docs 1.3 Audience 2. SUMMARY 2.1 Scope 2.2 Update Frequency 3. APPROACH

Req #	SOW Requirement
	4. ASSUMPTIONS, CONSTRAINTS, AND RISKS 4.1 Assumptions 4.2 Constraints 4.3 Risks 5. REQUIREMENTS 6. ROLES AND RESPONSIBILITIES 6.1 Roles and Responsibilities 6.1.1 Contractor Roles and Responsibilities 6.1.2 State Roles and Responsibilities 7. CALHEERS ARCHITECTURE 7.1 Overview 7.2 Executive Summary 7.3 High-Level Diagram and Description of CalHEERS Architecture 7.4 Infrastructure Architecture 7.4.1 Network Architecture 7.4.2 Platform Architecture 7.4.3 Information Architecture 7.4.4 Web Portal Architecture 7.5 Single Stream React Architecture 7.6 Data Exchange Architecture 7.7 Notice Architecture 7.8 Printer Architecture 7.9 Forms Architecture 7.10 Business Architecture 7.11 Interface Architecture 7.12 Batch Architecture 7.13 Data Warehouse Architecture 7.14 Target State Architecture (TSA) Architectural Hierarchy Diagram 7.15 Application Components and their high-level hardware / software mapping 7.16 RTM Mapping 8. GLOSSARY AND ACRONYMS 8.1 New Acronyms and Terms APPENDIX 1: SOW TO DELIVERABLE TRACEABILITY CHECKLIST APPENDIX 2: DELIVERABLE COMPLIANCE AND VALIDATION CHECKLIST APPENDIX 3: ASSOCIATED ARTIFACTS APPENDIX 4: STANDARDS MAPPING
4.3.3-02 (new)	The Contractor shall only alter or modify this Deliverable's structure or content with the approval of the State Project Director or designee.
4.3.3-03 (modified)	The Contractor shall maintain the Architectural Design Document in accordance with ISO/IEC 12207, IEEE 12207-2008 Systems and Software Engineering - Software Life Cycle Processes (Section 6.4.3 - System Architectural Design, Section 7.1.3 - Software Architectural Design Process, Section 7.1.4 - Software Detailed Design Process, Section 7.3.1 - Domain Engineering Process). As new versions of standards are available, adoption of the new standard will be considered through the change control process and approved by the State Project Director or designee.
4.3.3-04 (existing)	The Contractor shall identify both hardware and software components, and a high-level description of how the system requirements are allocated among the system components in the Architectural Design Document.

Req #	SOW Requirement
4.3.3-05 (existing)	The Contractor shall produce and maintain an Architectural Design Document that includes but is not limited to: 1. Executive Summary 2. Description 3. Scope 4. Overview 5. General Roles and Responsibilities 6. High-Level Description and depiction of the CalHEERS architecture 7. Forms Architecture 8. Appendices a. Technology Infrastructure Architecture b. Information Architecture c. Business Architecture d. Data Exchange Architecture e. Web Portal Architecture f. Printer Architecture
4.3.3-06 (modified)	The Contractor shall validate, update and maintain the Architectural Design Document to always reflect the as-built system.
4.3.3-07 (existing)	The Contractor shall update and maintain the Architectural Design Document showing the relationship between the Requirements Traceability Matrix, Contract SOW and SyRS requirements.
4.3.3-08 (new)	The Contractor shall adopt and maintain all Project Artifacts that are associated with this Deliverable in the Project Artifact Inventory and manage them in accordance with the Project Artifact process.
4.3.3-09 (new)	The Contractor shall update or develop the following appendices and attach them to the Architectural Design Document deliverable: Appendix 1—SOW to Deliverable Traceability Checklist Description: A table where the Contractor identifies the SOW requirements for this Deliverable, as specified within SOW Section 8, DELIVERABLES, and includes but is not limited to: 1. SOW Requirement ID # 2. SOW Requirement Text 3. Requirement Traceability (Contractor identified traceability from the requirements to the Deliverable) 4. Requirement Fulfillment (Define how the Contractor has fulfilled the SOW requirements in the Deliverable) Appendix 2—Deliverable Compliance and Validation Checklist Description: A QA Checklist that includes, but is not limited to: 1. Deliverable Section Number and Title 2. Deliverable Requirement Statement(s) 3. Requirement Completion (How the Contractor has complied with or will comply with the requirement statements within the Deliverable) 4. Validation Method (The method the Contractor used to validate Deliverable compliance) 5. The Contractor's QA Manager sign-off on compliance Appendix 3—Associated Artifacts Description: An extract from the Project Artifact Inventory List of artifacts associated with this Deliverable, and will include but is not limited to the following examples: 1. Artifact Name 2. Associated Parent DEL 3. State Approver

Req #	SOW Requirement
	4. SI Point of Contact 5. Review Frequency 6. Submission Frequency 7. Artifact File Format 8. Artifact Location (e.g., SharePoint breadcrumb) 9. Link to artifact

4.3.4 Architectural Design Execution

Table 4-20: Architectural Design Execution

Req #	SOW Requirement
4.3.4-01 (new)	The Contractor shall staff, manage, lead and execute all Architecture Design activities on CalHEERS as defined in this Statement of Work and in accordance with the CD-4.3-2 – Architectural Design Document.
4.3.4-02 (new)	The Contractor shall collaborate with the State to develop and maintain any new Project Artifacts necessary to support this section. New artifacts shall be added to the Project Artifacts Repository and managed in accordance with the Project Artifact process.

4.3.5 Detailed System Design Deliverable

The Detailed System Design (DSD) documents the CalHEERS solution and provides traceability to the validated System Requirements Specification (SyRS). The DSD identifies software components and provides a detailed description of how the system requirements are allocated to those software components. The scope of the DSD is to document system functionality. The DSD is to be maintained and kept current. Refer to Appendix A-2, SPECIAL PROVISIONS, A-2.3, SERVICE LEVEL AGREEMENTS & LIQUIDATED DAMAGES, for liquidated damages associated with this requirement.

Table 4-21: Detailed System Design Deliverable (CD-4.3-3)

Req #	SOW Requirement
4.3.5-01 (modified)	The Contractor shall adopt, enhance, deliver, and maintain the Detailed System Design deliverable, which includes but is not limited to: 1. INTRODUCTION 1.1 Purpose 1.2 List of Reference Documents 1.3 Audience 2. SUMMARY 2.1 Scope 2.2 Update Frequency 3. APPROACH 4. ASSUMPTIONS, CONSTRAINTS, AND RISKS 4.1 Assumptions 4.2 Constraints 4.3 Risks 5. REQUIREMENTS 6. ROLES AND RESPONSIBILITIES 6.1 Roles and Responsibilities 6.1.1 Contractor Roles and Responsibilities 6.1.2 State Roles and Responsibilities 7. DETAILED SYSTEM DESIGN 7.1 Overview

Req #	SOW Requirement
	7.1.1 Portal 7.1.2 Eligibility 7.1.3 Interfaces 7.1.4 Enrollment 7.1.5 Notices 7.1.6 Security 7.1.7 Reporting 7.2 Mapping of the System Requirements Specification (SyRS) Categories to Software Components 7.3 Design document types for each Software Component and location in the Design Repository structure 7.4 Maintaining Version Control and Track Changes for Design Document updates 7.4.1 Track Changes Procedure 7.4.2 Version Control Procedure 8. DESIGN MERGE PROCESS 8.1 Purpose 8.2 Background 8.3 Design CRFI Process - Pre-requisites 8.4 Design Merge Process – Detailed Steps 8.5 Correcting Design Merge Mistakes 8.6 Removal of Design Document for Retired Functionality 8.7 Security Design Documents 8.8 Design Merge Training for Contractor Design Lead 9. TOOLS 10. GLOSSARY AND ACRONYMS 10.1 New Acronyms and Terms APPENDIX 1: SOW TO DELIVERABLE TRACEABILITY CHECKLIST APPENDIX 2: DELIVERABLE COMPLIANCE AND VALIDATION CHECKLIST APPENDIX 3: ASSOCIATED ARTIFACTS APPENDIX 4: STANDARDS MAPPING APPENDIX 5: INVENTORY OF DESIGN DOCUMENTS APPENDIX 6: DESIGN MERGE DISCREPANCY EMAIL TEMPLATE
4.3.5-02 (new)	The Contractor shall only alter or modify this Deliverable's structure or content with the approval of the State Project Director or designee.
4.3.5-03 (modified)	The Contractor shall prepare the DSD in accordance with 1016-2009 - IEEE Standard for Information Technology - Systems Design - Software Design Descriptions (3 - Conceptual model for software design description), ISO/IEC 14764, IEEE 14764-2006 Software Engineering - Software Life Cycle Processes Maintenance) and IEEE ISO/IEC 12207, IEEE 12207-2008 System and Software Engineering (Section 5 - Maintenance Processes) Software Life Cycle Processes (Section 5.1.12 - Life Cycle Models and Stages, Section 5.2.1 - Categories of Life Cycle Processes, Section 6 - System Life Cycle Processes, Section 6.2 - Organizational Project-Enabling Process, Section 6.4.3 - System Architectural Design, Section 6.4.10 - Software Maintenance Process, Section 7 - Software Specific Processes) pertaining to: 1. Recommended Practice for Software Design Descriptions 2. Standard for Software Maintenance 3. Standard for Information Technology – Software Life cycle Processes: a. Development Process b. Software Architectural Design c. Software Detailed Design As new versions of standards are available, adoption of the new standard will be considered through the change control process and approved by the State Project Director or designee.
4.3.5-04 (modified)	The Contractor shall validate, update and maintain the DSD to always reflect the as-built system.

Req #	SOW Requirement
4.3.5-05 (existing)	The Contractor shall identify and map system requirements to software components.
4.3.5-06 (existing)	The Contractor shall refine software items into lower levels of software that can be coded, compiled, and tested.
4.3.5-07 (existing)	The Contractor shall allocate all of the system and software requirements into distinct functional components.
4.3.5-08 (existing)	The Contractor shall provide a DSD that includes but is not limited to: 1. Documentation of the solution that fulfills the detailed system design requirements. 2. Is traceable to the system and component software requirements. 3. Provides a consistent, unambiguous design description that shall permit coding without the need for further information.
4.3.5-09 (existing)	The Contractor shall provide a DSD that includes but is not limited to: 1. Executive Summary 2. Overview 3. General Roles and Responsibilities a. Functional Areas b. Topic Area c. Business Processes d. Code table Definitions e. Database Entities (Cross Reference with Database Design Description) f. Business Class Definitions Requirements 4. Appendices a. User/Security Role Matrix b. DSD update mapping to Change Requests c. Advantage Baseline Data Elements d. Check Eligibility Processing Order e. Notice of Action (NOA) Translations f. Error Messages g. Business Rules h. Forms and Notifications i. Tasks j. DSD Section/Appendix List
4.3.5-10 (modified)	The Contractor shall provide a DSD that results in efficient and cost-effective operations and maintenance, as determined by the State Project Director or designee.
4.3.5-11 (existing)	The Contractor shall merge all incremental DSD updates into a single master DSD deliverable, delivering the master DSD to the State per SOW Section 8, DELIVERABLES, and shall maintain the master DSD for the term of the Contract.
4.3.5-12 (new)	The State identifies and associates the following artifacts to the Detailed System Design Deliverable. The Contractor shall adopt, update, maintain, and deliver these artifacts in accordance with Appendix 3 of this deliverable including, but not limited to: • Design & Code Request (DCR) Process
4.3.5-13 (new)	The Contractor shall adopt and maintain all Project Artifacts that are associated with this Deliverable in the Project Artifact Inventory and manage them in accordance with the Project Artifact process.
4.3.5-14 (new)	The Contractor shall update or develop the following appendices and attach them to the Detailed System Design Deliverable: Appendix 1–SOW to Deliverable Traceability Checklist Description: A table where the Contractor identifies the SOW requirements for this Deliverable, as specified within SOW Section 8, DELIVERABLES, and includes but is not limited to: 1. SOW Requirement ID #

Req #	SOW Requirement
	- SOW Requirement Text - Requirement Traceability (Contractor identified traceability from the requirements to the Deliverable) - Requirement Fulfillment (Define how the Contractor has fulfilled the SOW requirements in the Deliverable) Appendix 2—Deliverable Compliance and Validation Checklist Description: A QA Checklist that includes, but is not limited to: - Deliverable Section Number and Title - Deliverable Requirement Statement(s) - Requirement Completion (How the Contractor has complied with or will comply with the requirement statements within the Deliverable) - Validation Method (The method the Contractor used to validate Deliverable compliance) - The Contractor's QA Manager sign-off on compliance Appendix 3—Associated Artifacts Description: An extract from the Project Artifact Inventory List of artifacts associated with this Deliverable, and will include but is not limited to the following examples: - Artifact Name - Associated Parent DEL - State Approver - SI Point of Contact - Review Frequency - Submission Frequency - Artifact File Format - Artifact Location (e.g., SharePoint breadcrumb) - Link to artifact

4.3.6 Detailed System Design Execution

Table 4-22: Detailed System Design Execution

Req #	SOW Requirement
4.3.6-01 (new)	The Contractor shall staff, manage, lead and execute Detailed System Design on the CalHEERS as defined in this Statement of Work and in accordance with the CD-4.3-3 – Detailed System Design Deliverable.
4.3.6-02 (modified)	The Contractor shall implement and control modifications to the CalHEERS System's design, hardware, firmware, and software using change management and configuration management processes.
4.3.6-03 (new)	The Contractor shall collaborate with the State to develop and maintain any new Project Artifacts necessary to support this section. New artifacts shall be added to the Project Artifacts Repository and managed in accordance with the Project Artifact process.

4.3.7 Commercial Off the Shelf Software Design Description

The Commercial Off the Shelf (COTS) Software Design Description (CSDD) provides a high-level description of the COTS components that support the CalHEERS core business functions. The CSDD identifies how the system requirements are allocated among the COTS components, and how the design minimizes the complexity and cost of incorporating future COTS upgrades into CalHEERS. The CSDD is to be maintained and kept current.

Table 4-23: COTS Software Design Description (CD-4.3-4)

Req #	SOW Requirement
4.3.7-01 (modified)	The Contractor shall adopt, enhance, deliver, and maintain the COTS Software Design Description deliverable, which includes but is not limited to: 1. INTRODUCTION 1.1 Purpose 1.2 List of Reference Documents 1.3 Audience 2. SUMMARY 2.1 Scope 3. APPROACH 4. ASSUMPTIONS, CONSTRAINTS, AND RISKS 4.1 Assumptions 4.2 Constraints 4.3 Risks 5. REQUIREMENTS 6. ROLES AND RESPONSIBILITIES 6.1 Roles and Responsibilities 6.1.1 Contractor Roles and Responsibilities 6.1.2 State Roles and Responsibilities 7. ACCENTURE BILLING ENGINE 7.1 Description 7.2 Approach 7.3 Component Description 7.3.1 High-Level Component Description 7.3.2 Component Features used by CalHEERS 7.3.3 ABE Component Mapping to HBX System 7.3.4 Component Features not used by CalHEERS 7.3.5 CalHEERS Version 7.3.6 Level of Customization 7.3.7 Upgrade Plan 7.3.8 Maintenance Plan 7.3.9 Software Dependency Consideration 8. SALESFORCE 8.1 Description 8.2 Approach 8.3 Component Description 8.3.1 High-Level Component Description 8.3.2 Component Features used by CalHEERS 8.3.3 Salesforce Component Mapping to HBX System 8.3.4 CalHEERS Version 8.3.5 Level of Customization 8.3.6 Upgrade Plan 8.3.7 Maintenance Plan 8.3.8 Software Dependency Consideration 9. HOSTED SERVICE CENTER TECHNOLOGY STACK 9.1 Description 9.2 Approach 9.3 Component Description 9.3.1 High-Level Component Description 9.3.2 Level of Customization 9.3.3 Upgrade Plan 9.3.4 Maintenance Plan 9.3.5 Software Dependency Consideration 10. GLOSSARY AND ACRONYMS

Req #	SOW Requirement
	10.1 New Acronyms and Terms APPENDIX 1: SOW TO DELIVERABLE TRACEABILITY CHECKLIST APPENDIX 2: DELIVERABLE COMPLIANCE AND VALIDATION CHECKLIST APPENDIX 3: ASSOCIATED ARTIFACTS APPENDIX 4: STANDARDS MAPPING
4.3.7-02 (new)	The Contractor shall only alter or modify this Deliverable's structure or content with the approval of the State Project Director or designee.
4.3.7-03 (modified)	The Contractor shall provide a CSDD that includes but is not limited to documenting: 1. A feasible solution for associated requirements 2. Contains system components that are traceable to the system requirements 3. Contains a consistent, unambiguous description 4. Identifies new features that can enhance CalHEERS functionality 5. Results in an efficient and cost-effective operations and maintenance, as determined by the State Project Director or designee
4.3.7-04 (modified)	The Contractor shall maintain the CSDD in accordance with ISO/IEC/IEEE 12207-2008 System and Software Engineering - Software Life Cycle Processes (Section 6 – System Life Cycle Processes) pertaining to Software Life Cycle Processes, Software Architectural Design, and System Documentation. As new versions of standards are available, adoption of the new standard will be considered through the change control process and approved by the State Project Director or designee.
4.3.7-05 (new)	The Contractor shall, in collaboration with the State, include a section that defines the HOSTED SERVICE CENTER TECHNOLOGY STACK.
4.3.7-06 (new)	The Contractor shall adopt and maintain all Project Artifacts that are associated with this Deliverable in the Project Artifact Inventory and manage them in accordance with the Project Artifact process.
4.3.7-07 (new)	The Contractor shall update the following appendices and attach them to the COTS Software Design Description deliverable: Appendix 1—SOW to Deliverable Traceability Checklist Description: A table where the Contractor identifies the SOW requirements for this Deliverable, as specified within SOW Section 8, DELIVERABLES, and includes but is not limited to: 1. SOW Requirement ID # 2. SOW Requirement Text 3. Requirement Traceability (Contractor identified traceability from the requirements to the Deliverable) 4. Requirement Fulfillment (Define how the Contractor has fulfilled the SOW requirements in the Deliverable) Appendix 2—Deliverable Compliance and Validation Checklist Description: A QA Checklist that includes, but is not limited to: 1. Deliverable Section Number and Title 2. Deliverable Requirement Statement(s) 3. Requirement Completion (How the Contractor has complied with or will comply with the requirement statements within the Deliverable) 4. Validation Method (The method the Contractor used to validate Deliverable compliance) 5. The Contractor's QA Manager sign-off on compliance Appendix 3—Associated Artifacts Description: An extract from the Project Artifact Inventory List of artifacts associated with this Deliverable, and will include but is not limited to the following examples: 1. Artifact Name 2. Associated Parent DEL 3. State Approver

Req #	SOW Requirement
	4. SI Point of Contact 5. Review Frequency 6. Submission Frequency 7. Artifact File Format 8. Artifact Location (e.g., SharePoint breadcrumb) 9. Link to artifact

4.3.8 Commercial Off the Shelf Software Design Execution

Table 4-24: Commercial Off the Shelf Software Design Execution

Req #	SOW Requirement
4.3.8-01 (new)	The Contractor shall staff, manage, lead and execute all COTS Management activities on CalHEERS as defined in this Statement of Work and in accordance with the CD-4.3-4 – COTS Software Design Description deliverable.
4.3.8-02 (new)	The Contractor shall collaborate with the State to develop and maintain any new Project Artifacts necessary to support this section. New artifacts shall be added to the Project Artifacts Repository and managed in accordance with the Project Artifact process.

4.3.9 Logical Data Model

Table 4-25: Logical Data Model (CD-4.3-5)

Req #	SOW Requirement
4.3.9-01 (existing)	The Contractor shall prepare a Logical Data Model (LDM) to include at a minimum: 1. Participants Roles and Responsibilities 2. Conceptual, Logical, And Physical Data Models: a. LDM Fields b. LDM Relationship Views c. Logical Data Model (LDM) d. Data Flows Diagrams (DFD) e. LDM Data Dictionary/CRUD Matrix
4.3.9-02 (modified)	The Contractor shall provide a CalHEERS Conceptual Data Model that is designed, built, and maintained in compliance with NIEM.
4.3.9-03 (new)	The Contractor shall staff, manage, lead and execute Logical Data Model maintenance activities on the CalHEERS as defined in this Statement of Work and in accordance with the CD-4.3-5 – Logical Data Model.
4.3.9-04 (modified)	The Contractor shall document a SOP to produce the Daily Production Status Report and take over, update, deliver, and maintain a detailed Database Design Description (DDD). The DDD shall include any modifications to the data dictionary, ERD(s), and physical database design.
4.3.9-05 (new)	The Contractor shall staff, manage, lead and execute Database Design activities on the CalHEERS as defined in this Statement of Work and in accordance with the CD-4.3-5 – Logical Data Model.
4.3.9-06 (new)	The Contractor shall only alter or modify this Deliverable's structure or content with the approval of the State Project Director or designee.
4.3.9-07 (modified)	The Contractor shall maintain the DDD in accordance with ISO/IEC/IEEE 16326-2009 Systems and Software Engineering - Life Cycle Processes - Project Management (Section 5.8.5.1 - Documentation) pertaining to System Documentation. As new versions of standards are available, adoption of the new standard will be considered through the change control process and approved by the State Project Director or designee.
4.3.9-08 (existing)	The Contractor shall maintain and update the DDD to always reflect the as-built system.

Req #	SOW Requirement
4.3.9-09 (existing)	The Contractor shall normalize all database design as appropriate, in accordance with the DDD. Any changes or exceptions to the degree of normalization shall require prior approval by the State Project Director or designee.
4.3.9-10 (existing)	The Contractor shall provide impact and mapping of updated data elements of database tables with the CR, requirement, or defect number in the DDD.
4.3.9-11 (modified)	The Contractor shall provide a DDD that includes but is not limited to: 1. Documentation of the solution that fulfills the database requirements. 2. Traces the system and component software requirements. 3. Provides a consistent, unambiguous design description that shall permit coding without the need for further information. 4. Results in an efficient and cost-effective maintenance and operations environment as determined by the State Project Director or designee. 5. Includes ERD's that graphically display Primary Key (PK) and Foreign Key (FK) relationships 6. Includes data dictionaries that provide detailed information on each data element including table name, column name, column data type, source data elements and relationships (PKs and FKs) 7. Includes ERD's and table column lists that are generated using a data modeler tool 8. Includes all ERDs associated with the CalHEERS System 9. Includes database schemas
4.3.9-12 (existing)	The Contractor shall provide a Database Design Description (DDD) that includes the Logical Data Model (LDM) and Physical Data Model (PDM) as created and maintained within the relational data modeling tool.
4.3.9-13 (new)	The Contractor shall only alter or modify this Deliverable's structure or content with the approval of the State Project Director or designee.
4.3.9-14 (new)	The Contractor shall adopt and maintain all Project Artifacts that are associated with this Deliverable in the Project Artifact Inventory and manage them in accordance with the Project Artifact process.
4.3.9-15 (new)	The State identifies and associates the following artifacts to the Logical Data Model. The Contractor shall adopt, update, maintain, and deliver these artifacts in accordance with Appendix 3 of this deliverable including, but not limited to: • ~~D-4.4-5~~ Database Design Description • ASM_DISK_ADDITION • AWR ASH and ADDM in RAC environment • awscli command • Backup and Restore • Backup Manifest storage and generation • CalHEERS DW- Snowflake Admin SOP • Calheers User Management - DBA • Cluster Verification • Configure_Databases_in_OEM • Configure_DG_Broker • Connecting to Oracle from SQL Server • conversion_to_physical_standby_failing_from_snapshot_standby_after_adding_new_tablespace_on_Primary_database • Create SQL Profiles, Baseline, COE and EXPIMP Plans • Create_explain_plan • Create_restore_point • Creating SQL Profile • Data and Database Management • Database cloning • Database Flashback • Database_Switchover

Req #	SOW Requirement
	• Dataguard_Broker • DB monitoring (main reports and schedules) • DBCR execution process • Documents Inventory • DR_Setup • DW_ETL_Monitoring • EDW_CODE_DROP_GUIDE_2021 • FBDA_maintenance_Activity • FGA maintenance activity • Loading data using SQLLDR utility • Logical_replication • LT load test pre-checks • Monthly_FGAandAUD • New application schema creation and launchpad setup • Object comparison report • Opscopy_dry_run • Opscopy_refresh • Partitioning using DBMS_REDEFINITION • PCAP_DBCR_Process • PCR GUIDE 2021 • Performance Tuning Queries in PostgreSQL • pg_cron_setup • Point in time and TSPITR Tablespace Recovery • Postgres FDW Setup between Postgres DB to Postgres DB • PostgreSQL Important Monitoring Quieres • PostgreSQL_Installation_and_DB_Creation • PostgreSQL_RDS_upgrade_using_pglogical • PrepDDS Refresh • PROD_patching_plan • Purging SCAN listener • RDS_Backup • Reorg and purging • Restore deleted datafile • Restore_recover of Datafiles • RMAN full and incremental backup scripts • RMAN_Block_recovery • Running_database_health_checks • Schema_Refresh_Process • SOP - PCAP Database Creation with Grants • SOP - pgBadger Report Generation • SOP ABE Service Account Password Change • SOP to create PITR of Aurora Cluster • SOP_Backup_Restore_From_S3 • SOP_Backup_Restore_From_S3_v1_goldencopy • SOP_configure_postgres_server_in_version_report • SOP-Start_STOP_has • SQL SERVER BACKUP AND RECOVERY • SQL Server Data Masking • SQL SERVER PARTIONING AND ARCHIVING • SQL Server Runbook • SQL Server TDE • SQL_Server_Auditlog_generation_error

Req #	SOW Requirement
	• SQL_Server_Data_Refresh • SQL_Server_Disaster_recovery_mirroring • SQL_Server_Dynamic_Management_Views • SQL_Server_Patching_Support • SQL_Server_Performance_Monitoring • Standby_incremental_recovery • Storage_capacity_gen • Switchover • Tablespace Pre-Allocation and LOB column space Addition • TFA installation • XML comparision
4.3.9-16 (new)	The Contractor shall update or develop the following appendices and attach them to the Database Design Description deliverable: Appendix 1—SOW to Deliverable Traceability Checklist Description: A table that identifies the SOW requirements for this Deliverable, as specified within SOW Section 8, DELIVERABLES, and includes but is not limited to: 1. SOW Requirement ID # 2. SOW Requirement Text 3. Requirement Traceability (Define traceability of the requirements to the Deliverable) 4. Requirement Fulfillment (Define how the SOW requirements have been fulfilled by this Deliverable) Appendix 2—Deliverable Compliance and Validation Checklist Description: A QA Checklist that includes, but is not limited to: 1. Deliverable Section Number and Title 2. Deliverable Requirement Statement(s) 3. Requirement Completion (How the Contractor will comply with or has complied with the requirement statements within the plan) 4. Validation Method (The method the Contractor used to validate Deliverable compliance) 5. The Contractor's QA Manager sign-off on compliance Appendix 3—Associated Artifacts Description: An extract from the Project Artifact Inventory List of artifacts associated with this Deliverable, and will include but is not limited to the following examples: 1. Artifact Name 2. Associated Parent DEL 3. State Approver 4. SI Point of Contact 5. Review Frequency 6. Submission Frequency 7. Artifact File Format 8. Artifact Location (e.g., SharePoint breadcrumb) 9. Link to artifact

4.4 CODE DEVELOPMENT

The code development phase is used by the Contractor to incorporate changes associated with approved change request and defect corrections. Refer to Appendix A-2, SPECIAL PROVISIONS, A-2.3, SERVICE LEVEL AGREEMENTS & LIQUIDATED DAMAGES, for liquidated damages associated with the code development requirements.

4.4.1 Software Engineering Standards

The Software Engineering Standards (SES) reflect the industry's best practices in software engineering. The standards provide guidance for requirements validation, system design, coding, testing, technology specific construction standards and work products. The SES shall ensure that new system artifacts under development will be consistent with current standards.

The SES shall provide the CalHEERS Project team with sufficient guidance and control points to support production and maintenance of a cohesive, maintainable and standard system.

Table 4-26: Software Engineering Standards (CD-4.4-1)

Req #	SOW Requirement
4.4.1-01 (modified)	The Contractor shall adopt, enhance, deliver, and maintain the Software Engineering Standards, which includes but is not limited to: 1. INTRODUCTION 1.1 Purpose 1.2 List of Reference Documents 1.3 Audience 2. SUMMARY 2.1 Scope 3. APPROACH 4. ASSUMPTIONS, CONSTRAINTS, AND RISKS 4.1 Assumptions 4.2 Constraints 4.3 Risks 5. REQUIREMENTS 6. ROLES AND RESPONSIBILITIES 6.1 Roles and Responsibilities 6.1.1 Contractor Roles and Responsibilities 6.1.2 State Roles and Responsibilities 7. SOFTWARE ENGINEERING PROCESSES 7.1 Change Request Process 7.1.1 Scope Management 7.1.2 Change Request Schedule 7.1.3 Functional and Technical Design Approval Process 7.2 Development Process 7.2.1 Code Review Process 7.2.2 Code Quality Assurance Process 7.2.3 Name Resolution for IP addresses 7.2.4 Coding Standards 7.2.5 Unit Test Guidelines 7.3 Defect Management 7.4 Agile Process 8. GLOSSARY AND ACRONYMS 8.1 New Acronyms and Terms APPENDIX 1: SOW TO DELIVERABLE TRACEABILITY CHECKLIST APPENDIX 2: DELIVERABLE COMPLIANCE AND VALIDATION CHECKLIST APPENDIX 3: ASSOCIATED ARTIFACTS
4.4.1-02 (new)	The Contractor shall only alter or modify this Deliverable's structure or content with the approval of the State Project Director or designee.
4.4.1-03 (existing)	The Contractor shall accurately maintain Automated Code Review Results and deliver those results to the State in an Automated Code Review Results Work Product that includes but is not limited to: • Report(s) with results from development code reviews that identifies software defects and security vulnerabilities.

Req #	SOW Requirement
4.4.1-04 (modified)	The Contractor shall maintain, code and deliver the CalHEERS Application that meets the requirements specified within the Contract, and in accordance with ISO/IEC/IEEE 14764-2006 Software Engineering - Software Life Cycle Processes - Maintenance (Section 6.8.2.3 – Software Detailed Design). As new versions of standards are available, adoption of the new standard will be considered through the change control process and approved by the State Project Director or designee.
4.4.1-05 (existing)	The Contractor shall develop and maintain the Software Engineering Standards (SES) Deliverable, that defines the software engineering and technology specific construction standards, used in development for the CalHEERS system. The deliverable shall also describe the processes used for requirements validation, system design, coding, and testing at the software component level.
4.4.1-06 (new)	The Contractor shall ensure that code changes comply with web accessibility standards of Section 508 of the Rehabilitation Act, WCAG 2.1, and California Government Code Sections 7405, 11135, and 11546.7 to ensure the online application is accessible to all users. As new versions of standards are available, adoption of the new standard will be considered through the change control process and approved by the State Project Director or designee.
4.4.1-07 (new)	The contractor shall update the Software Engineering Standards DEL, to describe process, different times and different levels of code review that are conducted on CalHEERS (e.g., when are full code reviews conducted on a sample of a releases CRs).
4.4.1-08 (new)	The Contractor shall adopt and maintain all Project Artifacts that are associated with this Deliverable in the Project Artifact Inventory and manage them in accordance with the Project Artifact process.
4.4.1-09 (new)	The Contractor shall update or develop the following appendices and attach them to the Software Engineering Standards deliverable: Appendix 1—SOW to Deliverable Traceability Checklist Description: A table where the Contractor identifies the SOW requirements for this Deliverable, as specified within SOW Section 8, DELIVERABLES, and includes but is not limited to: 1. SOW Requirement ID # 2. SOW Requirement Text 3. Requirement Traceability (Contractor identified traceability from the requirements to the Deliverable) 4. Requirement Fulfillment (Define how the Contractor has fulfilled the SOW requirements in the Deliverable) Appendix 2—Deliverable Compliance and Validation Checklist Description: A QA Checklist that includes, but is not limited to: 1. Deliverable Section Number and Title 2. Deliverable Requirement Statement(s) 3. Requirement Completion (How the Contractor has complied with or will comply with the requirement statements within the Deliverable) 4. Validation Method (The method the Contractor used to validate Deliverable compliance) 5. The Contractor's QA Manager sign-off on compliance Appendix 3—Associated Artifacts Description: An extract from the Project Artifact Inventory List of artifacts associated with this Deliverable, and will include but is not limited to the following examples: 1. Artifact Name 2. Associated Parent DEL 3. State Approver 4. SI Point of Contact 5. Review Frequency

Req #	SOW Requirement
	6. Submission Frequency 7. Artifact File Format 8. Artifact Location (e.g., SharePoint breadcrumb) 9. Link to artifact

4.4.2 Software Engineering Standards Execution

Table 4-27: Software Engineering Standards Execution

Req #	SOW Requirement
4.4.2-01 (new)	The Contractor shall staff, manage, lead and execute all Software Engineering Standards activities on CalHEERS as defined in this Statement of Work and in accordance with the CD-4.4-1 – Software Engineering Standards.
4.4.2-02 (existing)	The Contractor shall implement code changes and programs modifications with prior approval from the State and within the specified time period as per the State's guidelines.
4.4.2-03 (existing)	The Contractor shall utilize name resolution instead of hard coded IP addresses where possible.
4.4.2-04 (existing)	To ensure the CR release and defect management, prior to implementing the CR into Production, the Contractor shall have the CR validated and verified through a Code Quality Assurance process to ensure code accuracy and quality.
4.4.2-05 (modified)	The Contractor create and complete a detailed Change Request to ensure better scope management and accurate determination of what will be included in Releases to improve the front and back-end processes of artifact and design documentation management.
4.4.2-06 (new)	The Contractor shall collaborate with the State to develop and maintain any new Project Artifacts necessary to support this section. New artifacts shall be added to the Project Artifacts Repository and managed in accordance with the Project Artifact process.

4.5 SYSTEM REQUIREMENTS MANAGEMENT

This section pertains to the management of system requirements and is not to be confused with the management of requirements for the Contract that is discussed in SOW 3 PROJECT MANAGEMENT REQUIREMENTS.

4.5.1 System Requirements Management Plan

The management of requirements is a discipline that the State expects the Contractor to assist the State in managing. Requirements for the CalHEERS system are at various levels of detail and must be organized and managed properly. This section covers the expectation for requirements management.

Table 4-28: System Requirements Management Plan (CD-4.5-1)

Req #	SOW Requirement
4.5.1-01 (new)	The Contractor shall adopt, enhance, deliver, and maintain the System Requirements Management Plan, which includes but is not limited to: 1. INTRODUCTION 1.1 Purpose 1.2 List of Reference Documents 1.3 Audience 2. SUMMARY 2.1 Scope 2.2 Update Frequency 3. APPROACH

Req #	SOW Requirement
	3.1 Overview of SyRS (Hierarchy Chart) 3.2 Types of Requirements 4. ASSUMPTIONS, CONSTRAINTS, AND RISKS 4.1 Assumptions 4.2 Constraints 4.3 Risks 5. REQUIREMENTS 6. ROLES AND RESPONSIBILITIES 6.1 Contractor Roles and Responsibilities 6.2 State Roles and Responsibilities 7. REQUIREMENTS LIFE CYCLE 7.1 Requirement Initiation 7.1.1 Preparation for Pre-JAD Sessions 7.1.2 Pre-JAD Sessions 7.1.3 JAD Sessions 7.1.4 CRFI Process and Requirement Approval 7.2 Requirement Maintenance 7.2.1 System Requirements Management Tool (SRMT) 7.3 RTM Bi-Weekly Report 7.4 RTM Management 7.4.1 Prior to Implementation 7.4.2 Post Implementation 7.4.3 Business Requirements (BRs) 7.4.4 Non-Functional Requirements (NFRs) 7.5 SyRS Evaluation and Updates Report 8. USER STORY LIFE CYCLE 8.1 HCD User Story Creation 8.2 Agile User Story Initiation 8.2.1 Agile Planning Phase 8.2.2 Agile Discovery Phase 8.2.3 Agile Implementation Phase 8.3 User Story Traceability Matrix (USTM) 8.4 USTM Maintenance 8.5 USTM Bi-Weekly Reporting 9. TOOLS 9.1 EWM 9.2 ALM Requirements Module 9.3 JIRA 9.3.1 HCD use of JIRA 9.3.2 Agile use of Jira 9.4 USTM Report (Excel Spreadsheet) 10. GLOSSARY AND ACRONYMS 10.1 New Acronyms and Terms APPENDIX 1: SOW TO DELIVERABLE TRACEABILITY CHECKLIST APPENDIX 2: DELIVERABLE COMPLIANCE AND VALIDATION CHECKLIST APPENDIX 3: ASSOCIATED ARTIFACTS
4.5.1-02 (new)	The Contractor shall only alter or modify this Deliverable's structure or content with the approval of the State Project Director or designee.
4.5.1-03 (existing)	The Contractor shall develop, deliver, maintain, and execute the System Requirements Management Plan, which shall identify the processes and procedures the Contractor will use to manage the CalHEERS system requirements. The System Requirements Management Plan shall, at a minimum, include the following areas: 1. Tool(s) for managing system requirements and user stories 2. System Requirements Management and Traceability 3. User Story Management and Traceability

Req #	SOW Requirement
	4. Testing Traceability 5. Change Request Traceability
4.5.1-04 (new)	The State identifies and associates the following artifacts to the System Requirements Management Plan. The Contractor shall adopt, update, maintain, and deliver these artifacts in accordance with Appendix 3 of this deliverable including, but not limited to: • SyRS Evaluation and Updates • User Story Traceability Matrix
4.5.1-05 (modified)	The Contractor shall update or develop the following appendices and attach them to the System Requirements Management Plan: Appendix 1—SOW to Deliverable Traceability Checklist Description: A table where the Contractor identifies the SOW requirements for this Deliverable, as specified within SOW Section 8, DELIVERABLES, and includes but is not limited to: 1. SOW Requirement ID # 2. SOW Requirement Text 3. Requirement Traceability (Contractor identified traceability from the requirements to the Deliverable) 4. Requirement Fulfillment (Define how the Contractor has fulfilled the SOW requirements in the Deliverable) Appendix 2—Deliverable Compliance and Validation Checklist Description: A QA Checklist that includes, but is not limited to: 1. Deliverable Section Number and Title 2. Deliverable Requirement Statement(s) 3. Requirement Completion (How the Contractor has complied with or will comply with the requirement statements within the Deliverable) 4. Validation Method (The method the Contractor used to validate Deliverable compliance) 5. The Contractor's QA Manager sign-off on compliance Appendix 3—Associated Artifacts Description: An extract from the Project Artifact Inventory List of artifacts associated with this Deliverable, and will include but is not limited to the following examples: 1. Artifact Name 2. Associated Parent DEL 3. State Approver 4. SI Point of Contact 5. Review Frequency 6. Submission Frequency 7. Artifact File Format 8. Artifact Location (e.g., SharePoint breadcrumb) 9. Link to artifact

4.5.2 System Requirements Validation & Execution

Table 4-29: System Requirements Validation & Execution

Req #	SOW Requirement
4.5.2-01 (new)	The Contractor shall staff, manage, lead and execute all System Requirements Management activities on CalHEERS as defined in this Statement of Work and in accordance with the CD-4.5-1 – System Requirements Management Plan.
4.5.2-02 (existing)	The Contractor shall ensure the requirements are clear, complete, testable, and representative of the business needs.

Req #	SOW Requirement
4.5.2-03 (existing)	The Contractor shall conduct system requirements validation activities for every application release shall at a minimum include: 1. Review of current system documentation, including design documents and manuals 2. Analysis of existing code. 3. Business process analysis including focus groups and surveys. 4. Review of existing and proposed program policies.
4.5.2-04 (modified)	The Contractor shall use the set of system requirements, provided by the Incumbent Contractor and reviewed/approved by the State (towards the end of the Transition-In phase), as the initial base set of requirements to perform the system requirements validation review. Clarifications and refinements to the base set of requirements shall be expected and included in the fixed price estimates.
4.5.2-05 (existing)	The Contractor shall ensure that any new requirements identified during system requirements validation will be controlled via change management and requirements management processes. The System Requirements approved by the State Project Director or designee shall become the updated baseline system requirements against which change control is applied.
4.5.2-06 (new)	The Contractor shall collaborate with the State to develop and maintain any new Project Artifacts necessary to support this section. New artifacts shall be added to the Project Artifacts Repository and managed in accordance with the Project Artifact process.

4.5.3 System Requirements Management Tool

The CalHEERS system requirements and User Stories are what defines and baselines the CalHEERS System. The State desires a common tool where both system requirements and user stories are stored and managed under strict processes. Refer also to SOW 3.13 CalHEERS Project Enterprise Tools for more information regarding tool requirements.

Table 4-30: System Requirements Management Tool

Req #	SOW Requirement
4.5.3-01 (new)	The Contractor shall consolidate, store, and maintain all CalHEERS System Requirements and User Stories in a single System Requirements Management Tool, collaborating with the State on the configuration and implementation timing.

4.5.4 SyRS Evaluation and Updates Report

The SyRS Evaluation and Updates Report summarizes the results of the system requirements validation in accordance with the Project Master Plan.

Table 4-31: SyRS Evaluation and Updates Report

Req #	SOW Requirement
4.5.4-01 (modified)	The Contractor shall develop and deliver a SyRS Evaluation and Updates Report for each feature release. The report shall be produced by exporting the entire set of approved and implemented system requirements from the System Requirements Management Tool, with a filter applied to show all requirements either implemented (as part of the feature release) or impacted (by a priority or maintenance release) since the previously submitted SyRS Evaluation and Updates Report.

4.6 RELEASE MANAGEMENT

Release management is the process of managing, planning, scheduling, and controlling a software build through different stages and environments, including testing and deploying software releases. The Contractor will participate in the release management as described in the following sections.

4.6.1 Release Management Plan

The Release Management Plan identifies release management processes and procedures for CalHEERS during the Maintenance and Operations Phase. The plan provides a framework for the process, procedures and activities that are implemented for each release. The plan also includes the Release Installation Procedures and the Release Back out Procedures.

Table 4-32: Release Management Plan (CD-4.6-1)

Req #	SOW Requirement
4.6.1-01 (modified)	The Contractor shall adopt, enhance, deliver, and maintain the Release Management Plan deliverable, which includes but is not limited to: 1. INTRODUCTION 1.1 Introduction to Release Management Plan 1.2 List of Reference Documents 1.3 Audience 2. SUMMARY 2.1 Scope 3. APPROACH 3.1 Release Management Plan Approach 4. ASSUMPTIONS, CONSTRAINTS, AND RISKS 4.1 Assumptions 4.2 Constraints 4.3 Risks 5. REQUIREMENTS 6. ROLES AND RESPONSIBILITIES 7. TOOLS 8. RELEASE MANAGEMENT 8.1 Release Management 8.2 Inputs to Release Management 8.3 Release Types 8.3.1 Feature Release 8.3.2 Maintenance Release 8.3.3 Priority Release 8.3.3.1 Emergency Priority Release 8.3.3.2 Infrastructure Maintenance: Soft Launch Priority Release 8.3.4 Data Warehouse Release 8.3.5 Agile Release 8.4 Release Naming Convention 8.5 Release Capacity Management 8.6 Environment Capacity Management 8.7 Release Schedule Management 8.7.1 Feature/Maintenance Release 8.7.2 Data Warehouse Expedited Sprint Release 8.7.3 Priority Release 8.7.4 Agile Release (Proposed) 8.8 Release Readiness 8.8.1 Job Aids 8.8.2 PPT Presentation

Req #	SOW Requirement
	8.8.3 Webinars 8.8.4 Release Notes 8.9 Testing Release Content 8.10 Production Readiness Procedures 8.11 Deployment Release Plan 8.12 Outage Requirements 8.13 Release Go/No-Go Process 8.13.1 Deployment Window Approval 8.13.2 Technical Go/No-Go 8.13.2.1 Go/No-Go Meeting 8.13.2.2 Go/No-Go Email 8.13.2.2.1 Go/No-Go Infrastructure Maintenance Soft Launch Priority Release Email 8.13.2.3 Go/No-Go Data Warehouse Demo 8.13.2.4 Go/No-Go Agile Release Demo 8.13.3 Executive Go/No-Go for Feature Releases 8.14 Deploying Release Content 8.15 Production Validation 8.15.1 UAT/Sponsor Validation 8.15.2 SAWS Validation 8.15.3 Post Deployment Support Validation 8.16 Meetings and Reports 8.16.1 Release Deployment Bridges 8.16.2 Notifications 8.16.3 Weekly Directors Report Preparation Meeting 8.16.4 Release Review and Defect Triage Meeting 8.16.5 Weekly SAWS Integration Meeting 8.16.6 R XX.X UAT Biweekly Checkpoint Meeting 8.16.7 Production/Non-Production Activities Review Meeting 8.16.8 Change Advisory Board Meeting 8.16.9 Weekly Software Release Work Plan Meeting 8.16.10 SAWS Test Daily Connect Meeting 8.16.11 Ad-hoc Meetings 8.16.12 Business Product Deliverable 8.16.13 Post Implementation Review 8.16.14 CalHEERS Top 20 Error Codes Report 8.16.15 SAWS Top Errors Report 8.16.16 Cost Reporting/ Release True Up Process 9 GLOSSARY AND ACRONYMS 9.1 New Acronyms and Terms APPENDIX 1: SOW TO DELIVERABLE TRACEABILITY CHECKLIST APPENDIX 2: DELIVERABLE COMPLIANCE AND VALIDATION CHECKLIST APPENDIX 3: ASSOCIATED ARTIFACTS APPENDIX 4: IEEE STANDARDS MAPPING
4.6.1-02 (new)	The Contractor shall only alter or modify this Deliverable's structure or content with the approval of the State Project Director or designee.
4.6.1-03 (modified)	The Contractor shall take over, update, deliver, maintain and execute the Release Management Plan in accordance with current ISO/IEC/IEEE Standard 15289-2015 (Systems and Software Engineering - Life Cycle Information Items, Section 10.61 – Release Plan). (Technical Preparation and Organizational Preparation) which includes but is not limited to: 1. Pre-Implementation Review 2. System Development Planning 3. System Requirements Analysis and Validation 4. Current and Accurate Detailed System Design

Req #	SOW Requirement
	5. Current and Accurate Coding and Documentation 6. System Integration Test (SIT) 7. User Acceptance Testing (UAT) as appropriate 8. Training as appropriate 9. Deployment and Production Release 10. Post Implementation Review As new versions of standards are available, adoption of the new standard will be considered through the change control process and approved by the State Project Director or designee.
4.6.1-04 (modified)	The Contractor shall create, update, implement, and maintain a life cycle methodology used for Release Planning (Technical Preparation and Organizational Preparation) which includes but is not limited to: 1. Capacity Planning 2. Release Management Facilitation and Collaboration with other impacted Change Management/Change Support activities, workflows and Deliverables
4.6.1-05 (new)	The State identifies and associates the following artifacts to the Release Management Plan. The Contractor shall adopt, update, maintain, and deliver these artifacts in accordance with Appendix 3 of this deliverable including, but not limited to: • Pre-Release Webinar • Job Aid Review Process • Process Overview for Functional Support - Post Go Live Feature Release • Release Management Process • Release Notes Process • Release Notes Template_ADA Compliance • Release_Notes_Formatting • SOP for SAWS Communication for Priority Release
4.6.1-06 (new)	The Contractor shall adopt and maintain all Project Artifacts that are associated with this Deliverable in the Project Artifact Inventory and manage them in accordance with the Project Artifact process.
4.6.1-07 (new)	The Contractor shall update or develop the following appendices and attach them to the Release Management Plan deliverable: Appendix 1—SOW to Deliverable Traceability Checklist Description: A table where the Contractor identifies the SOW requirements for this Deliverable, as specified within SOW Section 8, DELIVERABLES, and includes but is not limited to: 1. SOW Requirement ID # 2. SOW Requirement Text 3. Requirement Traceability (Contractor identified traceability from the requirements to the Deliverable) 4. Requirement Fulfillment (Define how the Contractor has fulfilled the SOW requirements in the Deliverable) Appendix 2—Deliverable Compliance and Validation Checklist Description: A QA Checklist that includes, but is not limited to: 1. Deliverable Section Number and Title 2. Deliverable Requirement Statement(s) 3. Requirement Completion (How the Contractor has complied with or will comply with the requirement statements within the Deliverable) 4. Validation Method (The method the Contractor used to validate Deliverable compliance) 5. The Contractor's QA Manager sign-off on compliance Appendix 3—Associated Artifacts Description: An extract from the Project Artifact Inventory List of artifacts associated with

Req #	SOW Requirement
	this Deliverable, and will include but is not limited to the following examples: 1. Artifact Name 2. Associated Parent DEL 3. State Approver 4. SI Point of Contact 5. Review Frequency 6. Submission Frequency 7. Artifact File Format 8. Artifact Location (e.g., SharePoint breadcrumb) 9. Link to artifact

4.6.2 Release Management Execution

Table 4-33: Release Management Execution

Req #	SOW Requirement
4.6.2-01 (new)	The Contractor shall staff, manage, lead and execute all Release Management activities on CalHEERS as defined in this Statement of Work and in accordance with the CD-4.6-1 – Release Management Plan.
4.6.2-02 (existing)	The Contractor shall collect and document all issues and concerns that the users encounter with the Release for six (6) months after the Implementation date and report them in the Project tracking System.
4.6.2-03 (existing)	The Contractor shall be responsible for making recommendations for maximizing the effectiveness of the Release Schedule on at least an annual basis. The Contractor must be responsive to the State's request for modifications to the Release Schedule to address specific priorities or issues.
4.6.2-04 (modified)	The Contractor shall be responsible for working closely and cooperatively with the State to plan for and prioritize Application Releases and Technical Changes.
4.6.2-05 (new)	The Contractor shall, in collaboration with the State, develop, enhance, deliver, and maintain a Change Request Roadmap that tracks all CR's designated as either Functional or Technical within the Change Request Tracking Tool (EWM).
4.6.2-06 (new)	The Contractor shall facilitate a Release Management planning meeting that wholistically focuses on all changes to CalHEERS, including Functional and Technical Change Requests (CRs), and review project roadmaps, as well as discuss potential impacts and risks.
4.6.2-07 (existing)	The Contractor shall be responsible for working closely and cooperatively with the State in providing notification of Release content. Notification shall include but not be limited to: 1. Job Aids 2. Webcasts 3. Release Notes
4.6.2-08 (existing)	The Contractor shall hold and facilitate, with State participation, a Release Initiation and Planning Meeting in accordance with the Release Management Plan, for every release.
4.6.2-09 (existing)	The Contractor shall conduct all release planning, management and execution activities according to the Release Management Plan.
4.6.2-10 (modified)	If the Deliverables and Services required for Go-Live of a Release, the System, or the Hosting Services have received Acceptance, but the State decides to delay Go-Live for reasons beyond Contractor's reasonable control, and there are cost or Schedule impacts from such delay on the Contractor, a CR shall accurately be issued pursuant to Special Provisions.
4.6.2-11 (existing)	When the State decides to Go-Live for a Release, the System and the Hosting Services, Contractor shall accurately provide Services for the State as described in this Contract.
4.6.2-12 (existing)	For releases, as described in the Release Management Plan, the Contractor shall further divide and track the release into sub-phases for requirements validation, design, coding, testing, training, implementation and post implementation review.

Req #	SOW Requirement
4.6.2-13 (existing)	The Contractor shall tailor release planning to combine the milestones for project initiation, and each subsequent phase of the system development life cycle, with approval from the State Project Director or designee.
4.6.2-14 (existing)	As part of the Release Readiness Review, the Contractor shall provide, and conduct a walkthrough of, the release-applicable deliverables, in accordance with the Release Management Plan.
4.6.2-15 (existing)	The Contractor shall track and report to the State Project Director or designee the actual cost of each release and the cumulative cost of all releases for the year, calendar and fiscal, and compare to the Contract annual maintenance appropriation to ensure the annual appropriation is not exceeded.
4.6.2-16 (modified)	The Contractor shall conduct high-level walkthroughs, with State participation if requested, to help evaluate the software products in accordance with IEEE 1028-2008 - IEEE Standard for Software Reviews and Audits (Section 7 - Walkthroughs). As new versions of standards are available, adoption of the new standard will be considered through the change control process and approved by the State Project Director or designee.
4.6.2-17 (existing)	The Contractor shall hold and facilitate, with State participation, Monthly Release Reviews in accordance with the Release Management Plan, the Contractor shall include, but not be limited to, the following: 1. Release Readiness Review 2. Post Statewide Implementation Review
4.6.2-18 (existing)	The Contractor shall hold and facilitate, with State participation, Quarterly Release Reviews in accordance with the Release Management Plan, the Contractor shall include the following: 1. Release Analysis and Design Review 2. Modification Development and Test Readiness Review 3. Release Test Review and Release Readiness Review 4. Post Statewide Implementation Review
4.6.2-19 (new)	The Contractor shall collaborate with the State to develop and maintain any new Project Artifacts necessary to support this section. New artifacts shall be added to the Project Artifacts Repository and managed in accordance with the Project Artifact process.

4.6.3 Pre-Release Webinar

Table 4-34: Pre-Release Webinar

Req #	SOW Requirement
4.6.3-01 (existing)	The Contractor shall provide a pre-release webinar no less than ten (10) Days prior to a Release.

4.6.4 Source Code Implementation

Table 4-35: Source Code Implementation

Req #	SOW Requirement
4.6.4-01 (existing)	The Contractor shall deploy code and data in accordance with an approved Release Schedule, unless the State identifies a critical need for an additional emergency/priority Release.

4.6.5 Business Product Deliverable

Table 4-36: Business Product Deliverable (CD-4.6-2)

Req #	SOW Requirement
4.6.5-01 (modified)	The Contractor shall adopt, enhance, deliver, and maintain the Business Product Deliverable, which includes but is not limited to: 1. INTRODUCTION 1.1 Purpose 1.2 List of Reference Documents 1.3 Audience 2. SUMMARY 3. APPROACH 4. ASSUMPTIONS, CONSTRAINTS AND RISKS 4.1 Assumptions 4.2 Constraints 4.3 Risks 5. REQUIREMENTS 6. ROLES AND RESPONSIBILITIES 6.1 Roles and Responsibilities 6.1.1 Contractor Roles and Responsibilities 6.1.2 State Roles and Responsibilities 7. BUSINESS PRODUCTS 8. GLOSSARY AND ACRONYMS 8.1 New Acronyms and Terms APPENDIX 1: SOW TO DELIVERABLE TRACEABILITY CHECKLIST APPENDIX 2: DELIVERABLE COMPLIANCE AND VALIDATION CHECKLIST APPENDIX 3: ASSOCIATED ARTIFACTS
4.6.5-02 (new)	The Contractor shall only alter or modify this Deliverable's structure or content with the approval of the State Project Director or designee.
4.6.5-03 (new)	The Contractor shall adopt and maintain all Project Artifacts that are associated with this Deliverable in the Project Artifact Inventory and manage them in accordance with the Project Artifact process.
4.6.5-04 (new)	The Contractor shall update or develop the following appendices and attach them to the Business Product Deliverable: Appendix 1–SOW to Deliverable Traceability Checklist Description: A table where the Contractor identifies the SOW requirements for this Deliverable, as specified within SOW Section 8, DELIVERABLES, and includes but is not limited to: 1. SOW Requirement ID # 2. SOW Requirement Text 3. Requirement Traceability (Contractor identified traceability from the requirements to the Deliverable) 4. Requirement Fulfillment (Define how the Contractor has fulfilled the SOW requirements in the Deliverable) Appendix 2–Deliverable Compliance and Validation Checklist Description: A QA Checklist that includes, but is not limited to: 5. Deliverable Section Number and Title 6. Deliverable Requirement Statement(s) 7. Requirement Completion (How the Contractor has complied with or will comply with the requirement statements within the Deliverable) 8. Validation Method (The method the Contractor used to validate Deliverable compliance) 9. The Contractor's QA Manager sign-off on compliance

Req #	SOW Requirement
	Appendix 3—Associated Artifacts Description: An extract from the Project Artifact Inventory List of artifacts associated with this Deliverable, and will include but is not limited to the following examples: 1. Artifact Name 2. Associated Parent DEL 3. State Approver 4. SI Point of Contact 5. Review Frequency 6. Submission Frequency 7. Artifact File Format 8. Artifact Location (e.g., SharePoint breadcrumb) 9. Link to artifact

4.6.6 Business Product Execution

Table 4-37: Business Product Execution

Req #	SOW Requirement
4.6.6-01 (new)	The Contractor shall staff, manage, lead and execute all Business Product Deliverable activities on CalHEERS as defined in this Statement of Work and in accordance with the CD-4.6-2 – Business Product Deliverable.
4.6.6-02 (new)	The Contractor shall collaborate with the State to develop and maintain any new Project Artifacts necessary to support this section. New artifacts shall be added to the Project Artifacts Repository and managed in accordance with the Project Artifact process.

4.6.7 Release Based Training

The following requirements apply to the Contractor's release based training responsibilities.

Table 4-38: Release Based Training

Req #	SOW Requirement
4.6.7-01 (existing)	The Contractor shall coordinate with the State regarding the training materials needing to be developed by the Contractor for each release.
4.6.7-02 (modified)	The Contractor shall provide all final training materials thirty (30) Business Days prior to the implementation date of each release.
4.6.7-03 (existing)	The Contractor shall develop and provide web-based training sessions focused on specific, new or existing CalHEERS functionality and processes for each major release.
4.6.7-04 (existing)	The Contractor shall develop and provide webinar style training sessions focused on specific, new or existing CalHEERS functionality and processes specific to various user groups (e.g. service center representatives, count eligibility staff) as defined by the requirements of the CR.
4.6.7-05 (existing)	The Contractor shall provide training on the current application version in production or an upcoming release, if directed by the State Project Director or designee.

4.7 ORGANIZATION & BUSINESS CHANGE MANAGEMENT

The purpose of the Organizational and Business Change Management process is to assist the users in planning and smoothly implementing changes to their organization and business processes. For large or complex changes where the State agrees on the need, the Contractor shall perform the services described in this section.

4.7.1 Organizational and Business Change Management Plan

The Organizational and Business Change Management Plan shall provide the approach and methodology for analyzing, documenting, and strategizing for impacts to the CalHEERS Project at both the project level and change request level (both release and non-release).

Table 4-39: Organizational and Business Change Management Plan (CD-4.7-1)

Req #	SOW Requirement
4.7.1-01 (modified)	The Contractor shall adopt, enhance, deliver, and maintain the Business and Organizational Change Management Plan, which includes but is not limited to: 1. INTRODUCTION 1.1 Purpose 1.2 List of Reference Documents 1.3 Audience 2. SUMMARY 2.1 Scope 3. APPROACH 4. ASSUMPTIONS, CONSTRAINTS, AND RISKS 4.1 Assumptions 4.2 Constraints 4.3 Risks 5. REQUIREMENTS 6. CHANGE MANAGEMENT METHODOLOGY 6.1 Executive Summary 6.2 Overview 6.3 Methodology 6.4 Lessons Learned 7. ORGANIZATIONAL CHANGE MANAGEMENT 7.1 OCM Approach 7.2 Approach to Analyze Project Changes and Impacts 7.3 Approach for Defining Project Change Support Strategies 7.4 Roles and Responsibilities 7.5 Tools and Templates for Analysis 7.5.1 Audience Analysis 7.5.2 OCM Tracking Tool 8. BUSINESS CHANGE MANAGEMENT 8.1 BCM Approach 8.2 Approach to Analyze Business Process Impacts 8.3 Approach to Defining Change Readiness Strategies 8.4 Roles and Responsibilities 8.5 Tools, Templates, Techniques, and Standards for Analysis 8.6 Change Readiness Plan 9. GLOSSARY AND ACRONYMS 9.1 New Acronyms and Terms APPENDIX 1: SOW TO DELIVERABLE TRACEABILITY CHECKLIST APPENDIX 2: DELIVERABLE COMPLIANCE AND VALIDATION CHECKLIST APPENDIX 3: ASSOCIATED ARTIFACTS

Req #	SOW Requirement
4.7.1-02 (new)	The Contractor shall only alter or modify this Deliverable's structure or content with the approval of the State Project Director or designee.
4.7.1-03 (modified)	The Contractor shall identify the methodology, strategies, tools, techniques, roles and responsibilities and standards to be used, and how they relation to the Contractor's organization change management team's activities.
4.7.1-04 (modified)	The Contractor shall coordinate with the State to prepare, develop, deliver, maintain and execute an Organizational and Business Change Management methodology.
4.7.1-05 (modified)	The Contractor shall update the Organizational and Business Change Management Plan annually, documenting the year's activities against the plan, recording lessons learned, and updating the plan for the next year.
4.7.1-06 (modified)	The Contractor shall develop, deliver, maintain, and execute a business change management methodology for change requests (release and non-release) on CalHEERS. This methodology must include, but not be limited to the following information: 1. Business change management approach 2. Approach to analyze business process impacts 3. Approach to defining change readiness strategies 4. Roles and responsibilities 5. Tools, templates, techniques, and standards for analysis 6. Relationship & integration with change readiness planning 7. Activities and feedback mechanisms
4.7.1-07 (modified)	The Contractor shall develop, deliver, maintain, and execute the organizational change management methodology that addresses non-change request project-based changes, which shall include at a minimum the following: 1. Executive summary 2. Overview 3. Organizational change management methodology, including the Prosci methodology used at a minimum for the shift from Project to Product Management 4. Approach to analyze project changes and impacts 5. Approach to defining project change support services 6. Roles and responsibilities 7. Tools and templates for analysis 8. Activities and feedback mechanisms
4.7.1-08 (new)	The State identifies and associates the following artifacts to the Organizational and Business Change Management Plan. The Contractor shall adopt, update, maintain, and deliver these artifacts in accordance with Appendix 3 of this deliverable including, but not limited to: • CalHEERS Education Sessions Process Guide • CalHEERS Virtual Support Issue Documentation Process
4.7.1-09 (new)	The Contractor shall adopt and maintain all Project Artifacts that are associated with this Deliverable in the Project Artifact Inventory and manage them in accordance with the Project Artifact process.
4.7.1-10 (modified)	The Contractor shall update or develop the following appendices and attach them to the Business and Organizational Change Management Plan: Appendix 1—SOW to Deliverable Traceability Checklist Description: A table where the Contractor identifies the SOW requirements for this Deliverable, as specified within SOW Section 8, DELIVERABLES, and includes but is not limited to: 1. SOW Requirement ID # 2. SOW Requirement Text 3. Requirement Traceability (Contractor identified traceability from the requirements to the Deliverable) 4. Requirement Fulfillment (Define how the Contractor has fulfilled the SOW requirements in the Deliverable)

Req #	SOW Requirement
	Appendix 2—Deliverable Compliance and Validation Checklist Description: A QA Checklist that includes, but is not limited to: 1. Deliverable Section Number and Title 2. Deliverable Requirement Statement(s) 3. Requirement Completion (How the Contractor has complied with or will comply with the requirement statements within the Deliverable) 4. Validation Method (The method the Contractor used to validate Deliverable compliance) 5. The Contractor's QA Manager sign-off on compliance Appendix 3—Associated Artifacts Description: An extract from the Project Artifact Inventory List of artifacts associated with this Deliverable, and will include but is not limited to the following examples: 1. Artifact Name 2. Associated Parent DEL 3. State Approver 4. SI Point of Contact 5. Review Frequency 6. Submission Frequency 7. Artifact File Format 8. Artifact Location (e.g., SharePoint breadcrumb) 9. Link to artifact

4.7.2 Organizational and Business Change Management Execution

Table 4-40: Organizational and Business Change Management Execution

Req #	SOW Requirement
4.7.2-01 (new)	The Contractor shall staff, manage, lead and execute Organizational Business Change Management activities on CalHEERS as defined in this Statement of Work and in accordance with the CD-4.7-1 – Organizational and Business Change Management Plan.
4.7.2-02 (modified)	The Contractor shall provide a Business Process Management System to design, implement and manage the CalHEERS Business Process Management lifecycle that includes but is not limited to the following functions: 1. Analyze 2. Model 3. Design 4. Build 5. Test 6. Deploy 7. Manage 8. Monitor
4.7.2-03 (modified)	The Contractor shall design, document and maintain the CalHEERS Business Process Models, that includes but is not limited to each of the following business functions: 1. Eligibility and Enrollment 2. Plan Management 3. Financial Management 4. Consumer Assistance 5. Reports and Notices 6. Interfaces

Req #	SOW Requirement
4.7.2-04 (existing)	The Contractor shall define and implement an end-to-end Service Analysis and Design Methodology process for Business Process Analysis and Modeling, Service Identification and Specification, based on the following standards, processes, and best practices, including but not limited to: 1. SOA Architectural Styles 2. Service Oriented Modeling and Architecture (SOMA) 3. Model Driven Architecture (MDA) 4. XML Schema design best practices
4.7.2-05 (existing)	The Contractor shall provide and implement an industry standard Business Rules Management System (BRMS) for the maintenance of CalHEERS business rules.
4.7.2-06 (existing)	The Contractor shall implement a single centralized business rules repository in a consistent, standards-based, human readable format.
4.7.2-07 (existing)	The Contractor shall report business change management status as part of the CalHEERS SDMO Status Report and weekly project status meetings.
4.7.2-08 (new)	The Contractor shall collaborate with the State to develop and maintain any new Project Artifacts necessary to support this section. New artifacts shall be added to the Project Artifacts Repository and managed in accordance with the Project Artifact process.

4.7.3 Organizational Change Management Tracking Tool

Table 4-41: Organizational Change Management Tracking Tool (CD-4.7-2)

Req #	SOW Requirement
4.7.3-01 (modified)	The Contractor shall provide an OCM Tracking Tool to manages OCM related data and support change support strategies on CalHEERS.

4.8 TESTING

The CalHEERS System is tested in stages to ensure the number of variables is kept to a minimum in both the application and test environment for each stage of testing. Additional development system(s) may be used as necessary. Testing starts with the evaluation of the simplest element, a unit of software in a test environment, and progresses to the most complex, the full system in the production-equivalent environment. With this in mind, the types of testing include, but not limited to, the following:

- Software Unit and Component Testing
- Integration Testing
- Functional & Security Testing
- System Performance Testing
- Regression Testing
- UAT

Testing on CalHEERS is also done with differing types of test data, as identified below:

- Artificial – Data created to follow a code path or test specific test cases.
- Simulated – Data created to model real data, including A/B testing.
- Real – Data that was processed on the production system.

4.8.1 Test and Evaluation Master Plan

The Test and Evaluation Master Plan (TEMP) documents the overall test and evaluation strategy for CalHEERS, including its structure and objectives, based on current IEEE standards for Software Test Methodology. The TEMP provides a framework within which to generate detailed test and evaluation plans, and it documents the high-level schedule, roles and responsibilities, and resource requirements associated with the test and evaluation function. As

new versions of standards are available, adoption of the new standard will be considered through the change control process and approved by the State Project Director or designee.

The TEMP focuses on the overall structure, major elements, and objectives of the test and evaluation program. Release specific test documentation will be included in the Release Test Plan. The Defect Management Process resides in the TEMP and applies to defects in both production and nonproduction environments.

Table 4-42: Test and Evaluation Master Plan (CD-4.8-1)

Req #	SOW Requirement
4.8.1-01 (modified)	The Contractor shall take over, adopt, enhance, deliver, and maintain the Test and Evaluation Master Plan (TEMP), which includes but is not limited to: 1. INTRODUCTION 1.1 Purpose 1.2 List of Reference Documents 1.3 Audience 2. SUMMARY 2.1 Scope 3. APPROACH 3.1 Test and Evaluation Master Plan Approach 3.2 CalHEERS Software Testing Timeline 3.3 Test Schedule and Milestones 4. ASSUMPTIONS, CONSTRAINTS, AND RISKS 4.1 Assumptions 4.2 Constraints 4.3 Risks 5. REQUIREMENTS 6. ROLES AND RESPONSIBILITIES 6.1 Contractor Roles and Responsibilities 6.2 State Roles and Responsibilities 6.3 External Integration Partners Roles and Responsibilities 6.4 IV&V Roles and Responsibilities 7. TESTING STRATEGY 7.1 Test Planning 7.2 Test Environments 7.3 Test Data 7.3.1 Centralized Test Data Management 7.3.2 Multiple Data Sources 7.4 Test Tools 7.5 Test Terms 7.6 Test Design and Review 7.7 Test Execution 7.8 Test Automation 7.9 Test Reporting 7.9.1 Daily Status Reporting 7.9.2 Ad Hoc Reports 7.10 Test Completeness 7.11 Family Planning, Access, Care, and Treatment (Family PACT) 7.12 Usability Testing 8. TESTING PHASES 8.1 Unit Testing 8.1.1 Unit Test Objective/Focus 8.1.2 Unit Test Preparation 8.1.3 Unit Test Execution 8.1.4 Unit Test Evaluation

Req #	SOW Requirement
	8.1.5 Unit Test Outputs/Deliverables 8.1.6 Unit Test Entry/Exit Criteria 8.2 Assembly Testing 8.2.1 Assembly Test Objective/Focus 8.2.2 What is not included in Assembly Testing? 8.2.3 Assembly Test Preparation 8.2.4 Assembly Test Execution 8.2.5 Assembly Test Evaluation 8.2.6 Assembly Test Outputs/Deliverables 8.2.7 Assembly Test Entry/Exit Criteria 8.3 System Testing 8.3.1 System Test Objective/Focus 8.3.2 System Test Preparation 8.3.3 System Test Execution 8.3.4 System Test Evaluation 8.3.5 System Test Outputs/Deliverables 8.3.6 System Test Entry/Exit Criteria 8.4 Integration Testing 8.4.1 Integration Test Objective/Focus 8.4.2 Integration Partners 8.4.3 Integration Test Outputs/Deliverables 8.4.4 Integration Test Entry/Exit Criteria 8.5 Section 508 Compliance Testing 8.5.1 Section 508 Test Objective/Focus 8.5.2 Section 508 Test Preparation 8.5.3 Section 508 Test Execution 8.5.4 Section 508 Test Evaluation 8.5.5 Section 508 Test Outputs/Deliverables 8.5.6 Section 508 Test Entry/Exit Criteria 8.6 ETL/Data Warehouse Testing 8.6.1 ETL/Data Warehouse Test Objective/Focus 8.6.2 ETL/Data Warehouse Test Preparation 8.6.3 ETL/Data Warehouse Test Execution 8.6.4 ETL/Data Warehouse Test Evaluation 8.6.5 ETL/Data Warehouse Test Outputs/Deliverables 8.6.6 ETL/Data Warehouse Test Entry/Exit Criteria 8.7 Performance Testing 8.7.1 Performance Test Objective/Focus 8.7.2 Performance Test Preparation 8.7.3 Performance Test Execution 8.7.4 Performance Test Evaluation 8.7.5 Performance Test Outputs/Deliverables 8.7.6 Performance Test Entry/Exit Criteria 8.8 Security Testing 8.8.1 Security Test Objective/Focus 8.8.2 Security Test Preparation 8.8.3 Security Test Execution 8.8.4 Security Test Evaluation 8.8.5 Security Test Outputs/Deliverables 8.8.6 Security Test Entry/Exit Criteria 8.9 Build Validation Testing 8.9.1 Build Validation Test Objective/Focus 8.9.2 Build Validation Test Preparation 8.9.3 Build Validation Test Execution 8.9.4 Build Validation Test Evaluation 8.9.5 Build Validation Test Outputs/Deliverables

Req #	SOW Requirement
	8.9.6 Build Validation Test Entry/Exit Criteria 8.10 Regression (Manual and Automation) Testing 8.10.1 Regression Test Objective/Focus 8.10.2 Regression Test Preparation 8.10.3 Regression Test Execution 8.10.4 Regression Test Evaluation 8.10.5 Regression Test Outputs/Deliverables 8.10.6 Regression Test Entry/Exit Criteria 8.11 User Acceptance Testing 8.11.1 User Acceptance Test Objective/Focus 8.11.2 User Acceptance Test Preparation 8.11.3 User Acceptance Test Execution 8.11.4 User Acceptance Test Outputs/Deliverables 8.11.5 User Acceptance Test Evaluation 8.11.6 User Acceptance Test Entry/Exit Criteria 9. SUSPENSION/RESUMPTION CRITERIA 10. DEFECT TRACKING AND REPORTING 11. GLOSSARY AND ACRONYMS 11.1 New Terms and Acronyms APPENDIX 1: SOW TO DELIVERABLE TRACEABILITY CHECKLIST APPENDIX 2: DELIVERABLE COMPLIANCE AND VALIDATION CHECKLIST APPENDIX 3: ASSOCIATED ARTIFACTS APPENDIX 4: ISO/IEC/IEEE 29119-3 TO DELIVERABLE TRACEABILITY CHECKLIST
4.8.1-02 (new)	The Contractor shall only alter or modify this Deliverable's structure or content with the approval of the State Project Director or designee.
4.8.1-03 (existing)	The Contractor shall provide a TEMP that documents the high-level schedule, roles and responsibilities, and resource requirements associated with the test and evaluation function.
4.8.1-04 (modified)	The Contractor shall maintain the TEMP in accordance with ISO/IEC/IEEE 29119-3, Software and systems engineering – Software Testing, Part 3: Test Documentation (Section 6.2 - Test Plan) , or more recent version as directed under the Special Provisions of this contract.
4.8.1-05 (new)	The Contractor shall incorporate into the TEMP (and Release Plans)- Planning and execution of routine web accessibility testing, including the use of screen reading software and other assistive technologies.
4.8.1-06 (new)	The Contractor shall incorporate into the TEMP (and Release Plans)- First-pass testing within the System and UAT Testing phases, including reporting the % script pass data to the State Project Director or designee on an ongoing basis.
4.8.1-07 (new)	The Contractor shall collaborate with the State and Sponsors to incorporate into the TEMP (and Release Plans)- Script writing guidelines for such things as but not limited to: • System test script writing and artifacts requirements for witness testing. • Sponsor input regarding the format for all UAT test scripts resulting in test scripts having uniformity, consistency with expectations, and • Tests scripts being created with deadlines and ready at least five business days before tests are due to be completed by the State and Sponsor testers.
4.8.1-08 (new)	The Contractor shall collaborate with the State and Sponsors to incorporate into the TEMP (and Release Plans)- Additional measurable steps in the schedule/release guidelines process that ensure that for each CR, the Contractor has adequate resource coverage and expertise for on-shore teams.
4.8.1-09 (new)	The Contractor shall collaborate with the State and incorporate into the TEMP (and Release Plans) test script automation development, automated test percentage goals, changes, and script maintenance as requested by the State. Additionally, the Contractor shall change/add/update automation scripts as directed by the State.
4.8.1-10 (new)	Test Data Support- The Contractor shall update the TEMP (CD-4.8-1), to include a new subsection Test Data for Covered California Groups. In this new subsection, the

Req #	SOW Requirement
	Contractor shall, in collaboration with the State, include the assessment, development, and support processes for providing CovCA Groups such as Covered California University (CCU), Marketing, Policy, Eligibility & Research Division (PERD), with necessary test data to support on-going CalHEERS Releases, and other CalHEERS-specific testing data needs. The TEMP shall (in its entirety) be inclusive of infrastructure, processes, and approach, that also supports the test data needs of the requesting CovCA Group.
4.8.1-11 (new)	DHCS Test Data Support- The Contractor shall update the TEMP (CD-4.8-1), to include a new subsection Test Data for DHCS. In this new subsection, the Contractor shall, in collaboration with the State, include the assessment, development, and support processes for providing DHCS Testers with necessary test data to support on-going CalHEERS Releases, and other CalHEERS-specific testing data needs. The TEMP shall (in its entirety) be inclusive of infrastructure, processes, and approach, that also supports the test data needs of DHCS Testers.
4.8.1-12 (new)	Test Data Description and Details- The Contractor shall update the TEMP (CD-4.8-1), to incorporate the following requirement: The Contractor shall (for all releases involving test using test data) include a summary of the test data used to perform the test and the environment where the testing is to be performed. The test data identified must be described in such a manner that the State can determine that test data preparation is complete, accurate, and sufficient to validate testing in the specified environment. The Contractor shall collaborate with the State to develop a process by which test data will be determined, created, mapped, and utilized to ensure coverage of testing is complete, accurate, and sufficient to validate testing for all environments using the test data. The Contractor shall deliver the Test Data Description and Details in subsection 9 – Test Data of each CD-4.8-2 - Release Test Plan.
4.8.1-13 (new)	The State identifies and associates the following artifacts to the Test and Evaluation Master Plan. The Contractor shall adopt, update, maintain, and deliver these artifacts in accordance with Appendix 3 of this deliverable including, but not limited to: • UAT Checklist for Change Request • UAT Desk Reference Manual • UAT- How to Write a Defect in ALM • Regression Test Coverage Report • Copy of Ad hoc Test Template • Test cases for Sponsors Template • UAT Screenshot template
4.8.1-14 (new)	Regression Testing – The Contractor shall update the TEMP (CD-4.8-1), to address the following requirement: The Contractor shall develop and maintain an automated regression test suite that continuously expands to cover all existing, modified, and newly implemented system functionalities, including integrations, security updates, and performance optimizations.
4.8.1-15 (new)	The Contractor shall align the regression test suite with the evolving system architecture and business requirements to ensure complete system stability with each software release.
4.8.1-16 (new)	The Contractor shall adopt and maintain all Project Artifacts that are associated with this Deliverable in the Project Artifact Inventory and manage them in accordance with the Project Artifact process.
4.8.1-17 (new)	The Contractor shall update the following appendices and attach them to the Test and Evaluation Master Plan deliverable: Appendix 1–SOW to Deliverable Traceability Checklist

Req #	SOW Requirement
	Description: A table where the Contractor identifies the SOW requirements for this Deliverable, as specified within SOW Section 8, DELIVERABLES, and includes but is not limited to: 1. SOW Requirement ID # 2. SOW Requirement Text 3. Requirement Traceability (Contractor identified traceability from the requirements to the Deliverable) 4. Requirement Fulfillment (Define how the Contractor has fulfilled the SOW requirements in the Deliverable) Appendix 2—Deliverable Compliance and Validation Checklist Description: A QA Checklist that includes, but is not limited to: 1. Deliverable Section Number and Title 2. Deliverable Requirement Statement(s) 3. Requirement Completion (How the Contractor has complied with or will comply with the requirement statements within the Deliverable) 4. Validation Method (The method the Contractor used to validate Deliverable compliance) 5. The Contractor's QA Manager sign-off on compliance Appendix 3—Associated Artifacts Description: An extract from the Project Artifact Inventory List of artifacts associated with this Deliverable, and will include but is not limited to the following examples: 1. Artifact Name 2. Associated Parent DEL 3. State Approver 4. SI Point of Contact 5. Review Frequency 6. Submission Frequency 7. Artifact File Format 8. Artifact Location (e.g., SharePoint breadcrumb) 9. Link to artifact

4.8.2 Test and Evaluation Master Plan Execution

Table 4-43: Test and Evaluation Master Plan Execution

Req #	SOW Requirement
4.8.2-01 (new)	The Contractor shall staff, manage, lead and execute all Testing activities on CalHEERS as defined in this Statement of Work and in accordance with the CD-4.8-1 – Test and Evaluation Master Plan.
4.8.2-02 (new)	The Contractor shall make available, for use by the State, all Contractor Test Tools to support test packet review and validation and User Acceptance Testing efforts. All web-based testing tools shall be accessible via the State desired set of web browsers.
4.8.2-03 (new)	The Contractor shall collaborate with the State to develop and maintain any new Project Artifacts necessary to support this section. New artifacts shall be added to the Project Artifacts Repository and managed in accordance with the Project Artifact process.

4.8.3 System Test

Table 4-44: System Test

Req #	SOW Requirement
4.8.3-01 (existing)	The Contractor shall conduct Unit, Assembly, System, End-to-End, Automated Regression, and Performance/Stress Testing on System and System modifications.
4.8.3-02 (existing)	The Contractor shall ensure that end-to-end functional Testing is done across all organizational boundaries including all interfaces.
4.8.3-03 (modified)	The Contractor shall conduct System Test first-pass script execution on each release, reporting the outcome via % script pass to the State Project Director or designee, and continue that reporting until ST completion, in accordance with the TEMP.
4.8.3-04 (existing)	The Contractor shall provide the capability for regression testing that supports complete System life cycle testing.
4.8.3-05 (new)	The Contractor shall for any identified defects, have corresponding test cases added to the regression suite to prevent defect recurrence. Proper regression coverage based on the defects in the release.
4.8.3-06 (new)	The Contractor shall provide the State with the following new artifact, the Regression Test Coverage Report and provide a walkthrough (for each Feature Release), inclusive of prior releases between reports, identifying a summary of prior modifications to regression and automated regression test scripts, as well as all planned Feature Release modifications to regression and automated regression test scripts for State review and approval prior to regression test execution. The report shall consist of, at minimum, the following: • Test Coverage for new functionality • Test Coverage updates for modified functionality • Automated test coverage for new functionality • Updates to automated test coverage for modified functionality • Contractor recommendations for Regression Testing improvement
4.8.3-07 (new)	Within the management of the regression and automated regression test scripts, the Contractor shall identify for the State those scripts and/or scenarios the Contractor intends to remove from the existing regression test suites, gaining State approval prior to removal.
4.8.3-08 (existing)	The Contractor shall support the ability to test and implement two concurrent releases on a monthly basis.
4.8.3-09 (existing)	The Contractor shall provide a library of test cases and use cases that may be selected and modified by the user for testing.
4.8.3-10 (existing)	The Contractor shall include a test version of all batch and on-line programs and files to be used for testing releases and non-release changes.
4.8.3-11 (existing)	The Contractor shall provide search capability for the test case library that is cross referenced to the logic/edit that the identified test case is designed to test.
4.8.3-12 (existing)	The Contractor shall provide the ability to execute impact analysis testing of any proposed change.
4.8.3-13 (existing)	The Contractor shall provide the ability to save and reuse all test cases without the need to re-enter the data.
4.8.3-14 (existing)	The Contractor shall allow for testing of all System development projects before and after implementation.
4.8.3-15 (existing)	The Contractor shall allow users to create and edit application, enrollment, case and health plan records for testing.
4.8.3-16 (existing)	The Contractor shall provide the ability to “select” production data for input into test environment. Production data must be de-identified. The requirement for de-identified data may be waived or modified at the discretion of the State.
4.8.3-17 (existing)	The Contractor shall provide and maintain the capability for on-line end-to-end testing of all CalHEERS business processes through the System and return processing and error messages to the submitter.
4.8.3-18 (existing)	The Contractor shall provide analysis of production versus test results (e.g., field level compares with reporting).

Req #	SOW Requirement
4.8.3-19 (existing)	The Contractor shall track test cases that have expected results documented to show that the proposed change does not introduce other changes that produce unwanted results.
4.8.3-20 (existing)	The Contractor shall allow for setup of test cases for positive and negative testing and configurations that enable testing new capability that is not yet in production.
4.8.3-21 (existing)	If a Deficiency (other than a Cosmetic Deficiency and/or Minor Deficiency) occurs during these Acceptance Tests, the State shall accurately give Contractor Notice of its nonacceptance, with such Notice delineating Deficiencies used as the grounds for the State's decision. Contractor shall accurately promptly correct Deficiencies provided to Contractor in any notice(s) of non-acceptance from the State. Contractor shall accurately give Notice to the State if the State has not given Contractor a timely Notice of rejection or Acceptance and, if the State does not give such Notice within ten (10) Business Days following receipt of Notice from Contractor, the State will allow Contractor to issue an invoice for one half of the applicable payment that would have been due if the Deliverable had received Acceptance, and the second half would be invoiced following Acceptance of such Deliverable.
4.8.3-22 (new)	The Contractor shall obtain a pass on 90% of the ST test scripts as exit criteria from ST/entrance criteria for UAT.
4.8.3-23 (new)	For any release where ST first-pass testing completes with a script pass % less than 90%, the Contractor shall conduct a root cause analysis (identifying the cause(s) for the low %) and a corrective action plan (calling out the actions the Contractor will take to ensure the ST completion date is met, as well as the actions the Contractor will take to improve the % for future releases), providing both to the State Project Director or designee within 14 days of first pass test completion.
4.8.3-24 (new)	The Contractor shall ensure that the system is tested for web accessibility and is compliant with the web accessibility standards identified by the State in SOW Section 6, OPERATIONS REQUIREMENTS.
4.8.3-25 (new)	The Contractor shall make available, for use by the State, all Contractor Test Tools to support test packet review and validation and System Test efforts. All web-based testing tools shall be accessible via the State desired set of web browsers.

4.8.4 User Acceptance Test

Table 4-45: UAT Test

Req #	SOW Requirement
4.8.4-01 (new)	The Contractor shall provide a dedicated UAT Lead that will support all UAT activities on CalHEERS.
4.8.4-02 (existing)	The Contractor shall not incorporate or include UAT hours for every appropriate activity unless the State has confirmed that UAT hours for testing is appropriate for each specific activity.
4.8.4-03 (existing)	The State is responsible for performing its Acceptance testing obligations in accordance with the Work Plan under this Contract.
4.8.4-04 (existing)	The State will provide Acceptance for the System and Hosting Services if they have no Deficiencies (except Cosmetic Deficiencies and/or Minor Deficiencies) during these Acceptance Tests.
4.8.4-05 (existing)	After Contractor has corrected such Deficiencies, the State shall verify whether the System and Hosting Services satisfy the Acceptance Tests and in writing shall either accept or not accept the System and Hosting Services following such re-tests. If Contractor corrects all Deficiencies (except Cosmetic Deficiencies and Minor Deficiencies) in the System and Hosting Services, which then successfully perform the Acceptance Tests without Deficiencies (except for Cosmetic Deficiencies and Minor Deficiencies), the State shall give Contractor Acceptance therefor.

Req #	SOW Requirement
4.8.4-06 (modified)	If the Contractor is unable to correct all Deficiencies (except Cosmetic Deficiencies and Minor Deficiencies) in the System and the Hosting Services within the number of days of the scheduled Acceptance Date as required in the Work Plan, or if no such date is in the Work Plan, within 60 Days from such scheduled Acceptance Date, the State may, at its option: (a) immediately terminate the Contract, in whole or in part, as provided in Appendix A-2, SPECIAL PROVISIONS, Section 17.2, INABILITY TO CORRECT DEFICIENCIES DURING CURE PERIOD, without penalty to the State; (b) request Contractor to provide replacement Software and Equipment for further Acceptance Tests; or (c) continue performing Acceptance Tests on the System and Hosting Services and require Contractor to continue until Deficiencies (except Cosmetic and Minor Deficiencies) are corrected.

4.8.5 Release Test Plan

The Release Test Plan provides a detailed description of each test required to ensure that all of the system, interfaces, and components comply with the requirements and specifications outlined in the related CR. The plan contains defined test activities and scenarios for the CalHEERS Application for the applicable releases. The Release Test Plan includes the roles and responsibilities of the Contractor and State teams that are involved in testing activities, scope, approach, schedule, and deliverables for each release. Release testing is intended to test the CalHEERS Application for its compliance with functional requirements and test scenarios that are contained and outlined in the CR.

Table 4-46: Release Test Plan (CD-4.8-2)

Req #	SOW Requirement
4.8.5-01 (modified)	The Contractor shall adopt, enhance, deliver, and maintain the Release Test Plan, which includes but is not limited to: 1. INTRODUCTION 1.1 Purpose 1.2 List of Reference Documents 1.3 Audience 2. SUMMARY 2.1 Scope 2.2 Release Test Plan Deliverable Key Takeaways 3. ASSUMPTIONS, CONSTRAINTS AND RISKS 3.1 Assumptions 3.2 Constraints 3.3 Risks 4. Testing Strategy 4.1 Timeline 4.2 System Testing 4.3 Integration Testing 4.4 Test Terms 5. TEST PROCESS OVERVIEW 5.1 Testing Planning and Approach 5.2 Test Tools 5.3 Test Scenario and Script Development 5.4 Test Design and Review 5.5 Example Test Scenario 5.6 Example Test Cases 5.7 Test Case Management and Requirement Traceability in ALM 5.8 Test Execution 5.9 Test Automation 5.10 Test Reporting

Req #	SOW Requirement
	5.11 System Test Case Review Process 6. TEST ACTIVITIES/PHASES 6.1 Unit Testing 6.2 Assembly Testing 6.3 Functional/System Testing 6.4 Integration Testing 6.5 Section 508 Compliance Testing 6.6 ETL Testing 6.7 Stress/Performance Testing 6.8 Security/Vulnerability Testing 6.9 Build Validation Testing 6.10 Regression Testing (Manual, Automated and End-to-End) 6.11 User Acceptance Testing 7. DEFECT MANAGEMENT 7.1 Defect Severity 7.2 Defect Impact 7.3 Defect Priority 7.4 Defect Process 8. ENTRY/EXIT CRITERIA 8.1 Unit Testing Entry/Exit Criteria 8.2 Assembly Testing Entry/Exit Criteria 8.3 System Test Entry/Exit Criteria 8.4 Integration Testing Entry/Exit Criteria 8.5 Performance Testing Entry/Exit Criteria 8.6 Security Testing Entry/Exit Criteria 8.7 UAT Entry/Exit Criteria 9. TEST DATA 10. TEST ENVIRONMENT 11. TESTING TEAM 11.1 Testing Team Structure 11.2 Roles & Responsibilities 12. GLOSSARY AND ACRONYMS 12.1 New Acronyms and Terms APPENDIX 1: SOW TO DELIVERABLE TRACEABILITY CHECKLIST APPENDIX 2: DELIVERABLE COMPLIANCE AND VALIDATION CHECKLIST APPENDIX 3: ASSOCIATED ARTIFACTS
4.8.5-02 (new)	The Contractor shall only alter or modify this Deliverable's structure or content with the approval of the State Project Director or designee.
4.8.5-03 (modified)	The Contractor shall prepare the Release Test Plan in accordance with ISO/IEC/IEEE 29119-3, Software and systems engineering – Software Testing, Part 3: Test Documentation (Section 6.2 - Test Plan). As new versions of standards are available, adoption of the new standard will be considered through the change control process and approved by the State Project Director or designee.
4.8.5-04 (new)	The State identifies and associates the following artifacts to the Release Test Plan. The Contractor shall adopt, update, maintain, and deliver these artifacts in accordance with Appendix 3 of this deliverable including, but not limited to: • Installation Verification Test Plan • Installation Verification Test Execution Report • Automation and Regression process Flow • Copy case tool guide • Selenium Installation Guide • ABE Timeshifting Schedule NEW • ABE_How To Process • Launchpad_TimeMachine(002)

Req #	SOW Requirement
4.8.5-05 (new)	The Contractor shall adopt and maintain all Project Artifacts that are associated with this Deliverable in the Project Artifact Inventory and manage them in accordance with the Project Artifact process.
4.8.5-06 (new)	The Contractor shall update or develop the following appendices and attach them to the Release Test Plan: Appendix 1—SOW to Deliverable Traceability Checklist Description: A table where the Contractor identifies the SOW requirements for this Deliverable, as specified within SOW Section 8, DELIVERABLES, and includes but is not limited to: 1. SOW Requirement ID # 2. SOW Requirement Text 3. Requirement Traceability (Contractor identified traceability from the requirements to the Deliverable) 4. Requirement Fulfillment (Define how the Contractor has fulfilled the SOW requirements in the Deliverable) Appendix 2—Deliverable Compliance and Validation Checklist Description: A QA Checklist that includes, but is not limited to: 1. Deliverable Section Number and Title 2. Deliverable Requirement Statement(s) 3. Requirement Completion (How the Contractor has complied with or will comply with the requirement statements within the Deliverable) 4. Validation Method (The method the Contractor used to validate Deliverable compliance) 5. The Contractor's QA Manager sign-off on compliance Appendix 3—Associated Artifacts Description: An extract from the Project Artifact Inventory List of artifacts associated with this Deliverable, and will include but is not limited to the following examples: 1. Artifact Name 2. Associated Parent DEL 3. State Approver 4. SI Point of Contact 5. Review Frequency 6. Submission Frequency 7. Artifact File Format 8. Artifact Location (e.g., SharePoint breadcrumb) 9. Link to artifact

4.8.6 Release Test Management Execution

Table 4-47: Release Test Management Execution

Req #	SOW Requirement
4.8.6-01 (new)	The Contractor shall staff, manage, lead and execute all Release Test Management activities on CalHEERS as defined in this Statement of Work and in accordance with the CD-4.8-2 – Release Test Plan.
4.8.6-02 (new)	The Contractor shall collaborate with the State to develop and maintain any new Project Artifacts necessary to support this section. New artifacts shall be added to the Project Artifacts Repository and managed in accordance with the Project Artifact process.

4.8.7 Installation Verification Test Plan

The Installation Verification Test Plan ensures that the software was successfully installed and will operate as designed, testing not only the basic system functionality but also specific system screens and functionality included within the release.

Table 4-48: Installation Verification Test Plan

Req #	SOW Requirement
4.8.7-01 (existing)	The Contractor shall prepare the Installation Verification Test Plan in accordance with ISO/IEC 12207, IEEE 12207-2008 Systems and Software Engineering-Software Life Cycle Processes (Section 7 - Software Specific Process; Section 7.2 - Software Support Processes) pertaining to System Testing and Implementation.

4.8.8 Installation Verification Test Execution Report

The Installation Verification Test Execution Report shall contain the detailed documentation supporting the execution of the Installation Verification Test Plan to ensure each release implemented is successfully installed and will operate as designed.

Table 4-49: Installation Verification Test Execution Report

Req #	SOW Requirement
4.8.8-01 (existing)	The Contractor shall prepare a Test Report that includes but is not limited to: 1. Summary Assessment 2. Detailed Test Results 3. Variances 4. Test Incidents 5. Recommendations
4.8.8-02 (existing)	The Contractor shall prepare the Installation Verification Test Execution Report in accordance with current ISO/IEC/IEEE 29119-3, Software and systems engineering – Software Testing, Part 3: Test Documentation (Section 6-Test Management Processes Documentation, Section 7-Dynamic Test Processes Documentation) related to System Testing and Implementation.

4.8.9 Contractor Certification of Successful Release

The Contractor Certification of Successful Release identifies the successful completion of all testing activities associated with the release.

Table 4-50: Contractor Certification of Successful Release

Req #	SOW Requirement
4.8.9-01 (modified)	The Contractor shall prepare the Contractor Certification of Successful Release Test Completion in accordance with ISO/IEC/IEEE 29119-3, Software and systems engineering – Software Testing, Part 3: Test Documentation (Section 6-Test Management Processes Documentation, Section 7-Dynamic Test Processes Documentation), pertaining to System Testing. As new versions of standards are available, adoption of the new standard will be considered through the change control process and approved by the State Project Director or designee.

Req #	SOW Requirement
4.8.9-02 (existing)	The Contractor and the State shall conduct tests for measuring and certifying the achievement of the Service Level Agreements (SLA). The Contractor must implement all testing, measurement and monitoring tools and procedures required to measure and report the Contractor's performance of the System against the applicable SLAs. Such testing, measurement and monitoring must permit reporting at a level of detail sufficient to verify compliance with the Service Level Contracts and will be subject to audit by the State.

4.8.10 Performance Test Materials Packet

The Performance Test Materials Packet contains the detailed documentation supporting the Release Test Plan and the TEMP to verify that the application is performing properly and the technical infrastructure for the application is adequate. The Performance Test Materials Packet includes test cases and other materials to validate that the application conforms to the performance requirements as defined in the Contract for both online and batch environments.

Table 4-51: Performance Test Materials Packet (CD-4.8-3)

Req #	SOW Requirement
4.8.10-01 (modified)	The Contractor shall adopt, enhance, deliver, and maintain the Performance Test Materials Packet, which includes but is not limited to: 1. CALHEERS RELEASE ### CRs 1.1 CR # 1.2 CR # - Etc. 2. SCENARIOS AND WORKLOAD MODEL 3. R### BATCHES EXECUTIONS 4. PERFORMANCE TEST EXECUTIONS 5. PERFORMANCE TEST PLAN TIMELINE 6. PERFORMANCE TESTING SCHEDULE DEPENDENCY 7. ENVIRONMENT AND TOOLS 8. EXIT CRITERIA 9 APPENDIX – CALHEERS RELEASE ### CRs – Out of Scope - APPENDIX 1: SOW TO DELIVERABLE TRACEABILITY CHECKLIST - APPENDIX 2: DELIVERABLE COMPLIANCE AND VALIDATION CHECKLIST - APPENDIX 3: ASSOCIATED ARTIFACTS
4.8.10-02 (new)	The Contractor shall only alter or modify this Deliverable's structure or content with the approval of the State Project Director or designee.
4.8.10-03 (modified)	The Contractor shall prepare the Performance Test Materials Packet in accordance with current ISO/IEC/IEEE 29119-3, Software and systems engineering – Software Testing, Part 3: Test Documentation (Section 6-Test Management Processes Documentation, Section 7-Dynamic Test Processes Documentation) and IEEE 1012-2012 - Standard for System and Software Verification and Validation (Section 11.3.1 V&V Test Documentation, Section 12.9 VVP, Section 8, V&V Test Documentation Requirements) pertaining to: 1. System Testing 2. Software Test Documentation 3. Test Case Specification 4. Test or Validation Procedures As new versions of standards are available, adoption of the new standard will be considered through the change control process and approved by the State Project Director or designee.
4.8.10-04 (modified)	The Contractor shall update and maintain the Performance Test Materials Packet to include, at a minimum, the following content:

Req #	SOW Requirement
	1. Test Case List: a. Test Case ID b. Test Case name c. Test Case version d. Test cases e. Test data information used to meet conditions necessary to test. f. Interfaces tested (if applicable) g. Untestable items h. Defect Reporting Process i. Test materials metrics: i) Total number of planned test cases ii) Total number of requirements tested. iii) Total number of untestable requirements 2. A test case summary report a. Test Scripts: i) Test Case ID ii) Test Case Name iii) Test case description content (Shall include test data required for executing the test case, pre-conditions and test case post condition.) iv) Step Name v) Step Description vi) Expected Result vii) Execution Status viii) Tester ID ix) Creation Date
4.8.10-05 (modified)	The Performance Test Materials Packet shall include automated test scripts which shall meet all criteria for Test Procedures. Automated test scripts shall be re-usable in performance testing. Automated test scripts shall include, at a minimum, the following: 1. Test Case ID 2. Test Case Name 3. Test Case Summary 4. Test Case Expected Result 5. Creation Date 6. CI linkage, if applicable
4.8.10-06 (modified)	The Contractor shall update and maintain the Performance Test Materials Packet to include, at a minimum, the following content: 1. Document control 2. Executive summary 3. List of Covered Online/ Batch CRs 4. Scenarios and Workload Model (this includes all test case details) 5. Performance Test Executions 6. Performance Test Plan Timeline 7. Environment and Tools 8. Exit Criteria (includes Issues/defect handling, Assumptions, dependencies and constraints, General roles and responsibilities)
4.8.10-07 (modified)	The Contractor shall submit the Performance Test Materials Packet to the State Project Director or designee for review between 15 - 30 Business Days prior to performance test date.
4.8.10-08 (new)	The State identifies and associates the following artifacts to the Performance Test Materials Packet. The Contractor shall adopt, update, maintain, and deliver these artifacts in accordance with Appendix 3 of this deliverable including, but not limited to: • Performance Center Components and configurations • Running Load Tests in Performance Center

Req #	SOW Requirement
4.8.10-09 (new)	The Contractor shall adopt and maintain all Project Artifacts that are associated with this Deliverable in the Project Artifact Inventory and manage them in accordance with the Project Artifact process.
4.8.10-10 (new)	The Contractor shall update or develop the following appendices and attach them to the Performance Test Materials Packet deliverable: Appendix 1—SOW to Deliverable Traceability Checklist Description: A table that identifies the SOW requirements for this Deliverable, as specified within SOW Section 8, DELIVERABLES, and includes but is not limited to: 1. SOW Requirement ID # 2. SOW Requirement Text 3. Requirement Traceability (Define traceability of the requirements to the Deliverable) 4. Requirement Fulfillment (Define how the SOW requirements have been fulfilled by this Deliverable) Appendix 2—Deliverable Compliance and Validation Checklist Description: A QA Checklist that includes, but is not limited to: 1. Deliverable Section Number and Title 2. Deliverable Requirement Statement(s) 3. Requirement Completion (How the Contractor will comply with or has complied with the requirement statements within the plan) 4. Validation Method (The method the Contractor used to validate Deliverable compliance) 5. The Contractor's QA Manager sign-off on compliance Appendix 3—Associated Artifacts Description: An extract from the Project Artifact Inventory List of artifacts associated with this Deliverable, and will include but is not limited to the following examples: 1. Artifact Name 2. Associated Parent DEL 3. State Approver 4. SI Point of Contact 5. Review Frequency 6. Submission Frequency 7. Artifact File Format 8. Artifact Location (e.g., SharePoint breadcrumb) 9. Link to artifact

4.8.11 Performance Test Results Packet

The Performance Test Results Packet contains the detailed documentation supporting the execution of the Performance Test Materials Packet. The performance test is conducted to verify that the application is performing properly and the technical infrastructure for the application is adequate. The Performance Test Results Packet includes test artifacts to document the results of both the online and batch performance tests.

Table 4-52: Performance Test Results Packet (CD-4.8-4)

Req #	SOW Requirement
4.8.11-01 (new)	The Contractor shall adopt, enhance, deliver, and maintain the Performance Test Results Packet, which includes but is not limited to: 1. EXECUTIVE SUMMARY 2. System Performance Testing, including: 2.1 YELLOWSTONE NON-OE COMPOSITE LOAD TEST (PORTAL + SAWS) 2.2 YELLOWSTONE COMPOSITE ENDURANCE TEST RESULTS (NON-OE) 2.3 YELLOWSTONE COMPOSITE STRESS TEST RESULTS (OE LOAD) 2.4. CALHEERS RELEASE ### ENHACEMENTS CRS 2.4.1 CR # 2.4.2 CR # 2.4.3 Etc. 3. SAWS INTEGRATED TEST RESULTLS (if applicable) 4. CMS TEST RESULTS (if applicable) 5. FTB TEST RESULTS (if applicable) 6. IDP TEST RESULTS (if applicable) 7. EDD TEST RESULTS (if applicable) 8. Tech Refresh CRS (if applicable) 8.1 CR # 8.2 CR # 8.3 Etc. 9. BATCH RESULTS 10. PERFORMANCE ISSUES/DEFECTS 11. EXIT CRITERIA 12. APPENDIX – ENVIRONMENT AND TOOLS APPENDIX 1: SOW TO DELIVERABLE TRACEABILITY CHECKLIST APPENDIX 2: DELIVERABLE COMPLIANCE AND VALIDATION CHECKLIST APPENDIX 3: ASSOCIATED ARTIFACTS
4.8.11-02 (new)	The Contractor shall only alter or modify this Deliverable's structure or content with the approval of the State Project Director or designee.
4.8.11-03 (existing)	The Contractor shall provide documentation of test results on all System changes. Implementation of the new functionality may only begin after approval by the State of the test results and required deliverables.
4.8.11-04 (modified)	The Contractor shall prepare the Performance Test Results Packet in accordance with ISO/IEC/IEEE 29119-3, Software and systems engineering – Software Testing, Part 3: Test Documentation (Section 6-Test Management Processes Documentation, Section 7-Dynamic Test Processes Documentation) and IEEE 1012-2012, Standard for Software Verification and Validation System and Software Verification and Validation pertaining to: 1. Executive Summary (System Testing, Test Summary Report) 2. Approach (Test or Validation Plans and Procedures) 3. Results (Validation Results Report, Test Log) 4. Batch Jobs Results (Validation Results Report) 5. Appendix 1- Workload Profile (Includes Test Documentation, Test case specification, Test Item Transmittal Report)

Req #	SOW Requirement
	As new versions of standards are available, adoption of the new standard will be considered through the change control process and approved by the State Project Director or designee.
4.8.11-05 (new)	The Contractor shall adopt and maintain all Project Artifacts that are associated with this Deliverable in the Project Artifact Inventory and manage them in accordance with the Project Artifact process.
4.8.11-06 (new)	The Contractor shall update or develop the following appendices and attach them to the Performance Test Results Packet deliverable: Appendix 1—SOW to Deliverable Traceability Checklist Description: A table that identifies the SOW requirements for this Deliverable, as specified within SOW Section 8, DELIVERABLES, and includes but is not limited to: 1. SOW Requirement ID # 2. SOW Requirement Text 3. Requirement Traceability (Define traceability of the requirements to the Deliverable) 4. Requirement Fulfillment (Define how the SOW requirements have been fulfilled by this Deliverable) Appendix 2—Deliverable Compliance and Validation Checklist Description: A QA Checklist that includes, but is not limited to: 1. Deliverable Section Number and Title 2. Deliverable Requirement Statement(s) 3. Requirement Completion (How the Contractor will comply with or has complied with the requirement statements within the plan) 4. Validation Method (The method the Contractor used to validate Deliverable compliance) 5. The Contractor's QA Manager sign-off on compliance Appendix 3—Associated Artifacts Description: An extract from the Project Artifact Inventory List of artifacts associated with this Deliverable, and will include but is not limited to the following examples: 1. Artifact Name 2. Associated Parent DEL 3. State Approver 4. SI Point of Contact 5. Review Frequency 6. Submission Frequency 7. Artifact File Format 8. Artifact Location (e.g., SharePoint breadcrumb) 9. Link to artifact

4.8.12 Performance Test Execution

Table 4-53: Performance Test Execution

Req #	SOW Requirement
4.8.12-01 (new)	The Contractor shall staff, manage, lead and execute all Performance Test Management activities on CalHEERS as defined in this Statement of Work and in accordance with both the CD-4.8-3 – Performance Test Materials Packet and the CD-4.8-4 – Performance Test Results Packet.
4.8.12-02 (new)	The Contractor shall collaborate with the State to develop and maintain any new Project Artifacts necessary to support this section. New artifacts shall be added to the Project Artifacts Repository and managed in accordance with the Project Artifact process.

4.8.13 Contractor Testing Staff

Table 4-54: Contractor Testing Staff

Req #	SOW Requirement
4.8.13-01 (existing)	The Contractor shall provide a testing team operationally distinct from the development team to perform all testing activities for each release according to the TEMP and the Release Test Plan.
4.8.13-02 (modified)	The Contractor shall support CalHEERS Project Office execution of a thorough User Acceptance Testing (UAT). This test shall verify that the application is functioning as required by the State. The Contractor shall provide the following in support of UAT: 1. Setup and execution of a minimum of three (3) Production-like test environment/region. 2. Provide specifications for hardware and software to support UAT equipment and environment(s). 3. Identify and provide to the State patching and software updates that State support staff can implement, in a manner that does not impact the UAT schedule, and the State's execution timeframe for performing UAT. 4. Provide technical consultation for the duration of UAT, to include reconciling differences between UAT defects logged by State and UAT defects logged by the Contractor. 5. Provide system support for the UAT environment, to include loading of identified production data, masking and subsets of Production data, and generation of batch jobs for application and interface processing.
4.8.13-03 (existing)	The Contractor shall provide support for UAT for each release. UAT support shall be release specific, and include but not be limited to: 1. Providing access to business analysts and development teams. 2. Providing access to the Contractor Test Teams. 3. Provide access to the Contractor Project Management. 4. Providing access to the Contractor Batch Team. Provide access to the Contractor resources that execute the loading and refresh of test environment data. 5. Providing access to the Contractor resources for creation of Security Groups and Roles.

4.9 DEFECT MANAGEMENT

Generally, defect management can be defined as a process of detecting defects and fixing them.

4.9.1 Defect Management Plan

Table 4-55: Defect Management Plan (CD-4.9-1)

Req #	SOW Requirement
4.9.1-01 (modified)	The Contractor shall adopt, enhance, deliver, and maintain the Defect Management Plan, which includes but is not limited to the table of contents herein. The Contractor shall review the current Defect Management Plan with the State and determine applicable sections that will be updated as a result of new requirements from this Contract. Table of Contents: 1. INTRODUCTION 1.1 Purpose 1.2 List of Reference Documents 1.3 Audience

Req #	SOW Requirement
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4.9.1-02 (new)	The Contractor shall only alter or modify this Deliverable's structure or content with the approval of the State Project Director or designee.
4.9.1-03 (new)	The Contractor shall review the current Defect Management Plan with the State and determine applicable sections that will be updated as a result of new requirements from this Contract.
4.9.1-04 (new)	The Contractor shall update CD-4.9-1 Defect Management Plan and applicable artifacts (e.g., RCA Process Guide) to properly address Impacts from updates within Appendix A-2 - CalHEERS SDMO SPECIAL PROVISIONS, Section N- SLA-SYSTEM DEFICIENCY.
4.9.1-05 (new)	Defect Identification and Reporting Process - The Contractor shall update the Defect Management Plan, to provide more detail on the Defect Identification process and associated reporting, including but not limited to:

Req #	SOW Requirement
	- Processes for identifying defects within the expected timeframes, identified in Appendix A-2 - CalHEERS SDMO SPECIAL ROVISIONS, Section N- SLA-SYSTEM DEFICIENCY, Figure 2: Deficiency Resolution Expectations, and Section C- SLA- ROOT CAUSE AANALYSIS SUBMISSION SLA, and processed in the CalHEERS Defect Management tool(s). - Reporting on all potential defects awaiting triage (e.g., incidents, problems, etc.), including: - The method of entry into the defect workflow (e.g., incident triage, problem triage, etc.) - Date in which the potential defect was identified - Date in which the potential defect started being reviewed in the defect workflow - Defect validity - Defect categorization (production or non-production) - Defect categorization date - Defect priority designation determined using the heatmap and Deficiency Resolution Expectations Figure 2 in Section N, SLA-System Deficiency. - Ordering defects by categorization first, then by Priority.
4.9.1-06 (new)	Defect Triage and Reporting Process - The Contractor shall update the Defect Management Plan, to provide a higher level of detail on the Defect Triage process and associated reporting, including but not limited to: - Processes for triaging defects within the expected timeframes, identified in Appendix A-2 - CalHEERS SDMO SPECIAL PROVISIONS, Section N- SLA-SYSTEM DEFICIENCY, Figure 2: Deficiency Resolution Expectations, and Section C- SLA- Root Cause Analysis Submission SLA, and processed in the CalHEERS Defect Management tool(s). - Reporting on the triage status of all open system defects, within, at a minimum, a Monthly Status Report and Defect Management tool(s), including the following, but not limited, details: - System Deficiency - Defect Number - Current Status - Impact - Severity - Priority - Triage Start Date (Defect Identification Date) - Triage Completion Date Note: The State may limit data by environment, status or defect type as needed.
4.9.1-07 (new)	The Contractor shall update all applicable areas in the Defect Management Plan, and any associated tools or artifacts, to remove the defect disposition of Not Under Warranty, as that disposition/term is no longer in use on CalHEERS (refer to Section 10.1.2 - Not Under Warranty (NUW), of the Special Provisions). The Contractor shall re-disposition defects under that classification as necessary.
4.9.1-08 (new)	The Contractor shall update the Defect Management Plan to define Reconciliation, Enrollment, and Membership (REM) defects as “Inaccuracies that could impact data quality for enrollment, including but not limited to 834 transactions, that may put CalHEERS out of sync with Carriers.”
4.9.1-09 (new)	The Contractor shall update the Defect Management Plan to define a structured process for early detection and categorization of REM data discrepancies as internal (CalHEERS), external (carrier-related), or joint system issues requiring cross-entity resolution.
4.9.1-10 (new)	The Contractor shall update the Defect Management Plan to identify the Defect Escalation Protocol to notify Covered CA of persistent data discrepancies.
4.9.1-11 (new)	The State identifies and associates the following artifacts to the Defect Management Plan. The Contractor shall adopt, update, maintain, and deliver this artifact in accordance with Appendix 3 of this deliverable including, but not limited to:

Req #	SOW Requirement
	- Defect Management Process - Defect Management Process Guide - Prod NUW Defects_Fix at No Cost_Review Approval Process EWM Workflow_Final_v2 - Production SIRs_L3 Checklist_Final- 6-1-2024 - Alternate Procedures - CAP Report - Defects Impacting Scripts - Director's Report/Defect Management Section (including defect burndowns per request which are displayed in 'release section' of DR') Defect Management reports are displayed below which are input in the DR: - Open Non-Production Defects – Defects by Month extract - Open Non-Production Triage SIRs by Planned for Release extract - Open Production Warranty/Warranty Triage SIRs by Month extract - Open Production Warranty/Warranty Triage SIRs by Planned for Release extract - Open Sev 1 to 4 Not Under Warranty Defects by Planned for Release extract - Open Sev 1-4 Not Under Warranty Defects (Production) by Month and Warranty Status extract - Open vs. Closed Production Warranty/Warranty Triage SIRs by Month extract - Outstanding Non-Prod Triage Defects (Sev 1 to 4) per Aging extract - Outstanding Production SIRs (Sev 1 to 4) per Aging extract - Production Must-Have Report - Production NUW New Vs Closed Vs Outstanding Vs Triaged report extract - RXX.X_All_Open_Defects_and_Must_Haves_MMDDYYYY - SLA Report/System Deficiency Correction extract - Status of list of "Warranty Disposition" = "Non-Warranty" Production extract - Top Error Codes - Top SAWS Error Report - CalHEERS_CalSAWS Integration Testing Defects Identification_Triage_Fix Process-v2.2_4-19-2024 - How to Write a Defect in ALM.pdf - How to Write a Defect in RTC_v2 - Root Cause Analysis Process Guide - SOP - CAP Defects & SIRs_Final - SOP on Externally Assigned Defects Report_Final - Standard Operating Procedure (SOP) for Service Level Agreement (SLA) on Defects_v0.1 - Template - Defects Moving out of Releases - Template to Share Defects Moving out of Release - Enterprise Tools - ALM Defects Training.mp4 - Enterprise Tools - ALM Defects Training.story - Enterprise Tools - ALM Defects Training.zip
4.9.1-12 (new)	The Contractor shall update the following appendices and attach them to the Defect Management Plan deliverable: Appendix 1–SOW to Deliverable Traceability Checklist Description: A table where the Contractor identifies the SOW requirements for this Deliverable, as specified within SOW Section 8, DELIVERABLES, and includes but is not limited to: 1. SOW Requirement ID # 2. SOW Requirement Text 3. Requirement Traceability (Contractor identified traceability from the requirements to the Deliverable)

Req #	SOW Requirement
	4. Requirement Fulfillment (Define how the Contractor has fulfilled the SOW requirements in the Deliverable) Appendix 2—Deliverable Compliance and Validation Checklist Description: A QA Checklist that includes, but is not limited to: 1. Deliverable Section Number and Title 2. Deliverable Requirement Statement(s) 3. Requirement Completion (How the Contractor has complied with or will comply with the requirement statements within the Deliverable) 4. Validation Method (The method the Contractor used to validate Deliverable compliance) 5. The Contractor's QA Manager sign-off on compliance Appendix 3—Associated Artifacts Description: An extract from the Project Artifact Inventory List of artifacts associated with this Deliverable, and will include but is not limited to the following examples: 1. Artifact Name 2. Associated Parent DEL 3. State Approver 4. SI Point of Contact 5. Review Frequency 6. Submission Frequency 7. Artifact File Format 8. Artifact Location (e.g., SharePoint breadcrumb) 9. Link to artifact

4.9.2 Defect Management Execution

Table 4-56: Defect Management Execution

Req #	SOW Requirement
4.9.2-01 (new)	The Contractor shall staff, manage, lead and execute all Defect Management activities on CalHEERS as defined in this Statement of Work and in accordance with the CD-4.9-1 – Defect Management Plan.
4.9.2-02 (modified)	The Contractor shall be responsible for resolving all identified defects regardless of Severity, Impact, and Priority (unless otherwise mutually agreed upon and documented within the defect management tool).
4.9.2-03 (modified)	The Contractor shall use all commercially reasonable efforts to provide solutions, changes, and corrections to system defects within the correction periods below or a schedule agreed to by the State Project Director or designee: 1. Priority 1 - Within two (2) calendar days of defect identification (through an Exception Release) 2. Priority 2 - Within seven (7) calendar days of defect identification 3. Priority 3 – a. For Production Defects: Within the next 40 calendar days b. For Non-Production Defects: within one-week post defect prioritization date i. If defect is identified close to code freeze, the fix will be delivered in the earliest build possible ii. Exceptions could be case on case basis where-in the fix might need additional time/confirmation from a trading partner 4. Priority 4 - a. For Production Defects: no more than 65 calendar days b. For Non-Production Defects: Within two weeks post defect prioritization date, implies agreement on proposed FDD date

Req #	SOW Requirement
4.9.2-04 (modified)	The Contractor shall notify the State Project Director or designee via phone call and electronically of a Priority 1 defect within one (1) hour of occurrence, and within two (2) hours of a Priority 2 defect occurrence. The Contractor shall provide daily updates for Priority 1 defect until resolved.
4.9.2-05 (modified)	The Contractor shall, for defects designated as Priority 1 & 2, provide a Root Cause Analysis (RCA) as defined in the Root Cause Analysis Process Guide. Additionally, for defects designated as Priority 3 & 4, the Contractor shall provide a brief root cause description within the defect management tool.
4.9.2-06 (existing)	The Contractor shall provide Defect support in the following areas: 1. Helpdesk Support 2. Defect Triage Monitoring 3. Defect Trending Analysis 4. Defect Prioritization 5. Defect Resolution Planning
4.9.2-07 (modified)	The Contractor shall categorize each defect by Severity and Impact and Priority during defect Identification as defined by the triage process within CD-4.9-1 Defect Management Plan.
4.9.2-08 (new)	The Contractor shall receive, research, and respond to all inquiries for defect status from the State.
4.9.2-09 (modified)	The Contractor shall support all code and data fixes associated with REM activities on CalHEERS after prioritization by the Data Integrity Analysis Team.
4.9.2-10 (new)	The Contractor shall coordinate REM defect resolution efforts with Covered California as needed to resolve data discrepancies.
4.9.2-11 (new)	The Contractor shall develop and provide monthly REM Data Discrepancy Reports with insights on volume of data discrepancies, trend analysis, and recommended resolution strategies to support data-driven decision-making.
4.9.2-12 (new)	The Contractor shall actively participate in Covered CA's existing REM defect discussions, ensuring prompt identification, prioritization, and resolution of REM defects while collaborating on process improvements.
4.9.2-13 (new)	The Contractor, before implementing any system or process changes impacting REM reconciliation, shall engage Covered CA in pre-development discussions to validate assumptions, conduct impact assessments, and ensure alignment with business, technical, and external system dependencies.
4.9.2-14 (new)	The Contractor shall implement the ability for CalHEERS to concurrently execute REM jobs, without performance degradation, supporting ad hoc reconciliation requests to meet CMS policy changes.
4.9.2-15 (existing)	The Contractor shall design, perform and test data fixes resulting from carrier reconciliation as necessary.
4.9.2-16 (existing)	The Contractor shall track all defects from discovery through resolution and document the details defined within the Defect Management Process utilizing the defect management tool, in accordance with the TEMP.
4.9.2-17 (existing)	The Contractor shall identify, triage, and document defects within a State approved defect management tool, in accordance with the Defect Management Process and the TEMP.
4.9.2-18 (modified)	The State Project Director or designee may modify the time-to-fix period of a defect, if in his or her sole judgment it is in the best interest of the State and provide written notification to the Contractor.
4.9.2-19 (modified)	The Contractor shall abide by Severity defect categorization defined by the following: • Severity 1 - Renders the System totally inoperable or there is a critical system, network or application outage impacting many or all locations or include such severe performance degradations such that the System is effectively unavailable. Examples include but are not limited to the user cannot log into the System in most or all locations, or the Tester is unable to access the test environment. Critical functions are defined in the O&M Manual. • Severity 2 Type Results in critical functions being unusable at a major location or

Req #	SOW Requirement
	prevents the accomplishment of a critical function where there is no alternate procedure by which the function can be performed. Examples include but are not limited to System errors (i.e., Null Pointer, JAVA run time) preventing users from completing critical functions and Deficiencies causing data corruption. Critical functions are limited to the following where at least 75% of the System total users and/or associated transactions for the following are unable to process to successful completion: - o Application Login - o Initial Application Save or Submission - o Report-a-Change on Application Save or Submission - o Renewal Application Save or Submission - o Eligibility Determinations for Initial Applications, Renewals, and Report-a-Change are Correct - o Individual Plan Selection - o MEDS HX18, HX20 and HX40 Transaction Processing - o eHIT Transaction Processing - o 834 Transaction Processing - o Critical Notice Generation: NOD01 - o CMS and IRS Monthly and Annual File Submission - o FPACT transactions including the Master Provider File (MPF) • Severity 3 - A component, application or procedure is down, unusable, or difficult to use causing some operational impact but where an alternate procedure acceptable to the State in its reasonable judgment is available to avoid operational impacts on the users'. Examples include but are not limited to a page within the system is not working but other avenues are available to complete the business process, albeit less conveniently; a functional component or service outage with an alternative workaround where the workaround degrades the operation of the system from the user perspective; preferred method for completing business process is blocked but alternate method is available; test script can be executed and completed with work-around. • Severity 4 - Any disruption in service that has a minor business or job impact affecting multiple users or customers where those people affected are still able to perform their functions. A service component or procedure, which is not critical, is unusable but where an alternate procedure acceptable to the State is available. Examples include, but are not limited to, a degradation in system performance, or data element is mislabeled, element is misplaced on the page, test script can be completed without having to alter the page flow.
4.9.2-20 (new)	The Contractor shall categorize each defect based on a Priority categorization. Defect priority, while based on defect severity and impact (refer to heatmap and Appendix A-2, SPECIAL PROVISIONS, Section N, SLA-SYSTEM DEFICIENCY Figure 2 Deficiency Resolution Expectations), specifies the order in which the defect should be fixed in both production and non-production. Additionally, the Contractor shall adhere to the Priority correction periods as outlined in SLA 14.

Req #	SOW Requirement
4.9.2-21 (new)	The Contractor shall categorize each defect by Priority as defined in RFP Appendix A-2 SPECIAL PROVISIONS, Section N, SLA-SYSTEM DEFICIENCY, Figure 2 Deficiency Resolution Expectations. Impact is one factor to determine Priority based on the following: • Non-Production Impacts are measured by the effect on the test case(s) and the testing phase: - o Impact 1 - One or both of the following is true: ▪ Testing is completely blocked. The application is unavailable/unstable to allow for any functionalities to be validated. ▪ Application functionality pertaining to a specific CR is majorly impacted or 85% - 100% of the remaining (Not Run / Incomplete) CR test cases cannot be executed. 2 One or both of the following - o Impact 2 - One or both of the following is true: ▪ Significant application functionality pertaining to multiple CRs is impacted and there is no potential workaround. \ ▪ Application functionality pertaining to a specific CR is majorly impacted or impacts 50% - 84% of the remaining (Not Run / Incomplete) CR test cases. - o Impact 3 – Application functionality pertaining to a specific CR is impacted and impacts 26% - 49% of the remaining (Not Run / Incomplete) CR test cases. - o Impact 4 – Application functionality pertaining to a specific CR is impacted and impact 11% - 25% of the remaining (Not Run / Incomplete) CR test cases. - o Impact 5 - Application functionality pertaining to a specific CR is impacted and impacts 1% - 10% of the remaining (Not Run / Incomplete) CR test cases. • Production Impacts are defined by the number of affected cases: - o Impact 1 – Impacts > 1 million cases - o Impact 2 – Impacts > 200,000 and <= 1 million cases - o Impact 3 – Impacts >2000 and <= 200,000 cases - o Impact 4 – Impacts >20 and <= 2000 cases - o Impact 5 – Impacts <= 20 cases
4.9.2-22 (new)	The Contractor Data Integrity Analysis team (REM) and carrier support team shall be available to support carrier reconciliation activities between the hours of 8:00 a.m. to 9:00 p.m. Pacific time (PT). See also SOW 2.1.1 for additional clarity on Contractor staff coverage work for assignments in support of the State.
4.9.2-23 (new)	The Contractor shall collaborate with the State to develop and maintain any new Project Artifacts necessary to support this section. New artifacts shall be added to the Project Artifacts Repository and managed in accordance with the Project Artifact process.

4.9.3 Defect Management Reports

Table 4-57: Defect Management Reports

Req #	SOW Requirement
4.9.3-01 (new)	The Contractor shall adopt, enhance, deliver, and maintain a CalHEERS Defect Management Report, which includes but is not limited to: • SLA Report/System Deficiency Correction extract • Director's Report/Defect Management Section (including defect burndowns per request which are displayed in 'release section' of DR) Defect Management reports are displayed below which are input in the DR: - o Open Production Triage SIRs by Month extract - o Open Production Triage SIRs by Planned for Release extract - o Outstanding Production SIRs (Sev 1 to 4) per Aging extract - o Open vs. Closed Production Triage SIRs by Month extract - o Open Non-Production Defects – Defects by Month extract - o Open Non-Production Triage SIRs by Planned for Release extract - o Outstanding Non-Prod Triage Defects (Sev 1 to 4) per Aging extract - o CAP Report - o RCA Reports for Priority 1 and Priority 2 - o Defects Impacting Scripts - o Alternate Procedures - o Top Error Codes
4.9.3-02 (new)	The Contractor shall report to the State on production and non-production deficiencies identified as follows: 1. Priority of the defect specifies the order in which the defect should be identified in both production and non-production processes. 2. The priority of the defect is updated based on the heatmap and Figure 2 Deficiency Resolution Expectations in Section N, SLA-System Deficiency.
4.9.3-03 (new)	The Contractor shall report, at a minimum, within the Monthly Status Report and Defect Management tool(s): • All System Deficiencies (The State may limit environments or status or type as needed.) • Number • Current Status • Priority • Impact
4.9.3-04 (new)	The Contractor shall adopt and maintain all Project Artifacts that are associated with this Deliverable in the Project Artifact Inventory and manage them in accordance with the Project Artifact process.
4.9.3-05 (new)	The Contractor shall collaborate with the State to develop and maintain any new Project Artifacts necessary to support this section. New artifacts shall be added to the Project Artifacts Repository and managed in accordance with the Project Artifact process.

4.9.4 Defect Fix Releases

Software can be released outside a release cycle for emergency fixes as an exception release and as approved by the State. Emergency fixes are defined as updates necessary to correct errors that have a severely adverse effect on the DHCS or Covered California Programs.

Table 4-58: Defect Fix Releases

Req #	SOW Requirement
4.9.4-01 (existing)	The Contractor shall execute emergency updates to CalHEERS as an exception release outside of scheduled releases if approved in writing by the State Project Director or designee. Exception releases are to correct defects that have a Priority 1 or Priority 2 impact to the DHCS or Covered California Programs and cannot wait until the next scheduled release.
4.9.4-02 (existing)	The Contractor shall commence the correction period based upon approval of the defect priority by the State Project Director or designee.
4.9.4-03 (existing)	For exception releases to production that are needed to correct a Priority 1 or Priority 2 Defect, the Contractor shall provide written notification to the State Project Director or designee within two (2) hours of identifying the need for the exception release.

SOW Section 5

Program Support Requirements

SOW SECTION 5 –PROGRAM SUPPORT REQUIREMENTS

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5 PROGRAM SUPPORT REQUIREMENTS

The following Services are currently being provided to the State via a Time and Materials (T&M) Change Request (CR). The State requires that these Services be provided under the fixed price cost to reduce overhead costs related to tracking the work under CRs. Each Service will require the creation, review, and ongoing maintenance of Project Artifact(s) that fully describe the service being provided as well as the associated Project Process Guide or Standard Operating Procedure (SOP) that the Contractor will use to ensure that the services are consistent, traceable and have results and outcomes as reviewed and approved by the State.

All deliverables, activities, services and service improvements or enhancements called for under SOW Section 5, PROGRAM SUPPORT REQUIREMENTS, shall be provided by the Contractor under the Fixed Price Cost component of the Contract. Please note that this section of the Sstatement of wWork (SOW) may reference multiple sets of standards, which are subject to change over time. Refer to Appendix A-2, CALHEERS SDMO SPECIAL PROVISIONS, Section 7.7, UPDATES TO STANDARDS, REGULATIONS, AND CODES, regarding project processes around standard updates.

5.1 PROGRAM SUPPORT SERVICES

The Contractor shall operationalize and execute processes and standard operating procedures in a manner that reduces impact to State staff and interface partners, schedule, and cost without introducing risk to the ongoing performance and success of the CalHEERS.

5.1.1 Program Support

The Contractor shall provide the Program Support Plan that will provide the approach and timeline associated with the development, review, approval and implementation of all the Services as described in the following Services requirements and Project Artifact definitions.

Table 5-1: Program Support Plan (CD-5.1-1)

Req #	SOW Requirement
5.1.1-01 (Modified)	The Contractor shall develop, deliver, enhance, and maintain a Program Support Plan, defining the Contractors approach for providing all services called for under SOW Section 5, PROGRAM SUPPORT REQUIREMENTS. The plan will define the tasks, roles and responsibility, approach, and describe the solutions the Contractor will use to support the services identified in this section of the SOW. The Contractor shall provide a timeline for development, review, approval, implementation, and ongoing maintenance for all services or service improvements or enhancements, managing those implementations through the existing CalHEERS processes. The Program Support Plan shall include at a minimum the following: 1. INTRODUCTION 1.1 Purpose 1.2 List of Reference Documents 1.3 Audience 2. SUMMARY 2.1 Scope 3. APPROACH 3.1 Deliverable Hierarchy 4. ASSUMPTIONS, CONSTRAINTS AND RISKS 4.1 Assumptions 4.2 Constraints 4.3 Risks 5. ROLES AND RESPONSIBILITIES 6. PROGRAM SUPPORT ACTIVITIES

Req #	SOW Requirement
	6.1 Program Support Services 7. CONSUMER EXPERIENCE ACTIVITIES 7.1 Consumer Experience Support Services 8. REASONABLE OPPORTUNITY PERIOD (ROP) BATCH ACTIVITIES 8.1 Reasonable Opportunity Support Services 9. BOT ACTIVITIES 9.1 BOT Support Services 10. SMALL CHANGE NOTICES ACTIVITIES 10.1 Small Change Notices Support Services 11. SALESFORCE APPLICATION MAINTENANCE ACTIVITIES 11.1 Salesforce Application Maintenance Support Services 12. INTELLIGENT DOCUMENT PROCESSING (IDP) ACTIVITIES 12.1 Intelligent Document Processing Support Services 13. APPLICATION MAINTENANCE ACTIVITIES 13.1 Application Maintenance Support Services 14. USABILITY RESEARCH ACTIVITIES 14.1 Usability Research Support Services 15. ELIGIBILITY SYSTEM INTERFACE (EHIT) ACTIVITIES 15.1 eHIT Support Services 16. FEDERAL REGULATORY ANALYSIS AND IMPLEMENTATION ACTIVITIES 17.1 Advanced Premium Tax Credit (APTC) Reporting Support Services 17. STATE REGULATORY ANALYSIS AND IMPLEMENTATION ACTIVITIES 17.1 State Level Advanced Premium Tax Credit (SPTC) Reporting Support Services 18. ANALYTICS ENHANCEMENT AND SUPPORT ACTIVITIES 18.1 Analytics Monitoring and Assessment Support services 19. PRINT MAIL CENTER ACTIVITIES 19.1 Print Mail Center Support Services 19.2 Print Mail Service Report 20. GENERAL INNOVATIONS ACTIVITIES 20.1 Private Sector-Like Ideation 20.2 World Class Innovation 20.3 Time to Market SDLC Innovation 21. DATA USAGE INNOVATIONS 21.1 Data Warehouse & Data Analytics Innovations 21.2 Enterprise Data Warehouse Innovations 21.3 Predictive Analytics Innovations 21.4 Outcome Realization Innovations 22. CONSUMER JOURNEY & EXPERIENCE INNOVATIONS 22.1 Consumer Journey & Experience Innovations 22.2 Assisted Consumer Journey & Experience Innovations 22.3 Consumer Feedback Collection Solution Innovations 22.4 Choice Architecture & Nudging Innovations 23. ARTIFICIAL INTELLIGENCE INNOVATIONS 23.1 Enhancing AI On the Project 23.2 Implementing GenAI On the Project 24. ORGANIZATIONAL INNOVATIONS 24.1 Multi-Sponsor Design Strategy 24.2 Project to Product Management 25. SECURITY INNOVATIONS 25.1 Security Innovations 26. GLOSSARY AND ACRONYMS 26.1 New Acronyms and Terms APPENDIX 1: SOW TO DELIVERABLE TRACEABILITY CHECKLIST APPENDIX 2: DELIVERABLE COMPLIANCE AND VALIDATION CHECKLIST APPENDIX 3: ASSOCIATED ARTIFACTS

Req #	SOW Requirement
5.1.1-02 (new)	The Contractor shall only alter or modify this Deliverable's structure or content with the approval of the State Project Director or designee.
5.1.1-03 (new)	The State identifies and associates the following artifacts to the Program Support Plan. The Contractor shall adopt, update, maintain, and deliver these artifacts in accordance with Appendix 3 of this deliverable including, but not limited to: • Postage Usage Report • Ad Hoc Requests Process Guide • General Audit Process • SharePoint Audit and Policy Request Process • Batch fallout support • Carrier renewal reconciliation file • CMS reporting and CMS performance stats (i.e., average concurrent users, unique visits, etc.) • Covered CA Arbitration E-Signature Reports (from Enrollment) • Daily Batch Summary-Fax • Daily Batch Summary-Mail • Daily Inbound Report • Daily Mail Run Data File (MRDF) • Daily Outbound Report • Daily Postage Balance • IRS 1095 reporting • Marketing and Outreach (e.g., assisters, delegates, service channels) • Monthly Print Production SLA Report • Monthly SLA Inbound • Open Enrollment reports • Per receipt each file Daily Acknowledgement File • Postage Use Report • Program transition population reports • Renewal reports • ROP Reporting Automatically discontinue members after 90 days • Truven data file • Analytics Monitoring Support Services • Application Maintenance Services • BOT Services • Customer Experience • Eligibility System Interface (eHIT) Support Services? • Federal Regulatory Analysis and Implementation Services • IDP Services • Postage Usage Report Process • Print Mail Center Services • Research and Strategy Services • ROP Batch Services • Salesforce Application Maintenance Services • State Level Advanced Premium Tax Credit Reporting Services ? • <u>TURF Update Process Flow (Small Notices Change Services)</u> • <u>HCD Process and SOPs</u>
5.1.1-04 (new)	The Contractor shall, in collaboration with the State, update the CD-5.1-1 - Program Support Plan, to include additional sections covering the following topics: 1. Service Center Maintenance Services 2. Usability Research Activities 3. Consumer Feedback Collection Solution Innovations
5.1.1-05 (new)	The Contractor shall update or develop the following appendices and attach them to the Program Support Plan:

Req #	SOW Requirement
	Appendix 1—SOW to Deliverable Traceability Checklist Description: A table where the Contractor identifies the SOW requirements for this Deliverable, as specified within SOW Section 8, DELIVERABLES, and includes but is not limited to: 1. SOW Requirement ID # 2. SOW Requirement Text 3. Requirement Traceability (Contractor identified traceability from the requirements to the Deliverable) 4. Requirement Fulfillment (Define how the Contractor has fulfilled the SOW requirements in the Deliverable) Appendix 2—Deliverable Compliance and Validation Checklist Description: A QA Checklist that includes, but is not limited to: 1. Deliverable Section Number and Title 2. Deliverable Requirement Statement(s) 3. Requirement Completion (How the Contractor has complied with or will comply with the requirement statements within the Deliverable) 4. Validation Method (The method the Contractor used to validate Deliverable compliance) 5. The Contractor's QA Manager sign-off on compliance Appendix 3—Associated Artifacts Description: An extract from the Project Artifact Inventory List of artifacts associated with this Deliverable, and will include but is not limited to the following examples: 1. Artifact Name 2. Associated Parent DEL 3. State Approver 4. SI Point of Contact 5. Review Frequency 6. Submission Frequency 7. Artifact File Format 8. Artifact Location (e.g., SharePoint breadcrumb) 9. Link to artifact
5.1.1-06 (new)	The Contractor shall adopt and maintain all Project Artifacts that are associated with this service in the Project Artifact Inventory and manage them in accordance with the Project Artifact process.

5.1.2 Program Support Execution

Table 5-2: Program Support Execution

Req #	SOW Requirement
5.1.2-01 (new)	The Contractor shall staff, manage, lead and execute all Program Support activities on CalHEERS as defined in this Statement of Work and in accordance with the CD-5.1-1 – Program Support Plan.
5.1.2-02 (new)	The Contractor shall collaborate with the State to develop and maintain any new Project Artifacts necessary to support this section. New artifacts shall be added to the Project Artifacts Repository and managed in accordance with the Project Artifact process.

5.2 CONSUMER EXPERIENCE SERVICES

The Contractor shall provide Human Centered Design services in support of Consumer Experience, as described within the requirements of Table 5-3, Consumer Experience Support

(below). These services are currently being provided via T&M CRs. See example CR 274047 in the Bidders' Library.

5.2.1 Consumer Experience Support

The Contractor shall provide the consumer experience services described in this section and include Standard Operating Procedures to document how these services are carried out.

Table 5-3: Consumer Experience Support

Req #	SOW Requirement
5.2.1-01 (new)	The Contractor shall staff, manage, lead and execute all Consumer Experience Support activities on CalHEERS as defined in this Statement of Work and in accordance with the CD-5.1-1 – Program Support Plan, and HCD Standard Operating Procedures.
5.2.1-02 (new)	The Contractor shall provide a User Experience (UX) team to provide Consumer Experience services using iterative processes and tools that will provide functional design solutions that can then be implemented into the CalHEERS System.
5.2.1-03 (new)	The Contractor shall develop, enhance, deliver and maintain a project artifact that documents the CalHEERS Human Centered Design (HCD) processes, which produce at a minimum the following outputs: 1. Feature discovery and research activities 2. Feature definition 3. Design of small to large features 4. Delivery of functional design artifacts
5.2.1-04 (new)	The Contractor shall assess and innovate the HCD processes ensuring they remain current with industry standards, best practices, and lessons learned allowing for an improved service delivery. All enhancements to the process will be documented and approved by the state via the project artifact.
5.2.1-05 (new)	The Contractor shall make any configuration or platform change required to support existing tools.
5.2.1-06 (new)	The Contractor shall acquire and configure any new tools used to support Consumer Experience Services. The State will pay associated cloud services and licenses for approved tools upgrades.
5.2.1-07 (new)	The Contractor shall assess and develop a process, in concert with the CalHEERS Project State Team to ensure that identified modifications are documented and implemented within 30 days of the approval of changes to the process.
5.2.1-08 (new)	The Contract shall on an annual basis assess the process documentation with results being shared with the application State teams to ensure that there is an agreement of the assessment and that outcomes are determined with every approved update to the process.
5.2.1-09 (new)	The Contractor shall maintain a UX team with a consistent number of resources to address improvement in Consumer Experience as defined by the state to ensure that the CalHEERS user is provided with a clear and concise flow when performing all eligibility and enrollment tasks within the CalHEERS portal(s).
5.2.1-10 (new)	The Contractor shall adopt and maintain all Project Artifacts that are associated with this service in the Project Artifact Inventory and manage them in accordance with the Project Artifact process.
5.2.1-11 (new)	The Contractor shall collaborate with the State to develop and maintain any new Project Artifacts necessary to support this section. New artifacts shall be added to the Project Artifacts Repository and managed in accordance with the Project Artifact process.

5.3 REASONABLE OPPORTUNITY PERIOD (ROP) BATCH SERVICES

The Contractor shall provide ROP Batch services as described within the requirements of Table 5-4, ROP Batch Services (below). These services are currently being provided via T&M CRs. See example CR 165890 in the Bidders' Library.

5.3.1 ROP Batch Services

The Contractor shall provide the ROP support services described in this section.

Table 5-4: ROP Batch Services

Req #	SOW Requirement
5.3.1-01 (new)	The Contractor shall staff, manage, lead and execute all ROP Batch Services on CalHEERS as defined in this Statement of Work and in accordance with the CD-5.1-1 – Program Support Plan.
5.3.1-02 (new)	The Contractor shall provide a project artifact that will adopt, maintain, and enhance the existing ROP Batch Services process(es) required to perform these services in the most efficient manner to the state.
5.3.1-03 (new)	Any documentation required to support updates to the CalHEERS System can be submitted via a No Cost Change Request.
5.3.1-04 (existing)	The Contractor shall evaluate and implement changes associated with the Federal Poverty Level Cost of Living Adjustments (COLA).
5.3.1-05 (Modified)	The Contractor shall, through ongoing, year-round efforts, evaluate and implement changes associated with all annual tax filing forms, notices and interface files for the Internal Revenue Services (IRS) and the Franchise Tax Board (FTB).
5.3.1-06 (new)	The Contractor shall adopt and maintain all Project Artifacts that are associated with this service in the Project Artifact Inventory and manage them in accordance with the Project Artifact process.
5.3.1-07 (new)	The Contractor shall collaborate with the State to develop and maintain any new Project Artifacts necessary to support this section. New artifacts shall be added to the Project Artifacts Repository and managed in accordance with the Project Artifact process.

5.4 BOT SERVICES

The Contractor shall provide BOT services as described within the requirements of Table 5-5, BOT Services Support (below). These services are currently being provided as T&M CR's. See example CR 266444 in the Bidders' Library.

5.4.1 BOT Services Support

The Contractor shall provide the BOT support services described in this section.

Table 5-5: BOT Services Support

Req #	SOW Requirement
5.4.1-01 (new)	The Contractor shall staff, manage, lead and execute all BOT Services on CalHEERS as defined in this Statement of Work and in accordance with the CD-5.1-1 – Program Support Plan.
5.4.1-02 (new)	The Contractor shall develop, enhance, deliver, and maintain a project artifact that documents the existing BOT Services processes, required to support the existing BOT services, as well as updates associated with new BOT technologies or enhancements implemented to provide these services in the most efficient manner for the state.
5.4.1-03 (new)	The Contractor shall support existing CalHEERS BOT technology and provide assessment, creation, and maintenance of future BOT development for the CalHEERS solution.
5.4.1-04 (new)	The Contractor shall partner with the State to assess and determine how BOT technology can be used to operate as an agent for a user, other program or to simulate a human activity. BOTS will be used to automate certain tasks without specific instructions from a CalHEERS agent, and to replace a repetitive task that a CalHEERS agent would otherwise have to perform.
5.4.1-05 (new)	The Contractor shall adopt and maintain all Project Artifacts that are associated with this service in the Project Artifact Inventory and manage them in accordance with the Project Artifact process.

Req #	SOW Requirement
5.4.1-06 (new)	The Contractor shall collaborate with the State to develop and maintain any new Project Artifacts necessary to support this section. New artifacts shall be added to the Project Artifacts Repository and managed in accordance with the Project Artifact process.

5.5 SMALL CHANGE NOTICES SERVICES

The Contractor shall provide Small Change Notices services as described within the requirements of Table 5-6, Small Change Notices Services (below). These services are currently being provided as T&M CR's See example CR 200128 in the Bidders' Library.

5.5.1 Small Change Notices Services

The Contractor shall provide Small Change Notices Services, previously known as the Text Update Request Form (TURF) support services, as described in this section below.

Table 5-6: Small Change Notices Services

Req #	SOW Requirement
5.5.1-01 (new)	The Contractor shall staff, manage, lead and execute all Small Change Notices Services, previously known as TURF services, on CalHEERS as defined in this Statement of Work and in accordance with the CD-5.1-1 – Program Support Plan.
5.5.1-02 (new)	The Contractor shall adopt, maintain, and enhance the Text Update Request Form (TURF) Process Flow and rename it as the Small Notices Change Services artifact. The artifact will document the Contractor's flexible approach to updating language in Consumer Notices when changes are needed in support of Sponsor request for clarity or errors.
5.5.1-03 (new)	The Contractor shall provide Small Change Notices Services as they relate to text changes only.
5.5.1-04 (new)	The Contractor shall adopt and maintain all Project Artifacts that are associated with this service in the Project Artifact Inventory and manage them in accordance with the Project Artifact process.
5.5.1-05 (new)	The Contractor shall collaborate with the State to develop and maintain any new Project Artifacts necessary to support this section. New artifacts shall be added to the Project Artifacts Repository and managed in accordance with the Project Artifact process.

5.6 SALESFORCE APPLICATION MAINTENANCE SERVICES

The Contractor shall provide Salesforce Application Maintenance services as described within the requirements of Table 5-7, Salesforce Application Maintenance Support Services (below). These services are currently being provided as T&M CR's. See example CR 250129 in the Bidders' Library.

5.6.1 Salesforce Application Maintenance Support

The Contractor shall provide the Salesforce Application Maintenance support services described in this section.

Table 5-7: Salesforce Application Maintenance Support Services

Req #	SOW Requirement
5.6.1-01 (new)	The Contractor shall staff, manage, lead and execute all Salesforce Application Maintenance Support Services on CalHEERS as defined in this Statement of Work and in accordance with the CD-5.1-1 – Program Support Plan.
5.6.1-02 (new)	The Contractor's Salesforce team shall provide functional design solutions for implementation into the Agent/Agency and Enroller Portal Feature of the CalHEERS System.

Req #	SOW Requirement
5.6.1-03 (new)	The Contractor shall evaluate the Salesforce system upgrades to assess and correct any regression issues that may be found.
5.6.1-04 (new)	The Contractor shall evaluate and maintain all existing Enroller Portal reports, screens, and list views to meet the changing needs of the business monthly in the prioritized order as determined by the state.
5.6.1-05 (new)	The Contractor shall provide a project artifact that will adopt, maintain, and enhance the existing Salesforce Application Maintenance Services process(es) required to provide these services in the most efficient manner to the state.
5.6.1-06 (new)	The Contractor shall adopt and maintain all Project Artifacts that are associated with this service in the Project Artifact Inventory and manage them in accordance with the Project Artifact process.
5.6.1-07 (new)	The Contractor shall collaborate with the State to develop and maintain any new Project Artifacts necessary to support this section. New artifacts shall be added to the Project Artifacts Repository and managed in accordance with the Project Artifact process.

5.7 INTELLIGENT DOCUMENT PROCESSING (IDP) SERVICES

The Contractor shall provide the ongoing process services supporting Intelligent Document Processing as described within the requirements of Table 5-8, IDP Support Services (below). These services are currently being provided as T&M CR's. See example CR 274413 in the Bidders' Library.

5.7.1 Intelligent Document Processing Support

The Contractor shall provide the IDP support services described in this section.

Table 5-8: IDP Support Services

Req #	SOW Requirement
5.7.1-01 (new)	The Contractor shall staff, manage, lead and execute all IDP Services on CalHEERS as defined in this Statement of Work and in accordance with the CD-5.1-1 – Program Support Plan.
5.7.1-02 (new)	The Contractor shall provide an IDP team to provide IDP support services to the state.
5.7.1-03 (new)	The Contractor shall continuously monitor, assess and implement changes within the IDP tool that will improve and enhance the ability for documents to be uploaded by the consumer and received through the interface file from the Print Vendor Mail and Fax services. These services include, but are not limited to, the following: 1. UI/UX Improvement and redesign of the Document upload process on the Upload Eligibility Documents and Documents and Correspondence Page. 2. Prevent the upload of Duplicate documents by the Consumer. 3. Fuzzy Name Matching functionality.
5.7.1-04 (new)	The Contractor shall add or revise document types, via no cost CR's, as required to support document verification by IDP.
5.7.1-05 (new)	The Contractor shall trigger corresponding operational tasks to assist in identification and resolution of documents uploaded that failed the IDP verification process.
5.7.1-06 (new)	The Contractor shall adopt and maintain all Project Artifacts that are associated with this service in the Project Artifact Inventory and manage them in accordance with the Project Artifact process.
5.7.1-07 (new)	The Contractor shall collaborate with the State to develop and maintain any new Project Artifacts necessary to support this section. New artifacts shall be added to the Project Artifacts Repository and managed in accordance with the Project Artifact process.

5.8 APPLICATION MAINTENANCE SERVICES

The Contractor shall provide the ongoing process services supporting Application Maintenance as described within the requirements of Table 5-9 Application Maintenance Services. These services are currently being provided as T&M CR's. See example CR 274762 in the Bidders' Library.

5.8.1 Application Maintenance Support

The Contractor shall provide the Application Maintenance support services described in this section.

Table 5-9: Application Maintenance Services

Req #	SOW Requirement
5.8.1-01 (new)	The Contractor shall staff, manage, lead and execute all Application Maintenance Services on CalHEERS as defined in this Statement of Work and in accordance with the CD-5.1-1 – Program Support Plan.
5.8.1-02 (new)	The Contractor shall provide a dedicated team of analysts and developers to provide Application Maintenance services. This team will provide functional design solutions that can be implemented into the CalHEERS System.
5.8.1-03 (new)	The Contractor shall evaluate CalHEERS enhancements to assess and correct any regression issues that may be found.
5.8.1-04 (new)	The Contractor shall evaluate and maintain all existing Enroller Portal reports, screens, and list views to meet the changing needs of the business monthly in the prioritized order, including the Salesforce feature releases (which occur 3 times annually), as determined by the state.
5.8.1-05 (new)	The Contractor shall provide a project artifact that will adopt, maintain, and enhance the existing Application Maintenance Services process(es) required to provide these services in the most efficient manner to the state.
5.8.1-06 (new)	The Contractor shall adopt and maintain all Project Artifacts that are associated with this service in the Project Artifact Inventory and manage them in accordance with the Project Artifact process.
5.8.1-07 (new)	The Contractor shall collaborate with the State to develop and maintain any new Project Artifacts necessary to support this section. New artifacts shall be added to the Project Artifacts Repository and managed in accordance with the Project Artifact process.

5.9 USABILITY RESEARCH SERVICES

The Contractor shall provide the ongoing process services supporting usability research as described within the requirements of Table 5-10, Usability Research Services (below). These services currently being provided as T&M CR's. See example CR 274049 in the Bidders' Library. Additionally, the Contractor shall proactively bring forward recommendations and facilitate informed decisions that help define and support the Sponsor's vision for key strategic outcomes. These recommendations include, but are not limited to, the following:

1. Ensure that CalHEERS is solving the right problems - Problem definition before solutioning
2. Centralize data sources to inform and drive decision-making - Complete data driven decisions
3. Integrate team efforts to reduce redundancies in Discovery work - Efficiently prioritize opportunities
4. Help Sponsors define their vision with HCD as a strategic partner executing on goals - Maximize value
5. Work ahead allowing research to lead, not follow - Be proactive and avoid reactive responses

5.9.1 Usability Research Services

The Contractor shall provide the usability research support services described in this section.

Table 5-10: Usability Research Services

Req #	SOW Requirement
5.9.1-01 (new)	The Contractor shall staff, manage, lead and execute all Usability Research Services on CalHEERS as defined in this Statement of Work and in accordance with the CD-5.1-1 – Program Support Plan.
5.9.1-02 (new)	The Contractor shall adopt, maintain, and enhance the Usability Research Services framework.
5.9.1-03 (new)	The Contractor shall adopt, maintain, and enhance a framework artifact that will include, but is not limited to, the following: 1. Establish, maintain, and update a Vision/North Star 2. Defines and maintains the Key Performance Indicators (KPIs) required to measure success 3. Defines and maintains the Ecosystem Map 4. Defines and maintains a Prioritization Scoring System that will allow the Sponsor's to influence the prioritization of research and analysis efforts
5.9.1-04 (new)	The Contractor shall proactively bring forward recommendations and facilitate informed decisions that help define and support the Sponsor's vision for key strategic outcomes. These recommendations include, but are not limited to, the following: 1. Ensure that CalHEERS has been fully and accurately understood, and documented prior to attempting a solution. 2. Centralize data sources to inform and drive decision-making - Complete data drives decisions 3. Integrate team efforts to reduce redundancies in Discovery work - Efficiently prioritize opportunities 4. Help Sponsors define their vision with HCD as a strategic partner executing on goals - Maximize value 5. Work ahead allowing research to lead, not follow - Be proactive and avoid reactive responses
5.9.1-05 (new)	The Contractor shall adopt and maintain all Project Artifacts that are associated with this service in the Project Artifact Inventory and manage them in accordance with the Project Artifact process.
5.9.1-06 (new)	The Contractor shall collaborate with the State to develop and maintain any new Project Artifacts necessary to support this section. New artifacts shall be added to the Project Artifacts Repository and managed in accordance with the Project Artifact process.

5.10 ELECTRONIC HEALTH INFORMATION TRANSFER (EHIT) SERVICES

The Contractor shall provide the ongoing process services supporting the EHIT interface as described within the requirements of Table 5-11 Eligibility System Interface Services. These services are currently being provided as T&M CR's. See example CR 178286 in the Bidders' Library.

5.10.1 EHIT Support

The Contractor shall provide the EHIT support services described in this section.

Table 5-11: Eligibility System Interface (eHIT) Services

Req #	SOW Requirement
5.10.1-01 (new)	The Contractor shall develop, maintain and execute a process artifact that will allow for the identification and implementation of changes required to support the expansion of data components required to ensure accurate information share with the California Statewide Automated Welfare System (CalSAWS).
5.10.1-02 (new)	The Contractor shall define a repeatable process to ensure that updates to the Determination Eligibility Response (DER) is initiated by CalHEERS and successfully process by CalSAWS following any update to the data components requested by the Sponsor's organizations.
5.10.1-03 (new)	The Contractor shall define a repeatable process to ensure that updates to the Eligibility Determination Response (EDR) is initiated by CalSAWS and successfully processed by CalHEERS following any update to the data components requested by the Sponsor's organizations.
5.10.1-04 (new)	The Contractor shall define the process for the regular maintenance of the eHIT interfaces including, but not limited to: 1. Regular schema version updates 2. Data element updates or additions related to the interfaces
5.10.1-05 (new)	The Contractor shall adopt and maintain all Project Artifacts that are associated with this service in the Project Artifact Inventory and manage them in accordance with the Project Artifact process.

5.11 FEDERAL REGULATORY ANALYSIS AND IMPLEMENTATION SERVICES

The Contractor shall provide the ongoing process services supporting Federal Regulatory Analysis. These services are being expanded and defined as described within the requirements of Table 5-12 Federal Regulatory Analysis and Implementation Services (below).

5.11.1 Advanced Premium Tax Credit (APTC) Reporting Support

The Contractor shall provide the Federal Regulatory Analysis and Implementation support services described in this section.

Table 5-12: Federal Regulatory Analysis and Implementation Services

Req #	SOW Requirement
5.11.1-01 (new)	The Contractor shall provide a team of analysts familiar with eligibility for and reporting of APTC for Covered California programs.
5.11.1-02 (new)	The Contractor shall evaluate and design, code and implement the changes required by Federal or State regulation to the IRS Tax forms 1095, 1095A, 1095B and 1095C. Any new forms identified for the purposes of Federal Tax Reporting are outside of the scope of this service.
5.11.1-03 (new)	The Contractor shall assess, refine and implement any modifications to the existing CalHEERS architecture and processes associated with Federal Regulation changes that impact the existing technical architect and operating environment.
5.11.1-04 (new)	The Contractor shall provide a project artifact(s) that will adopt, maintain, and enhance the existing Federal Regulatory Analysis and Implementation Services process(es) required to provide these services in the most efficient manner to the state.
5.11.1-05 (new)	The Contractor shall adopt and maintain all Project Artifacts that are associated with this service in the Project Artifact Inventory and manage them in accordance with the Project Artifact process.

5.12 STATE REGULATORY ANALYSIS AND IMPLEMENTATION SERVICES

The Contractor shall provide the ongoing process services supporting as described within the requirements of Table 5-13 California Premium Subsidy Program Services (below).

5.12.1 California Premium Subsidy Program (CAPS) Reporting Support

The Contractor shall provide the State Regulatory Analysis and Implementation support services described in this section.

Table 5-13: California Premium Subsidy Program Services

Req #	SOW Requirement
5.12.1-01 (new)	The Contractor shall provide a team of analysts familiar with eligibility for State level tax credits and reporting of SPTC for Covered California programs.
5.12.1-02 (new)	The Contractor shall evaluate and design, code and implement the changes required by Federal or State regulation to the FTB Tax forms 3895, 3895A, 3895B and 3895C. Any new forms identified for the purposes of Federal Tax Reporting are outside of the scope of this service.
5.12.1-03 (new)	The Contractor shall assess, refine and implement any modifications to the existing CalHEERS architecture and processes associated with State Regulation changes that impact the existing technical architect and operating environment.
5.12.1-04 (new)	The Contractor shall provide a project artifact that will adopt, maintain, and enhance the existing California Premium Subsidy Program Reporting Services process(es) required to provide these services in the most efficient manner to the state.
5.12.1-05 (new)	The Contractor shall adopt and maintain all Project Artifacts that are associated with this service in the Project Artifact Inventory and manage them in accordance with the Project Artifact process.

5.13 DATA & ANALYTICS SUPPORT SERVICES

The Contractor shall provide support services that enable the CalHEERS Data and Analytics program to use data in innovative ways to serve customers, help CalHEERS and its sponsors make data-driven decisions, and foster innovation.

5.13.1 Data & Analytics Services

The Contractor shall provide the Data & Analytics support services described in this section.

Table 5-14: Analytics Monitoring and Assessment Support

Req #	SOW Requirement
5.13.1-01 (new)	The Contractor shall takeover, staff, manage, enhance, lead, and execute the existing data analytics services on CalHEERS. (Examples of such Services include, but are not limited to: CR 183057, CD-4.3-2 Architectural Design Document, CD-6.2-1 Operations Manual, CD-6.3-1 Daily Production Status Report , and CD-6.14-1 Hardware and Software Inventory Management Plan deliverables; Section 6.3, OPERATIONS REPORTING, DATA, AND ANALYTICS deliverables and as described in this section of the SOW)
5.13.1-02 (new)	The Contractor shall adopt, develop, maintain, and enhance a project artifact of the existing Analytics Monitoring Support Services process(es) required to provide these services and reports in the most efficient manner to the state.
5.13.1-03 (new)	The Contractor shall maintain configuration, security, maintenance, access control, and performance monitoring across all tools and systems, including but not limited to AWS S3, Databricks, Snowflake, Tableau, SQL Server, and Okta.
5.13.1-04 (new)	The Contractor shall oversee data quality and lifecycle management, including quality reporting, defect identification, root cause analysis, and mitigation.
5.13.1-05 (new)	The Contractor shall ensure performance monitoring and support to provide timely results to data users from the system.

Req #	SOW Requirement
5.13.1-06 (new)	The Contractor shall provide resources for both regular and new development, triaging new requests and adapting the data and analytics provided to Covered California and DHCS for the evolving business needs or questions. New and ad-hoc data and analytics development support shall include a hybrid agile process, and sufficient bandwidth to develop multiple data products simultaneously (see monthly agile sprint CRs for examples).
5.13.1-07 (new)	The Contractor shall provide Data and Analytics training and technical assistance through various venues such as team-led trainings, ad-hoc support, investigations, and weekly office hour sessions.
5.13.1-08 (new)	The Contractor shall perform ad-hoc analytics and data investigations upon request from sponsors to address emerging or urgent issues.
5.13.1-09 (new)	The Contractor shall track emerging system changes for downstream impacts to data and analytics and shall proactively identify data & analytics improvement opportunities which arise from new system enhancements.
5.13.1-10 (new)	The Contractor shall provide strategic updates and maintain a roadmap to ensure the CalHEERS data and analytics program evolves to meet business needs in a changing landscape, ensuring the data platform grows sustainably while leveraging opportunities for modernization.
5.13.1-11 (new)	The Contractor shall ensure all new data, reporting, and analytics products are fully documented and cataloged, making data about data products and resources accessible, easily understood, and efficiently used by all users. Documentation about every new data assets, products, and reports shall be integrated into a centralized repository with a logical structure that builds a continually-evolving single view of the entire data landscape at CalHEERS.
5.13.1-12 (new)	The Contractor shall provide responsive audit and operational reporting support for federal and state oversight activities and other audits as needed.
5.13.1-13 (new)	The Contractor shall prepare for operational cycles by revisiting the prior year's reports and making modifications for the new year, as appropriate. Reporting and extract requirements are categorized as, but not limited to, the following: 1. Renewal reports 2. Program transition population reports 3. Open Enrollment reports 4. IRS 1095 reporting 5. FTB 3895 reporting 6. Marketing and Outreach (e.g., assisters, delegates, service channels) 7. CMS reporting and CMS performance stats (i.e., average concurrent users, unique visits, etc.) 8. Batch fallout support 9. Carrier renewal reconciliation file 10. ROP Reporting Automatically discontinue members after 90 days 11. Truven data file
5.13.1-14 (new)	The Contractor shall process ad-hoc requests for reports including, but not limited to: • Covered CA Arbitration E-Signature Reports (from Enrollment).
5.13.1-15 (new)	The Contractor shall adopt and maintain all Project Artifacts that are associated with this service in the Project Artifact Inventory and manage them in accordance with the Project Artifact process.
5.13.1-16 (modified)	The Contractor shall adopt or provide, update, and maintain the CalHEERS Business reporting tools (i.e., Tableau and Snowflake) that manage business reporting and analytics on the project.

5.14 PRINT MAIL CENTER SUPPORT

The Contractor shall perform the Print-Mail Services, as further described in this document and consisting generally of providing the Print-Mail Service mail processing, and document management functionality.

5.14.1 Print Mail Center Services

Table 5-15: Print Mail Center Services

Req #	SOW Requirement
5.14.1-01 (new)	The Contractor shall provide a project artifact that will adopt, maintain, and enhance the existing Print Mail Center Services process(es) required to provide these services and reports in the most efficient manner to the state.
5.14.1-02 (modified)	The Contractor shall provide support for printing services and print mail processing for the CalHEERS System, including, but not limited to, the following list: 1. Inbound Mail Processing 2. Outgoing Mail Processing 3. Color Copying 4. Automated Insert 5. Presorting 6. Move Update Service 7. Returned Mail Service 8. Manual Processing 9. Document Classification and Scanning 10. Document Entry into Exchange Work-flow 11. Hard-copy storage for a period less than 6 months 12. Hard-copy storage for a period more than 6 months 13. Secure Document Destruction 14. Alternative Format Services in accessible formats, including but not limited to braille, large font, audio, data, encrypted audio, and encrypted data
5.14.1-03 (new)	The Contractor shall provide all the envelopes needed under the Print and Mail Services, including but not limited to the list below. Additionally, should additional size or types of envelopes become needed by the project, the Contractor shall procure those as well. 1. 6x9 DBL WDO Envelope 2. 9 x 12 Color Envelope 3. #11 Pink Large WDO Envelope 4. #10 STD DBL (9X10) WDO Envelope 5. #10 White large (9X10) WDO Envelope 6. #10 DBL (9X10) WDO Tax Envelope w/tint 7. Green DBL WDO Envelope - Renewal 8. Green DBL WDO Envelope - Special Env
5.14.1-04 (modified)	The Contractor shall manage, maintain, and process all postage for CalHEERS generated mailings, including but not limited to: 1. All notices 2. Forms 3. Letters 4. Postcards 5. Flyers 6. Brochures 7. Enrollment packages 8. Ad hoc mass mailings 9. Any other mailing required for operation of CalHEERS
5.14.1-05 (modified)	The Contractor shall, at a minimum, provide the State with access to the following functionality or reporting: 1. View postage account balances
5.14.1-06 (new)	The Contractor shall notify the State when the cost of external materials (e.g., envelopes, paper, etc.) increases or decreases, possibly triggering (at the sole discretion of the State) a reevaluation of Contract Transaction-Based Costs

Req #	SOW Requirement
5.14.1-07 (new)	In the event the Contractor utilizes one (or more) third party print vendors, or print vendor facilities, the Contractor shall ensure the following: - Print Mail Center services shall be billed to the State utilizing the rates established by the contract Cost Workbook regardless of which print vendor or facility provides the service. - Third party vendors shall comply with all security and confidentiality requirements as the Contractor and as stated in CD-3.1-1 – DEL - Project Management Plan.
5.14.1-08 (new)	The Contractor shall bear the cost of all unused product inventory utilized in providing Print Mail Services.
5.14.1-09 (new)	The Contractor shall work with the State to identify what cost effective service provider(s) the State would like to utilize on the contract for Print Mail Services.
5.14.1-10 (new)	The Contractor shall adopt and maintain all Project Artifacts that are associated with this service in the Project Artifact Inventory and manage them in accordance with the Project Artifact process.

5.14.2 Print Mail Services Report

Table 5-16: Postage Usage Report

Req #	SOW Requirement
5.14.2-01 (existing)	The Contractor shall provide to the State, in conjunction with the associated invoice, a monthly report which provides an accurate accounting of all postage usage.
5.14.2-02 (new)	The Contractor shall provide a project artifact that will adopt, maintain, and enhance the existing Print Mail Center Services process(es) required to provide these services and reports in the most efficient manner to the state.
5.14.2-03 (new)	The Contractor shall adopt and maintain all Project Artifacts that are associated with this deliverable in the Project Artifact Inventory and manage them in accordance with the Project Artifact process.

5.15 GENERAL INNOVATIONS

The following sections 5.15 - 5.20 define the maintenance and operations requirements associated with Innovations that will be carried out under the fixed price, while the Contractor will implement the State Approved Innovations through the existing CalHEERS Change Request Processes. Each section is broken up by Innovation Planning and Innovation Support.

5.15.1 Private Sector-Like Innovation and Ideation

Table 5-17: Private Sector-Like Ideation Planning

Req #	SOW Requirement
5.15.1-01 (new)	The Contractor shall takeover, staff, manage, enhance, lead, and execute the existing Innovation Ideation Process on CalHEERS.
5.15.1-02 (new)	The Contractor shall assess the existing CalHEERS innovation ideation process and compare it to private-sector processes and industry best practices to identify, report on, and recommend improvement opportunities to the State.
5.15.1-03 (new)	The Contractor shall produce and maintain an Innovation Ideation Process Analysis & Recommendations Report that documents the Contractor's understanding of the CalHEERS mission, culture, goals, needed staffing skillsets, and end user needs, and detail out the assessment process, assessment results, and suggested improvement opportunities with State associated disposition.

Req #	SOW Requirement
5.15.1-04 (new)	The Contractor shall coordinate innovation ideation activities with the Contractor OCM team, to ensure seamless planning and execution of OCM related activities, including education and training, around the overall innovation ideation process and individual innovation initiatives at no cost to the State.
5.15.1-05 (new)	The Contractor shall ensure the innovation ideation processes, improvements or enhancements, and innovations integrate into all applicable areas of the CalHEERS project, as identified by the State, including but not limited to: • Project management • Schedule management • Cost management, including cost estimation • Staffing management • Communications management • Quality management • Strategic planning & strategic roadmap • Organizational change management • Change management • Program Support • Operations • Document management
5.15.1-06 (new)	The innovation ideation process shall conclude with the Contractor development of an initial requirement set and an associated change request for each innovation the State approves to move forward with, including the following: • Identification of staffing and skillset needs for the innovation effort. • Identification of the effort needed to complete all phases of the Innovation effort. • Identification of any and all HW/SW necessary for the innovation.

Table 5-18: Private Sector-Like Ideation Support

Req #	SOW Requirement
5.15.1-07 (new)	The Contractor shall provide maintenance and operations support for all innovation ideation processes, improvements or enhancements, and innovations.
5.15.1-08 (new)	The Contractor shall implement any innovation ideation improvements, enhancements, and innovations approved by the State Project Director or designee via Special Change Request.
5.15.1-09 (new)	The Contractor shall provide any additional staff and skillsets necessary to successfully conduct any innovation ideation activity, service, improvements, or enhancements, coordinating with the State to provide the necessary onboarding.
5.15.1-10 (new)	The Contractor shall provide any additional staff and skillsets necessary to successfully conduct any innovation ideation innovations, coordinating with the State to provide the necessary onboarding and rate card information (if applicable).
5.15.1-11 (new)	The Contractor shall coordinate with the State to identify and track innovation ideation goals, success criteria, and key performance indicators (KPI) over the term of the contract in the State desired format at no cost to the State.
5.15.1-12 (new)	The Contractor shall ensure the innovation ideation process addresses the following: Identification of State approved innovation ideation key performance indicators (KPI) Identification of State approved innovation ideation success criteria Consideration of limiting factors to innovation ideation, such as: • Contractor and State staffing compacity • Federal and State legislation and policy impacts • Legal and Ethical Considerations • Identification of State approved process stage-gates for innovation project phases, including entrance and exit criteria.

Req #	SOW Requirement
5.15.1-13 (new)	The Contractor shall ensure the innovation ideation processes, improvements or enhancements, and innovations get updated into all applicable Project Deliverables and/or Artifacts, as agreed to by the State.

5.15.2 World Class Innovation

Table 5-19: World Class Innovation Planning

Req #	SOW Requirement
5.15.2-01 (new)	The Contractor shall takeover, staff, manage, enhance, lead, and execute all existing CalHEERS Innovation Program, strategy, services, activities, improvements or enhancements, and Innovations on CalHEERS, as defined in the CD-3.15-1 - CalHEERS Strategic Plan, and CD-3.15-2 - Strategic Roadmap deliverables.
5.15.2-02 (new)	The Contractor shall develop, deliver, and maintain a CalHEERS Innovation Program Assessment & Recommendations Report, that provides the Contractor's assessment, findings, and Contractor recommended improvements or enhancements associated with the CalHEERS Innovation Program (for State consideration), including, but not limited to, the following: - Inputs from assessing the existing CalHEERS Innovation Program - Contractor shall ensure the CalHEERS Innovation Program Assessment & Recommendations Report assess the following, but is not limited to: - CalHEERS business and innovation goals - Additional staffing needs for the innovation program - Existing innovation program/strategy - Staff inclusion, including learning environment, experimentation, idea generation, and brainstorming, use of Proof of concepts, and demos - Metric tracking and reporting pre/post implementation - Key performance indicators (KPI) and qualitative measurements used to track innovation progress - Planned and actual State return on investment (ROI) tracking - Recommendations for Improvement and innovation
5.15.2-03 (new)	The Contractor shall develop, maintain and facilitate presentations (e.g., PowerPoint presentations conveyed in either digital meetings or physical conference rooms) that accompany the CalHEERS Innovation Program Assessment & Recommendations Report. The presentations shall be developed for, and provided to, CalHEERS State and Contractor staff, project sponsors, as well as any other attendees approved by the State Project Director or Designee.
5.15.2-04 (new)	The Contractor shall develop, update, deliver, and maintain a CalHEERS Innovation Program Plan, that details out the processes for conducting an assessment, reporting assessment results, and identification of recommended improvements and/or innovations for the CalHEERS innovation program, including but not limited to the following: - Defines the CalHEERS business and innovation goals - Implements an innovation strategy with a well-defined process that flows from an idea to implemented innovations - Identifies a dedicated Innovation team, including additional staffing needs - Considers resource capacity on the project - Processes to empower staff, promote learning and innovative thinking - Cultivates a culture of experimentation, idea generation, and brainstorming - Includes the utilization of Proof of concepts, Demos, small project - Schedule for improvement or innovation implementations - Defines, track and reports on metrics pre/post innovation implementation - Identifies key performance indicators (KPI) and qualitative measurements to track innovation program progress and effectiveness - Planned and actual State return on investment (ROI) tracking

Req #	SOW Requirement
5.15.2-05 (new)	The Contractor shall implement any CalHEERS Innovation Program improvements, enhancements, and innovations approved by the State Project Director or designee.

Table 5-20: World Class Innovation Support

Req #	SOW Requirement
5.15.2-06 (new)	The Contractor shall provide maintenance and operations support for all CalHEERS Innovation Program processes, improvements or enhancements, and innovations.
5.15.2-07 (new)	The Contractor shall provide any additional staff and skillsets necessary to successfully conduct any CalHEERS Innovation Program associated activity, service, improvements, or enhancements, coordinating with the State to provide the necessary onboarding.
5.15.2-08 (new)	The Contractor shall provide any additional staff and skillsets necessary to successfully conduct any CalHEERS Innovation Program associated innovations, coordinating with the State to provide the necessary onboarding and rate card information (if applicable).
5.15.2-09 (new)	The contractor shall implement CalHEERS Innovation Program improvements or enhancements, and innovations via the existing CalHEERS change management processes.
5.15.2-10 (new)	The Contractor shall coordinate with the State to identify and track CalHEERS Innovation Program key performance indicators (KPI) over the term of the contract in the State desired format.
5.15.2-11 (new)	The Contractor shall ensure the CalHEERS Innovation Program processes, improvements or enhancements, and innovations integrate into all applicable areas of the CalHEERS project, as identified by the State, including but not limited to: • Project management • Schedule management • Cost management, including cost estimation • Staffing management • Communications management • Quality management • Strategic planning & strategic roadmap • Organizational change management • Change management • Program Support • Operations • Document management
5.15.2-12 (new)	The Contractor shall ensure the Contractor CalHEERS Innovation Program processes, improvements or enhancements, and innovations get updated into all applicable Project Deliverables and/or Artifacts, as agreed to by the State.

5.15.3 Time to Market SDLC Innovation

Table 5-21: Time to Market SDLC Innovation Planning

Req #	SOW Requirement
5.15.3-01 (new)	The Contractor shall develop, deliver, and maintain a Time to Market SDLC Innovation Assessment & Recommendations Report, that provides the Contractor's assessment, findings, and Contractor recommended improvements or enhancements to the CalHEERS software development lifecycle (SDLC) (for State consideration), including, but not limited to, the following: • Inputs from assessing the existing CalHEERS SDLC • Assessment results from analyzing CalHEERS for improvements or enhancements to the SDLC that will reduce the time it takes to implement change requests on CalHEERS • Additional staffing or skillsets needed to support the proposed improvements or enhancements • Schedule for improvement or enhancement implementation • Identification and tracking of metrics pre/post improvement or enhancement implementation • Key performance indicators (KPI) and qualitative measurements to track time to market improvement or enhancement implementation progress • Reporting • Planned and actual State return on investment (ROI) tracking • Schedule for consumer usability testing within SDLC
5.15.3-02 (new)	The Contractor shall develop, maintain and facilitate presentations (e.g., PowerPoint presentations conveyed in either digital meetings or physical conference rooms) that accompany the Time to Market SDLC Innovation Assessment & Recommendations Report. The presentations shall be developed for, and provided to, CalHEERS State and Contractor staff, project sponsors, as well as any other attendees approved by the State Project Director or Designee.
5.15.3-03 (new)	The Contractor shall implement any Time to Market SDLC Innovation improvements, enhancements, and innovations approved by the State Project Director or designee.
5.15.3-04 (new)	The contractor shall implement Time to Market SDLC Innovation improvements, enhancements, and innovations via the existing CalHEERS change management processes.

Table 5-22: Time to Market SDLC Innovation Support

Req #	SOW Requirement
5.15.3-05 (new)	The Contractor shall provide maintenance and operations support for all Time to Market SDLC Innovation processes, improvements or enhancements, and innovations.
5.15.3-06 (new)	The Contractor shall provide any additional staff and skillsets necessary to successfully conduct any Time to Market SDLC Innovation activity, service, improvements, or enhancements, coordinating with the State to provide the necessary onboarding.
5.15.3-07 (new)	The Contractor shall provide any additional staff and skillsets necessary to successfully conduct any Time to Market SDLC Innovations, coordinating with the State to provide the necessary onboarding and rate card information (if applicable).
5.15.3-08 (new)	The Contractor shall coordinate with the State to identify and track Time to Market SDLC Innovation key performance indicators (KPI) over the term of the contract in the State desired format.

Req #	SOW Requirement
5.15.3-09 (new)	The Contractor shall ensure the Time to Market SDLC Innovation processes, improvements or enhancements, and innovations integrate into all applicable areas of the CalHEERS project, as identified by the State, including but not limited to: • Project management • Schedule management • Cost management, including cost estimation • Staffing management • Communications management • Quality management • Strategic planning & strategic roadmap • Organizational change management • Change management • Program Support • Operations • Document management
5.15.3-10 (new)	The Contractor shall ensure the Time to Market SDLC Innovation processes, improvements or enhancements, and innovations get updated into all applicable Project Deliverables and/or Artifacts, as agreed to by the State.

5.16 DATA USAGE & ANALYTICS INNOVATIONS

5.16.1 Data Usage & Analytics Innovations

Table 5-23: Data & Analytics Innovations Planning

Req #	SOW Requirement
5.16.1-01 (new)	The Contractor shall takeover, staff, manage, enhance, lead, and execute all existing Data Management and Data Analytics Innovation activities on CalHEERS, as defined in CD-4.3-2 Architectural Design Document, CD-6.2-1 Operations Manual, CD-6.3-1 Daily Production Status Report, and CD-6.14-1 Hardware and Software Inventory Management Plan deliverables.
5.16.1-02 (new)	The Contractor shall develop, deliver, and maintain a Data Management and Data Analytics Innovation Assessment & Recommendations Report, that provides the Contractor's assessment, findings, and recommended improvements, enhancements or innovations associated with Data and Analytics. The analysis and resulting report will include four components, focusing respectively on: 1) Data and Analytics Program: including data strategy and data governance 2) Data Platform: including architecture and technology for data warehousing and analytics and reporting 3) Analytics and Reporting Development Lifecycle: including expanding curated data domains and the capabilities to respond to new information needs 4) Data Science and Advanced Analytics: including strategies to maximum data value for all aspects of sponsors' missions using AI and innovative research While inter-related and inter-dependent, the four components may be delivered independently, if mutually agreed with State. Each of the four components of the analysis and resulting report will include an assessment of: 1) Sponsor goals for the Data and Analytics innovations 2) Current state, across data domains, infrastructure, personnel, processes 3) Future state, including opportunities to innovate with a focus for all proposals on:

Req #	SOW Requirement
	- o Strategy: proposal should enable CalHEERS to move to the future state in a nimble yet sustainable way, track the metrics and key performance indicators (KPI's) necessary to report progress, identify a schedule for innovation implementation, - o Value: proposal should include and help build concrete measures to track the planned and actual CalHEERS return on investment (ROI), both across the project and specifically within the Data and Analytics domains. Examples of Sponsor goals for the CalHEERS Data and Analytics program are contained in RFP Section 4.5.5.
5.16.1-03 (new)	The Contractor shall develop, maintain and facilitate presentations (e.g., PowerPoint presentations conveyed in either digital meetings or physical conference rooms) that accompany the Data Management and Data Analytics Innovation Assessment & Recommendations Report. The presentations shall be developed for, and provided to, CalHEERS State and Contractor staff, project sponsors, as well as any other attendees approved by the State Project Director or Designee.
5.16.1-04 (new)	The Contractor shall implement any Data Management and Data Analytics improvements, enhancements, and innovations approved by the State Project Director or designee.
5.16.1-05 (new)	The contractor shall implement Data Management and Data Analytics improvements or enhancements, and innovations via the existing CalHEERS change management processes.

Table 5-24: Data & Analytics Innovations Support

Req #	SOW Requirement
5.16.1-06 (new)	The Contractor shall provide maintenance and operations support for all Data Management and Data Analytics processes, improvements or enhancements, and innovations.
5.16.1-07 (new)	The Contractor shall provide any additional staff and skillsets necessary to successfully conduct any Data Management and Data Analytics activity, service, improvements, or enhancements, coordinating with the State to provide the necessary onboarding.
5.16.1-08 (new)	The Contractor shall provide any additional staff and skillsets necessary to successfully conduct any Data Management and Data Analytics innovations, coordinating with the State to provide the necessary onboarding and rate card information (if applicable).
5.16.1-09 (new)	The Contractor shall ensure the Data Management and Data Analytics Innovation processes, improvements or enhancements, and innovations integrate into all applicable areas of the CalHEERS Project, as identified by the State, including but not limited to: • Project management • Schedule management • Cost management, including cost estimation • Staffing management • Communications management • Quality management • Strategic planning & strategic roadmap • Organizational change management • Change management • Program Support • Operations • Document management
5.16.1-10 (new)	The Contractor shall coordinate with the State to identify and track Data Management and Data Analytics Innovation key performance indicators (KPI) over the term of the contract in the State desired format.

Req #	SOW Requirement
5.16.1-11 (new)	The Contractor shall ensure the Data Management and Data Analytics Innovation processes, improvements or enhancements, and innovations get updated into all applicable Project Deliverables and/or Artifacts, as agreed to by the State.

5.16.2 Outcome Realization Innovations

Table 5-25: Outcome Realization Innovations Planning

Req #	SOW Requirement
5.16.2-01 (new)	The Contractor shall takeover, staff, manage, enhance, lead, and execute any existing Outcome Realization services, activities, improvements or enhancements, and Innovations on CalHEERS, as defined in CD-4.2-1 - Change Request Process, and CD-4.2-2 – CR Basis of Estimate (BOE) deliverables.
5.16.2-02 (new)	The Contractor shall produce and maintain an Outcome Realization Innovation Analysis & Recommendations Report that documents the Contractor's understanding of the existing CalHEERS outcome realization process, state desired outcomes, outcome owners, reporting processes, needed staffing skillsets, and recommended improvement opportunities with State associated disposition.
5.16.2-03 (new)	The Contractor shall develop and maintain an Outcome Realization Innovation Plan, which shall include, but not limited to the following: • Inputs from assessing the existing outcome realization process: - o State desired outcomes - o Outcome owners - o Identification and analysis of project data, defining insight data (Learning from existing data/reporting) and hindsight data (Identifying factors impacting outcomes) - o Proposed Improvements with State disposition • Approach to providing outcome realization services going forward, including: - o Staffing - o Process improvement As-is/To-be diagrams - o Schedule for process improvement implementation - o Confirmation of outcomes - o Timeframes/schedule to outcomes - o Outcome measurement (6 -12 months post implementation) - o Comparing actual outcome vs. expected outcomes - o Key performance indicators (KPI) and qualitative measurements to track progress - o Reporting - o State return on investment (ROI) - o System Change Requests as requested by sponsors - o Data analytics processes integrating the following: ▪ Insight (Learning from existing data/reporting) ▪ Hindsight (Identifying factors impacting outcomes) ▪ Foresight (using Data Analysis to understand/anticipate the future)
5.16.2-04 (new)	The contractor shall detail out within the Outcome Realization Innovation Plan how they will implement, execute, mature, and enhance data analytics, including Insight, Hindsight and Foresight.
5.16.2-05 (new)	The Contractor shall develop, maintain and facilitate presentations (e.g., PowerPoint presentations conveyed in either digital meetings or physical conference rooms) that accompany the Outcome Realization Innovation Analysis & Recommendations Report. The presentations shall be developed for, and provided to, CalHEERS State and Contractor staff, project sponsors, as well as any other attendees approved by the State Project Director or Designee.

Req #	SOW Requirement
5.16.2-06 (new)	The Contractor shall implement any outcome realization improvements, enhancements, and innovations approved by the State Project Director or designee.
5.16.2-07 (new)	The contractor shall implement outcome realization associated improvements or enhancements, and innovations via the existing CalHEERS Change Management processes.

Table 5-26: Outcome Realization Innovations Support

Req #	SOW Requirement
5.16.2-08 (new)	The Contractor shall provide maintenance and operations support for all outcome realization associated processes, improvements or enhancements, and innovations.
5.16.2-09 (new)	The Contractor shall provide any additional staff and skillsets necessary to successfully conduct any Outcome Realization activity, service, improvements, or enhancements, coordinating with the State to provide the necessary onboarding.
5.16.2-10 (new)	The Contractor shall provide any additional staff and skillsets necessary to successfully conduct any Outcome Realization innovations, coordinating with the State to provide the necessary onboarding and rate card information (if applicable).
5.16.2-11 (new)	The Contractor shall coordinate with the State to identify and track outcome realization key performance indicators (KPI) over the term of the contract in the State desired format.
5.16.2-12 (new)	The Contractor shall enhance outcome realization, utilizing the Contractor Data Analytics team to investigate and extract from the project's data warehouse and change management processes, to inform process changes to improve state return on its investment.
5.16.2-13 (new)	The Contractor shall integrate the data analytic techniques of Insight, Hindsight, Predictive Analysis and Foresight, ensuring they inform, at a minimum, the following CalHEERS Processes: • Usability Research Services Process • Strategic Planning & 24 Month Roadmap Processes • Prioritization Processes
5.16.2-14 (new)	The Contractor shall ensure the outcome realization processes, improvements or enhancements, and innovations integrate into all applicable areas of the CalHEERS Project, as identified by the State, including but not limited to: • Project management • Schedule management • Cost management, including cost estimation • Staffing management • Communications management • Quality management • Strategic planning & strategic roadmap • Organizational change management • Change management • Program Support • Operations • Document management
5.16.2-15 (new)	The Contractor shall ensure the outcome realization processes, improvements or enhancements, and innovations get updated into all applicable Project Deliverables and/or Artifacts, as agreed to by the State.

5.17 CONSUMER JOURNEY & EXPERIENCE INNOVATIONS

5.17.1 Self-Service Consumer Journey & Experience Innovations

Table 5-27: Self-Service Consumer Journey & Experience Innovations Planning

Req #	SOW Requirement
5.17.1-01 (new)	The Contractor shall takeover, staff, manage, enhance, lead, and execute all existing Self-Service Consumer Innovation activities on CalHEERS, including, but not limited to Consumer Journey, experience, and management of data in SOW 5.2.1 CONSUMER EXPERIENCE SUPPORT.
5.17.1-02 (new)	The Contractor shall develop, update, deliver, and maintain a Self-Service Consumer Innovation Plan, that details out the processes for conducting assessments, reporting assessment results, alignment with sponsor strategic plans, and identification of recommendations for self-service consumer improvements, enhancements or innovations, including but not limited to: • Consumer Journey, including but not limited to: - o Possible and recommended boundaries with a focus on outcome realization - o Consumer Journey Framework, tools, processes, strategies and techniques - o Vision, standards, goals, and desired outcomes - o Measurement details, including metrics ,dashboards, and reporting • Consumer Experience, including but not limited to: - o Experience Framework, tools, processes, strategies and techniques - o A/B Testing - o Web Accessibility Standards - o Surveys and interviews - o Monitoring customer feedback and reviews - o Customer interactions - o Tracking customer retention and churn rates - o Experience Level Agreements - o Any additional metrics captured by the project - o Dashboards and reporting - o Impact Assessment • Consumer 360, including but not limited to: - o Data collection and data management strategies - o Data source connections - o Data quality - o Data standardization - o Data security and privacy - o Data governance - o Unified data view • Service Center Services
5.17.1-03 (new)	The Contractor shall develop, deliver and maintain Self-Service Consumer Innovation Assessment & Recommendations Reports, that provide the Contractor's assessment, findings, and Contractor recommended improvements or enhancements (for State consideration), for Consumer Innovation related topics, including but not limited to: • Consumer Journey, including recommended boundaries • Consumer Experience • Consumer 360 • Service Center Services

Req #	SOW Requirement
5.17.1-04 (new)	The Contractor shall develop, maintain and facilitate presentations (e.g., PowerPoint presentations conveyed in either digital meetings or physical conference rooms) that accompany the Self-Service Consumer Innovation Assessment & Recommendations Reports. The presentations shall be developed for, and provided to, CalHEERS State and Contractor staff, project sponsors, as well as any other attendees approved by the State Project Director or Designee.
5.17.1-05 (new)	The Contractor shall implement any self-service consumer associated improvements, enhancements, and innovations approved by the State Project Director or designee.
5.17.1-06 (new)	The contractor shall implement self-service consumer associated improvements or enhancements, and innovations via the existing CalHEERS change management processes.

Table 5-28: Self-Service Consumer Journey & Experience Innovations Support

Req #	SOW Requirement
5.17.1-07 (new)	The Contractor shall provide <u>maintenance</u> , and operations support for all self-service consumer associated processes, improvements or enhancements, and innovations.
5.17.1-08 (new)	The Contractor shall provide any additional staff and skillsets necessary to successfully conduct any self-service consumer associated activity, service, improvements, or enhancements, coordinating with the State to provide the necessary onboarding.
5.17.1-09 (new)	The Contractor shall provide any additional staff and skillsets necessary to successfully conduct any self-service consumer associated innovations, coordinating with the State to provide the necessary onboarding and rate card information (if applicable).
5.17.1-10 (new)	The Contractor shall ensure that self-service consumer innovation processes, improvements or enhancements, and innovations integrate into all applicable areas of the CalHEERS Project, as identified by the State, including but not limited to: • Project management • Schedule management • Cost management, including cost estimation • Staffing management • Communications management • Quality management • Strategic planning & strategic roadmap • Organizational change management • Change management • Program Support • Operations • Document management
5.17.1-11 (new)	The Contractor shall ensure that all implemented self-service consumer innovation processes, improvements or enhancements, and innovations get updated into all applicable Project Deliverables and/or Artifacts, as agreed to by the State.

5.17.2 Assisted Consumer Journey & Experience Innovations

Table 5-29: Assisted Consumer Journey & Experience Innovations Planning

Req #	SOW Requirement
5.17.2-01 (new)	The Contractor shall takeover, staff, manage, enhance, lead, and execute all existing Agent (an individual who assists a consumer with a Medi-Cal or Covered California application, examples include call center representatives, community health navigators, community non-profit organizations, authorized representatives, licensed insurance agents) assisted innovation activities on CalHEERS SOW 5.2.1 CONSUMER EXPERIENCE SUPPRT.

Req #	SOW Requirement
5.17.2-02 (new)	The Contractor shall develop, update, deliver, and maintain an Assisted Consumer Innovation Plan, that details out the processes for conducting assessments, reporting assessment results, alignment with sponsor strategic plans, and identification of recommended assisted consumer innovation improvements or enhancements of the following existing CalHEERS agent related topics, including but not limited to: - Assisted Consumer Journey, including but not limited to: - Journey Framework, tools, processes, strategies and techniques - Vision, standards, goals, and desired outcomes - Measurement details, including metrics ,dashboards, and reporting - Assisted Consumer Experience, including but not limited to: - Experience Framework, tools, processes, strategies and techniques - A/B Testing - Web Accessibility Standards - Surveys and interviews - Monitoring agent feedback and reviews - Agent interactions - Tracking customer retention and churn rates - Experience Level Agreements - Any additional metrics captured by the project - Dashboards and reporting - Assisted Consumer 360, including but not limited to: - Data collection and data management strategies - Data source connections - Data quality - Data standardization - Data security and privacy - Data governance - Unified data view
5.17.2-03 (new)	The Contractor shall develop, deliver and maintain Assisted Consumer Innovation Assessment & Recommendation Reports, that provide the Contractor's assessment, findings, and Contractor recommended improvements or enhancements (for State consideration), for assisted consumer innovation related topics, including but not limited to: - Agent Journey - Agent Experience - Agent 360
5.17.2-04 (new)	The Contractor shall develop, maintain and facilitate presentations (e.g., PowerPoint presentations conveyed in either digital meetings or physical conference rooms) that accompany the Assisted Consumer Innovation Assessment & Recommendation Reports. The presentations shall be developed for, and provided to, CalHEERS State and Contractor staff, project sponsors, as well as any other attendees approved by the State Project Director or Designee.
5.17.2-05 (new)	The Contractor shall implement any Assisted Consumer associated improvements, enhancements, and innovations approved by the State Project Director or designee.
5.17.2-06 (new)	The contractor shall implement Assisted Consumer associated improvements or enhancements, and innovations via the existing CalHEERS Change Management processes.

Table 5-30: Assisted Consumer Journey & Experience Innovations Support

Req #	SOW Requirement
5.17.2-07 (new)	The Contractor shall provide maintenance and operations support for all Assisted Consumer associated processes, improvements or enhancements, and innovations.

Req #	SOW Requirement
5.17.2-08 (new)	The Contractor shall provide any additional staff and skillsets necessary to successfully conduct any Assisted Consumer associated activity, service, improvements, or enhancements, coordinating with the State to provide the necessary onboarding.
5.17.2-09 (new)	The Contractor shall provide any additional staff and skillsets necessary to successfully conduct any Assisted Consumer associated innovations, coordinating with the State to provide the necessary onboarding and rate card information (if applicable).
5.17.2-10 (new)	The Contractor shall ensure that Assisted Consumer innovation processes, improvements or enhancements, and innovations integrate into all applicable areas of the CalHEERS Project, as identified by the State, including but not limited to: • Project management • Schedule management • Cost management, including cost estimation • Staffing management • Communications management • Quality management • Strategic planning & strategic roadmap • Organizational change management • Change management • Program Support • Operations • Document management
5.17.2-11 (new)	The Contractor shall ensure that all implemented Assisted Consumer innovation processes, improvements or enhancements, and innovations get updated into all applicable Project Deliverables and/or Artifacts, as agreed to by the State.

5.17.3 Consumer Feedback Collection Solution Innovations

Table 5-31: Consumer Feedback Collection Solution Innovations Planning

Req #	SOW Requirement
5.17.3-01 (new)	The Contractor shall takeover, staff, manage, enhance, lead, and execute all consumer feedback and insight activities, services and functionality utilized on CalHEERS, as defined within CD-3.10-1 Quality Management Plan deliverable.
5.17.3-02 (new)	The Contractor shall develop, update, deliver, and maintain a Consumer Feedback Collection Solution Innovation Assessment & Recommendation Report, that provides the Contractor's assessment, findings, and Contractor recommended improvements or innovations associated with consumer feedback collection solution functionality and services (for State consideration), including, but not limited to, the following: • Inputs from assessing the CalHEERS consumer feedback • Assessment of any existing code or functionality already implemented in the system, whether in use or not • Proposed approach to implement consumer feedback or insights via recommended or existing methods (e.g., surveys or A/B Testing), whether via updating and reinstituting existing code/functionality or via implementing an all-new solution • Recommended improvements or enhancements to consumer feedback functionality • Additional staffing or skillsets needed to support the consumer feedback functionality or services • Schedule for reinstituting or implementing consumer feedback, and any improvements or enhancements, or innovations

Req #	SOW Requirement
	- Approach to integration of consumer feedback functionality with the consumer and assisted consumer journey and experience services - Key performance indicators (KPI) and qualitative measurements to track consumer feedback improvement or enhancement, or innovation implementation progress - Reporting - Planned and actual State return on investment (ROI) tracking
5.17.3-03 (new)	The Contractor shall develop, maintain and facilitate presentations (e.g., PowerPoint presentations conveyed in either digital meetings or physical conference rooms) that accompany the Consumer Feedback Collection Solution Innovation Assessment & Recommendations Report. The presentations shall be developed for, and provided to, CalHEERS State and Contractor staff, project sponsors, as well as any other attendees approved by the State Project Director or Designee.
5.17.3-04 (new)	The Contractor shall implement any consumer feedback functionality, improvements, enhancements, and innovations approved by the State Project Director or designee.

Table 5-32: Consumer Feedback Collection Solution Innovations Support

Req #	SOW Requirement
5.17.3-05 (new)	The Contractor shall provide maintenance and operations support for the Consumer Feedback Collection services or functionality on CalHEERS, including improvements or enhancements, and innovations.
5.17.3-06 (new)	The Contractor shall provide any additional staff and skillsets necessary to successfully conduct any Consumer Feedback Collection activity, service, improvements, or enhancements, coordinating with the State to provide the necessary onboarding.
5.17.3-07 (new)	The Contractor shall provide any additional staff and skillsets necessary to successfully conduct any Consumer Feedback Solution Innovations, coordinating with the State to provide the necessary onboarding and rate card information (if applicable).
5.17.3-08 (new)	The Contractor shall ensure that all Consumer Feedback Solution processes, improvements or enhancements, and innovations integrate into all applicable areas of the CalHEERS Project, as identified by the State, including but not limited to: - Project management - Schedule management - Cost management, including cost estimation - Staffing management - Communications management - Quality management - Strategic planning & strategic roadmap - Organizational change management - Change management - Program Support - Operations - Document management
5.17.3-09 (new)	The Contractor shall ensure the consumer feedback processes, improvements or enhancements, and innovations get updated into all applicable Project Deliverables and/or Artifacts, as agreed to by the State.

5.17.4 Choice Architecture & Nudging Innovations

Table 5-33: Choice Architecture & Nudging Innovations Planning

Req #	SOW Requirement
5.17.4-01 (new)	The Contractor shall takeover, staff, manage, enhance, lead, and execute all existing Choice Architecture and Choice Architecture Innovation activities on CalHEERS.
5.17.4-02 (new)	The Contractor shall develop, deliver, and maintain a Choice Architecture Innovation Assessment & Recommendation Report, that provides the Contractor's assessment, findings, and Contractor recommended improvements or enhancements associated with Choice Architecture (for State consideration), including, but not limited to, the following: • Inputs from assessing the existing choice architecture of CalHEERS, including: - o Defaults - o Framing - o Salience - o Progress indicators - o Social proof • Inputs from assessing the existing nudging functionality, including: - o Opt-in/opt-out - o Commitment devices - o Feedback loops - o Gamification • Approach to providing choice architecture innovations, including but not limited to: - o Additional staffing needs for Choice Architecture Innovations - o Contractor Choice Architecture Innovation recommendations, including but not limited to: ▪ Defaults ▪ Framing ▪ Salience ▪ Progress Indicators ▪ Social Proof - o Contractor Nudging Innovations recommendations, including but not limited to: ▪ Opt-in/opt-out ▪ Commitment devices ▪ Feedback loops ▪ Gamification - o Schedule for innovation implementations - o Identification and tracking of Choice Architecture metrics pre/post innovation implementation - o Key performance indicators (KPI) and qualitative measurements to track choice architecture innovation progress - o Reporting - o Planned and actual State return on investment (ROI) tracking
5.17.4-03 (new)	The Contractor shall develop, maintain and facilitate presentations (e.g., PowerPoint presentations conveyed in either digital meetings or physical conference rooms) that accompany the Choice Architecture Innovation Assessment & Recommendation Report. The presentations shall be developed for, and provided to, CalHEERS State and Contractor staff, project sponsors, as well as any other attendees approved by the State Project Director or Designee.
5.17.4-04 (new)	The Contractor shall implement any choice architecture improvements, enhancements, and innovations approved by the State Project Director or designee.
5.17.4-05 (new)	The contractor shall implement choice architecture improvements or enhancements, and innovations via the existing CalHEERS Change Management processes.

Table 5-34: Choice Architecture & Nudging Innovations Support

Req #	SOW Requirement
5.17.4-06 (new)	The Contractor shall provide maintenance and operations support for all choice architecture processes, improvements or enhancements, and innovations.
5.17.4-07 (new)	The Contractor shall provide any additional staff and skillsets necessary to successfully conduct any choice architecture activity, service, improvements, or enhancements, coordinating with the State to provide the necessary onboarding.
5.17.4-08 (new)	The Contractor shall provide any additional staff and skillsets necessary to successfully conduct any choice architecture innovations, coordinating with the State to provide the necessary onboarding and rate card information (if applicable).
5.17.4-09 (new)	The Contractor shall coordinate with the State to identify and track Choice Architecture Innovation key performance indicators (KPI) over the term of the contract in the State desired format.
5.17.4-10 (new)	The Contractor shall ensure the Choice Architecture Innovation processes, improvements or enhancements, and innovations integrate into all applicable areas of the CalHEERS Project, as identified by the State, including but not limited to: • Project management • Schedule management • Cost management, including cost estimation • Staffing management • Communications management • Quality management • Strategic planning & strategic roadmap • Organizational change management • Change management • Program Support • Operations • Document management
5.17.4-11 (new)	The Contractor shall ensure the Choice Architecture Innovation processes, improvements or enhancements, and innovations get updated into all applicable Project Deliverables and/or Artifacts, as agreed to by the State.

5.18 ARTIFICIAL INTELLIGENCE INNOVATIONS

5.18.1 Enhancing AI on the Project

Table 5-35: Enhancing AI on the Project Planning

Req #	SOW Requirement
5.18.1-01 (new)	The Contractor shall takeover, staff, manage, enhance, lead, and execute all Artificial Intelligence (AI) solutions utilized on CalHEERS, including but not limited to the following, and as defined within CD-3.12-1 Enterprise Tools and CD-6.14-1 Hardware and Software Inventory Management Plan deliverables and SOW 5 Section 5.4.1, BOT SERVICES SUPPORT: • Predictive AI Ops (utilizing Dynatrace) • Security Operations (utilizing Google Chronicle) • Intelligence Document Processing (IDP) (utilizing Google AI)
5.18.1-02 (new)	The Contractor shall provide a dedicated AI/GenAI Technical Lead to manage and support all AI Activities on CalHEERS.

Req #	SOW Requirement
5.18.1-03 (new)	The Contractor shall develop, update, deliver, and maintain a CalHEERS AI Innovation Plan, that details out the processes for conducting an assessment, reporting assessment results, and identification of recommended AI improvements or innovations for the CalHEERS AI environment, assessing the environment for, but not limited to: • Data accuracy • Solution accuracy and efficiency • Cost savings • Resource optimization • Improved decision-making and risk management • Scalability and adaptability • Legal, ethical, and security considerations • Speed of deployment and content updates
5.18.1-04 (new)	The Contractor shall produce and maintain a CalHEERS AI Innovation Assessment & Recommendations Report that documents the Contractor's analysis, findings, and recommendations for improvement or enhancement to the CalHEERS AI environment for State consideration.
5.18.1-05 (new)	The Contractor shall develop, maintain and facilitate presentations (e.g., PowerPoint presentations conveyed in either digital meetings or physical conference rooms) that accompany the CalHEERS AI Innovation Assessment & Recommendations Report. The presentations shall be developed for, and provided to, CalHEERS State and Contractor staff, project sponsors, as well as any other attendees approved by the State Project Director or Designee.
5.18.1-06 (new)	The Contractor shall implement any AI improvements, enhancements, and innovations approved by the State Project Director or designee.

Table 5-36: Enhancing AI on the Project Support

Req #	SOW Requirement
5.18.1-07 (new)	The Contractor shall provide maintenance and operations support for all AI on CalHEERS, including improvements, enhancements, and innovations.
5.18.1-08 (new)	The Contractor shall populate and provide to the State, for review and approval, the CalHEERS Artificial Intelligence Risk Assessment Form whenever a proposed solution includes an AI component.
5.18.1-09 (new)	The Contractor shall provide any additional staff and skillsets necessary to successfully conduct any AI activity, service, improvements, or enhancements, coordinating with the State to provide the necessary onboarding.
5.18.1-10 (new)	The Contractor shall provide any additional staff and skillsets necessary to successfully conduct any AI Innovations, coordinating with the State to provide the necessary onboarding and rate card information (if applicable).
5.18.1-11 (new)	The Contractor shall ensure compliance with any current or future Federal or State law, policy, and guideline pertaining to the development, implementation, and operation of AI Solutions (e.g., California Executive Order N-12-23) and ensure the solutions operate in an ethical, transparent, and trustworthy way.
5.18.1-12 (new)	The Contractor shall represent and warrant that the CalHEERS AI products/services do not create unlawful bias.
5.18.1-13 (new)	The Contractor shall ensure the State maintains complete ownership of all AI solutions (including any third-party technology), all inputs and outputs (including any work product or deliverable created from that output), all training data, and any prompts.
5.18.1-14 (new)	The Contractor shall represent and warrant that the Contractor has the right to use any third-party technology that exists in through a license and shall comply with all use restrictions under that license, and that the products/services will not misappropriate, violate, or infringe any third-party IP rights.

Req #	SOW Requirement
5.18.1-15 (new)	The Contractor shall ensure that all Artificial Intelligence Innovation processes, improvements or enhancements, and innovations integrate into all applicable areas of the CalHEERS Project, as identified by the State, including but not limited to: • Project management • Schedule management • Cost management, including cost estimation • Staffing management • Communications management • Quality management • Strategic planning & strategic roadmap • Organizational change management • Change management • Program Support • Operations • Document management
5.18.1-16 (new)	The Contractor shall ensure the Artificial Intelligence Innovation processes, improvements or enhancements, and innovations get updated into all applicable Project Deliverables and/or Artifacts, as agreed to by the State.

5.18.2 Implementing GenAI on the Project

Table 5-37: Implementing GenAI on the Project Planning

Req #	SOW Requirement
5.18.2-01 (new)	The Contractor shall takeover, staff, manage, enhance, lead, and execute all existing Generative Artificial Intelligence (GenAI) Services, solutions, and any related Innovation activities on CalHEERS
5.18.2-02 (new)	The Contractor shall develop, deliver, and maintain a GenAI Innovation Assessment & Recommendation Report, that provides the Contractor's assessment, findings, and Contractor recommended improvements or enhancements and innovations associated with GenAI (for State consideration), including but not limited to the following: • Inputs from assessing the existing GenAI solutions of CalHEERS, including: - o Data Accuracy - o Integration requirements - o Data security measures - o Explanation and source attributions - o Solution Accuracy and reliability - o Resource optimization - o Domain-specific understanding - o Scalability and adaptability - o Legal, ethical, and security considerations - o Speed of deployment and content updates - o Required effort to maintain - o Cost Savings • Approach to providing GenAI innovations, including but not limited to: - o Additional staffing needs for GenAI Innovations - o Contractor GenAI Innovation recommendations, including but not limited to: ▪ Content Generations ▪ Chatbots ▪ Data Analysis ▪ Explanations and Tutoring ▪ Personalized Content ▪ Search and recommendation

Req #	SOW Requirement
	▪ Software code generation ▪ Infrastructure support (e.g. predictive maintenance, incident response, resource optimization, cost optimization, anomaly detection, issue detection and automated response) - o Schedule for innovation implementations - o Identification and tracking of GenAI metrics pre/post innovation implementation - o Key performance indicators (KPI) and qualitative measurements to track GenAI innovation progress - o Reporting - o Planned and actual State return on investment (ROI) tracking
5.18.2-03 (new)	The Contractor shall develop, maintain and facilitate presentations (e.g., PowerPoint presentations conveyed in either digital meetings or physical conference rooms) that accompany the GenAI Innovation Assessment & Recommendation Report. The presentations shall be developed for, and provided to, CalHEERS State and Contractor staff, project sponsors, as well as any other attendees approved by the State Project Director or Designee.
5.18.2-04 (new)	The Contractor shall implement any GenAI improvements, enhancements, and innovations approved by the State Project Director or designee.
5.18.2-05 (new)	The contractor shall implement GenAI improvements or enhancements, and innovations via the existing CalHEERS Change Management processes.

Table 5-38: Implementing GenAI on the Project Support

Req #	SOW Requirement
5.18.2-06 (new)	The Contractor shall provide maintenance and operations support for all GenAI processes, improvements or enhancements, and innovations.
5.18.2-07 (new)	The Contractor shall populate and provide to the State, for review and approval, the CalHEERS Artificial Intelligence Risk Assessment Form whenever a proposed solution includes a GenAI component.
5.18.2-08 (new)	The Contractor shall provide any additional staff and skillsets necessary to successfully conduct any GenAI activity, service, improvements, or enhancements, coordinating with the State to provide the necessary onboarding.
5.18.2-09 (new)	The Contractor shall provide any additional staff and skillsets necessary to successfully conduct any GenAI innovations, coordinating with the State to provide the necessary onboarding and rate card information (if applicable).
5.18.2-10 (new)	The Contractor shall ensure compliance with any current or future Federal or State law, policy, and guideline pertaining to the development, implementation, and operation of AI Solutions (e.g., California Executive Order N-12-23) and ensure the solutions operate in an ethical, transparent, and trustworthy way.
5.18.2-11 (new)	The Contractor shall represent and warrant that the GenAI products/services do not create unlawful bias.
5.18.2-12 (new)	The Contractor shall ensure the State maintains complete ownership of all GenAI solutions (including any third-party technology), all inputs and outputs (including any work product or deliverable created from that output), all training data, and any prompts.
5.18.2-13 (new)	The Contractor shall represent and warrant that the Contractor has the right to use any third-party technology used in a CalHEERS GenAI solution, via providing a copy of the license, and shall comply with all use restrictions under that license, and that the products/services will not misappropriate, violate, or infringe any third-party IP rights.

Req #	SOW Requirement
5.18.2-14 (new)	The Contractor shall ensure the GenAI processes, improvements or enhancements, and innovations integrate into all applicable areas of the CalHEERS Project, as identified by the State, including but not limited to: • Project management • Schedule management • Cost management, including cost estimation • Staffing management • Communications management • Quality management • Strategic planning & strategic roadmap • Organizational change management • Change management • Program Support • Operations • Document management • Consumer Journey
5.18.2-15 (new)	The Contractor shall ensure the GenAI processes, improvements or enhancements, and innovations get updated into all applicable Project Deliverables and/or Artifacts, as agreed to by the State.

5.19 ORGANIZATIONAL INNOVATIONS

5.19.1 Multi-Sponsor Design Strategy

Table 5-39: Multi-Sponsor Design Strategy Planning

Req #	SOW Requirement
5.19.1-01 (new)	The Contractor shall takeover, staff, manage, enhance, lead, and execute all multi-sponsor design strategy services, including any innovation activities on CalHEERS.
5.19.1-02 (new)	The Contractor shall develop, deliver, and maintain a Multi-sponsor Design Strategy Innovation Assessment & Recommendations Report, that provides the Contractor's assessment, findings, and Contractor recommended improvements or innovations associated with the CalHEERS design strategy (for State consideration), including, but not limited to, the following: • Inputs considered pertaining to the implementation of a multi-sponsor design strategy • Assessment results that address, the following, but not limited to: - o Sponsor design expectations - o Benefits of implementing a multi-sponsor design strategy, including: ▪ Shared cost effectiveness ▪ Increased (shared) marketing budget ▪ Marketing synergy ▪ Increased return on investment (ROI) from marketing collaboration ▪ A seamless and consistent consumer experience - o Metrics to monitor and measure success
5.19.1-03 (new)	The Contractor shall develop, maintain and facilitate presentations (e.g., PowerPoint presentations conveyed in either digital meetings or physical conference rooms) that accompany the multi-sponsor design strategy Innovation Assessment & Recommendations Report. The presentations shall be developed for, and provided to, CalHEERS State and Contractor staff, project sponsors, as well as any other attendees approved by the State Project Director or designee.

Req #	SOW Requirement
5.19.1-04 (new)	The Contractor shall develop, update, deliver, and maintain a Multi-sponsor Design Strategy Implementation Plan, that details out the processes for conducting an assessment, reporting assessment results, and an implementation approach for the Multi-sponsor Design Strategy, including but not limited to the following: • Defined design goals of each participating sponsor • Proposed implementation approach for the multi-sponsor design strategy • Defined design conflict resolution process • Multi-sponsor design communication processes • Additional staffing needs to support the multi-sponsor design strategy activities • Schedule for implementing the multi-sponsor design strategy • Key performance indicators (KPI) and qualitative measurements to track multi-sponsor design strategy progress • Reporting • Planned and actual State return on investment (ROI) tracking
5.19.1-05 (new)	The Contractor shall implement any multi-sponsor design strategy improvements, enhancements, and innovations approved by the State Project Director or designee.
5.19.1-06 (new)	The contractor shall implement multi-sponsor design strategy improvements, enhancements, and innovations via the existing CalHEERS Change Management processes.

Table 5-40: Multi-Sponsor Design Strategy Support

Req #	SOW Requirement
5.19.1-07 (new)	The Contractor shall provide maintenance and operations support for all multi-sponsor design strategy processes, improvements or enhancements, and innovations.
5.19.1-08 (new)	The Contractor shall provide any additional staff and skillsets necessary to successfully conduct any multi-sponsor design strategy activity, service, improvements, or enhancements, coordinating with the State to provide the necessary onboarding.
5.19.1-09 (new)	The Contractor shall provide any additional staff and skillsets necessary to successfully conduct any multi-sponsor design strategy innovations, coordinating with the State to provide the necessary onboarding and rate card information (if applicable).
5.19.1-10 (new)	The Contractor shall coordinate with the State to identify and track multi-sponsor design strategy Innovation key performance indicators (KPI) over the term of the contract in the State desired format.
5.19.1-11 (new)	The Contractor shall ensure the multi-sponsor design strategy processes, improvements or enhancements, and innovations integrate into all applicable areas of the CalHEERS Project, as identified by the State, including but not limited to: • Project management • Schedule management • Cost management, including cost estimation • Staffing management • Communications management • Quality management • Strategic planning & strategic roadmap • Organizational change management • Change management • Program Support • Operations Document management
5.19.1-12 (new)	The Contractor shall ensure the multi-sponsor design strategy processes, improvements or enhancements, and innovations get updated into all applicable Project Deliverables and/or Artifacts, as agreed to by the State.

5.19.2 Project to Product Management

Table 5-41: Project to Product Management Planning

Req #	SOW Requirement
5.19.2-01 (new)	The Contractor shall takeover, staff, manage, enhance, lead, and execute any existing project-to-product management process, activity, or innovation on CalHEERS.
5.19.2-02 (new)	The Contractor shall produce and maintain a Project-to-Product Management Innovation Analysis & Recommendations Report that documents the Contractor's understanding of the CalHEERS mission, culture, goals, needed staffing skillsets, and end user needs, and detail out the assessment process, assessment results, recommended as-is and to-be organizational charts, and suggested improvement opportunities with State associated disposition.
5.19.2-03 (new)	The Contractor shall develop, maintain and facilitate presentations (e.g., PowerPoint presentations conveyed in either digital meetings or physical conference rooms) that accompany the Project-to-Product Management Innovation Assessment & Recommendation Report. The presentations shall be developed for, and provided to, CalHEERS State and Contractor staff, project sponsors, as well as any other attendees approved by the State Project Director or designee.
5.19.2-04 (new)	The Contractor shall develop, update, deliver, and maintain a CalHEERS Project-to-Product Management Innovation Plan, that includes inputs from the associated analysis and recommendation report and details out the process for implementing the State approved recommended project-to-product management innovations for CalHEERS, including but not limited to the following: • Define the CalHEERS product vision • Define user needs • Proposed staffing re-organization • Recommended development methodology • Proposed reprioritization of product features based on value to end users • Prosci OCM process for educating the project and sponsors on the project-to-product management innovation(s) • OCM process for implementing project-to-product management innovation(s) • Proposed key performance indicators for tracking the project-to-product management innovation progress • Continual improvement/feedback process loop
5.19.2-05 (new)	The Contractor shall implement any project-to-product management improvements, enhancements, and innovations approved by the State Project Director or designee.
5.19.2-06 (new)	The contractor shall, when applicable, implement project-to-product management improvements or enhancements, and innovations via the existing CalHEERS Change Management processes.

Table 5-42: Project to Product Management Support

Req #	SOW Requirement
5.19.2-07 (new)	The Contractor shall provide maintenance and operations support for all project-to-product management processes, improvements or enhancements, and innovations.
5.19.2-08 (new)	The Contractor shall provide any additional staff and skillsets necessary to successfully conduct any project-to-product management activity, service, improvements, or enhancements, coordinating with the State to provide the necessary onboarding.
5.19.2-09 (new)	The Contractor shall provide any additional staff and skillsets necessary to successfully conduct any project-to-product management innovations, coordinating with the State to provide the necessary onboarding and rate card information (if applicable).
5.19.2-10 (new)	The Contractor shall coordinate with the State to identify and track project-to product management innovation goals, success criteria, and key performance indicators (KPI) over the term of the contract in the State desired format.

Req #	SOW Requirement
5.19.2-11 (new)	The Contractor shall coordinate project-to-product management innovation activities with the Contractor OCM team, to ensure seamless planning and execution of OCM related activities, including education, training, and execution of project-to-product management innovation initiatives.
5.19.2-12 (new)	The Contractor shall ensure the project-to-product management processes, improvements or enhancements, and innovations integrate into all applicable areas of the CalHEERS Project, as identified by the State, including but not limited to: • Project management • Schedule management • Cost management, including cost estimation • Staffing management • Communications management • Quality management • Strategic planning & strategic roadmap • Organizational change management • Change management • Program Support • Operations • Document management
5.19.2-13 (new)	The Contractor shall ensure the project-to-product management processes, improvements or enhancements, and innovations get updated into all applicable Project Deliverables and/or Artifacts, as agreed to by the State.

5.20 SECURITY INNOVATIONS

5.20.1 Security Innovations

Table 5-43: Security Innovations Planning

Req #	SOW Requirement
5.20.1-01 (new)	The Contractor shall takeover, staff, manage, enhance, lead, and execute all Security Services, solutions, and any related Innovation activities on CalHEERS.
5.20.1-02 (new)	The Contractor shall develop, deliver, and maintain a Security Innovation Assessment & Recommendation Report, that provides the Contractor's assessment, findings, and Contractor recommended improvements or enhancements and innovations associated with security (for State consideration), including but not limited to the following: • Contractor assessment process • Inputs from assessing the existing CalHEERS' security environment, including, but not limited to: - o Threat analysis - o Vulnerability assessment - o Access control assessment - o Network security review - o Data protection assessment - o Application security analysis - o Incident response plan evaluation - o Compliance assessment - o Third-party vendor management • Approach for providing the recommended Security Innovations, including but not limited to: - o Additional staffing needs for security services and security innovations - o Contractor security Innovation recommendations to improve CalHEERS' security posture and reduce risk of cyberattack via:

Req #	SOW Requirement
	▪ Advanced threat detection ▪ Real-time Monitoring ▪ Automated incident response ▪ Reduced False Positives ▪ Predictive Analytics ▪ User Behavior Analysis ▪ Vulnerability Assessment - o Contractor security Innovation recommendations to improve CalHEERS' security availability risk reduction via: ▪ Procedures for point-in-time recovery to a cloud host region other than the region hosting Production Environment ▪ Procedures for establishing interface connections to a recovered instance of Production Environment in a cloud host region other than the region normally hosting the Production Environment - o Schedule for security innovation implementations - o Identification and tracking of security innovation metrics pre/post innovation implementation - o Key performance indicators (KPI) and qualitative measurements to track security innovation progress - o Reporting - o Planned and actual State return on investment (ROI) tracking
5.20.1-03 (new)	The Contractor shall develop, maintain and facilitate presentations (e.g., PowerPoint presentations conveyed in either digital meetings or physical conference rooms) that accompany the Security Innovation Assessment & Recommendation Report. The presentations shall be developed for, and provided to, CalHEERS State and Contractor staff, project sponsors, as well as any other attendees approved by the State Project Director or designee.
5.20.1-04 (new)	The Contractor shall implement any security improvements, enhancements, and innovations approved by the State Project Director or designee.
5.20.1-05 (new)	The contractor shall implement security improvements or enhancements, and innovations via the existing CalHEERS Change Management processes.

Table 5-44: Security Innovations Support

Req #	SOW Requirement
5.20.1-06 (new)	The Contractor shall provide maintenance and operations support for all security processes, improvements or enhancements, and innovations.
5.20.1-07 (new)	The Contractor shall provide any additional staff and skillsets necessary to successfully conduct any Security Innovation activity, service, improvements or enhancements, coordinating with the State to provide the necessary onboarding.
5.20.1-08 (new)	The Contractor shall provide any additional staff and skillsets necessary to successfully conduct any Security Innovations, coordinating with the State to provide the necessary onboarding and rate card information (if applicable).
5.20.1-09 (new)	The Contractor shall coordinate with the State to identify and track security Innovation key performance indicators (KPI) over the term of the contract in the State desired format.
5.20.1-10 (new)	The Contractor shall ensure compliance with all current or future Federal or State law, policy, and guidelines and security standards applicable to CalHEERS.
5.20.1-11 (new)	The Contractor shall represent and warrant that the AI security products/services do not create unlawful bias. (See Appendix A-1, GENERAL PROVISIONS, <u>Section-Paragraph 28 – INDEMNIFICATION</u>).
5.20.1-12 (new)	The Contractor shall ensure the State maintains complete ownership of all CalHEERS AI security solutions (including any third-party technology), all inputs and outputs (including any work product or deliverable created from that output), all training data, and any prompts.

Req #	SOW Requirement
5.20.1-13 (new)	The Contractor shall represent and warrant that the Contractor has the right to use any third-party technology used in CalHEERS' Security solutions, via providing a copy of the license, and shall comply with all use restrictions under that license, and that the products/services will not misappropriate, violate, or infringe any third-party IP rights.
5.20.1-14 (new)	The Contractor shall ensure the Security processes, improvements or enhancements, and innovations integrate into all applicable areas of the CalHEERS Project, as identified by the State, including but not limited to: • Project management • Schedule management • Cost management, including cost estimation • Staffing management • Communications management • Quality management • Strategic planning & strategic roadmap • Organizational change management • Change management • Program Support • Operations • Document management
5.20.1-15 (new)	The Contractor shall ensure the Security processes, improvements or enhancements, and innovations get updated into all applicable Project Deliverables and/or Artifacts, as agreed to by the State.

SOW SECTION 6 OPERATIONS REQUIREMENTS

SOW SECTION 6 – OPERATIONS REQUIREMENTS

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6 OPERATIONS REQUIREMENTS

The Contractor is responsible for the California Healthcare Eligibility, Enrollment, and Retention System (CalHEERS) Operations, to include planning, execution, batch processing, transaction processing, interface support, coding, defect correction, reconciliation, reporting, performance monitoring, capacity planning and sizing, technology recovery, development and delivery of Operational Deliverables, upgrades, and evaluating and resolving Operational issues.

Please note that this section of the Sstatement of wWork (SOW) references multiple sets of standards, which are subject to change over time. Please refer to Appendix A-2, SPECIAL PROVISIONS, Section 7.7, UPDATES TO STANDARDS, REGULATIONS, AND CODES, regarding project processes around standard updates.

6.1 OPERATIONS PLANNING AND MANAGEMENT

The Contractor is responsible for providing Services to support the daily Operation and administration of the CalHEERS Project and the execution of the Operations Plan. The Contractor is responsible for making sure that scheduled System Operations are performed effectively and efficiently to meet the CalHEERS business and technical requirements, and System service levels.

6.1.1 Operations Plan

The Operations Plan addresses the operations for all CalHEERS components ranging from the operating system to the transaction batch jobs. The Operations Plan coordinates all of the plans required to support ongoing Operations such as the CalHEERS data management, network, and System Security Plans.

Table 6-1: Operations Plan (CD-6.1-1)

Req #	SOW Requirement
6.1.1-01 (modified)	The Contractor shall adopt, enhance, deliver, and maintain the CD-6.1-1 - Operations Plan, which includes but is not limited to: 1. INTRODUCTION 1.1 Purpose 1.2 List of Reference Documents 1.3 Audience 2. SUMMARY 2.1 Scope 3. APPROACH 3.1 Introduction 3.2 Approach and Update Methodology 3.3 Operations Tools 3.4 Standard Operating Procedures 3.5 Operations Deliverables Hierarchy and DEL Update Schedule 4. ASSUMPTIONS, CONSTRAINTS, AND RISKS 4.1 Assumptions 4.2 Constraints 4.3 Risks 5. REQUIREMENTS 6. ROLES AND RESPONSIBILITIES 7. OPERATIONS DELIVERABLES OVERVIEW 7.1 CD-6.15-1 Problem Management Plan

Req #	SOW Requirement
	7.2 CD-6.2-2 Technical Change Management Plan 7.3 CD-6.14-1 Hardware/Software Ticket Resolution Process 7.4 CD-6.14-1 Hardware and Software Inventory 7.4.1 Asset Inventory Reports 7.5 CD-6.9-1 Data Integrity Plan 7.6 CD-6.13-1 System Performance Plan 7.7 CD-6.2-1 Operations Manual 7.8 CD-6.2-3 Network Management Plan 7.9 CD-6.2-4 Capacity Management Plan 7.10 CD-6.5-1 Interface Control Document 7.11 CD-6.6.1 Technology Refresh Management Process 7.11.1 CD-6.6-2 Technology Refresh Assessment Report 7.11.2 CD-6.6-3 Technology Refresh Implementation Plan 7.12 CD-6.8-1 Data Retention, Backup and Recovery Plan 7.12.1 Data Retention and Archive Plan 7.13 CD-6.10-1 Technology Recovery Plan 7.13.1 Damage Assessment Report 7.13.2 Data Restoration/Assessment Plan 7.13.3 Technology Recovery Plan Results 7.14 CD-6.11-1 Business Continuity Plan 7.15 CD-6.17-1 Hosting Services Plan 7.16 CD-6.3-2 Operations Reporting Dashboard 7.17 CD-6.3-1 Daily Production Status Report 7.18 CD-6.7-1 System Security Plan CD-6.7-2 Safeguard Security Report 7.18.1 System Security Briefing 7.18.2 Information Security Risk Assessment 7.18.3 Security Incident Report 7.18.4 System Risk Management Plan (Business Continuity Plan) 8. GLOSSARY AND ACRONYMS APPENDIX 1: SOW TO DELIVERABLE TRACEABILITY CHECKLIST APPENDIX 2: DELIVERABLE COMPLIANCE AND VALIDATION CHECKLIST APPENDIX 3: ASSOCIATED ARTIFACTS APPENDIX 4: STANDARDS MAPPING
6.1.1-02 (new)	The Contractor shall only alter or modify this Deliverable's structure or content with the approval of the State Project Director or designee.
6.1.1-03 (modified)	The Operations Manual shall be prepared in accordance with current standards. As new versions of standards are available, adoption of the new standard will be considered through the change control process and approved by the State Project Director or designee: 1. ISO/IEC/IEEE 16326 - Systems and Software Engineering - Life Cycle Processes -Project Management (5.7 - Product Delivery, 5.8.5.1 - Documentation, 5.9 – Additional Plans) 2. ISO/IEC/IEEE 15289 - Systems and Software Engineering - Content of life-cycle information items (documentation) (10.15 - Concept of Operations, 10.44 – Maintenance Plan, 10.45 - Maintenance Procedure, 10.48 - Operational test procedure) pertaining to Operations Management.
6.1.1-04 (new)	The State identifies and associates the following artifacts to the Operations Plan. The Contractor shall adopt, update, maintain, and deliver these artifacts in accordance with Appendix 3 of this Deliverable including, but not limited to: • Enrollment Microservices developer guide • How to Log Time in JIRA • Infrastructure Advisory Committee Process • Joint Application Design Guidelines

Req #	SOW Requirement
	• Navigating Sunflower Process Guide • Operations Manual Frequently Asked Questions • Run a Workload Test • Technology Recovery Plan Results • SOPTracker
6.1.1-05 (new)	The Contractor shall adopt and maintain all Project Artifacts that are associated with this Deliverable in the Project Artifact Inventory and manage them in accordance with the Project Artifact process.
6.1.1-06 (new)	The Contractor shall update the Operations Plan in include a section on Technology Refresh Management. This section shall be incorporated into the existing Operations Plan to describe the approach, strategy, and methodology used to oversee, plan for, and execute Technology Refresh activities in a repeatable and strategic manner. The section shall also include the relationship and interactions with the Technology Refresh Plan, Technology Refresh Assessment Report, as well as the relationship to the CR Process, to make interactions consistent, streamlined, and compatible with one another.
6.1.1-07 (new)	The Contractor shall update the following appendices and attach them to the Operations Plan: Appendix 1—SOW to Deliverable Traceability Checklist Description: A table where the Contractor identifies the SOW requirements for this Deliverable, as specified within SOW Section 8, DELIVERABLES, and includes but is not limited to: 1. SOW Requirement ID # 2. SOW Requirement Text 3. Requirement Traceability (Contractor identified traceability from the requirements to the Deliverable) 4. Requirement Fulfillment (Define how the Contractor has fulfilled the SOW requirements in the Deliverable) Appendix 2—Deliverable Compliance and Validation Checklist Description: A QA Checklist that includes, but is not limited to: 1. Deliverable Section Number and Title 2. Deliverable Requirement Statement(s) 3. Requirement Completion (How the Contractor has complied with or will comply with the requirement statements within the Deliverable) 4. Validation Method (The method the Contractor used to validate Deliverable compliance) 5. The Contractor's QA Manager sign-off on compliance Appendix 3—Associated Artifacts Description: An extract from the Project Artifact Inventory List of artifacts associated with this Deliverable, and will include but is not limited to the following examples: 1. Artifact Name 2. Associated Parent DEL 3. State Approver 4. SI Point of Contact 5. Review Frequency 6. Submission Frequency 7. Artifact File Format 8. Artifact Location (e.g., SharePoint breadcrumb) 9. Link to artifact

6.1.2 Operations Planning and Management Execution

Table 6-2: Operations Planning and Management Execution

Req #	SOW Requirement
6.1.2-01 (new)	The Contractor shall staff, manage, lead and execute Operations on CalHEERS as defined in this statement of work and in accordance with the Operations Plan.
6.1.2-02 (new)	The Contractor shall develop, administer, update, patch, support, and spin up and down environments as needed, for growth, including change requests, or ad hoc additional environments as directed by the State. Environments can require varying combinations of CPU, memory, storage, networking capacity, and other customizations as required to support the purpose of the environment as directed by the State.
6.1.2-03 (new)	The Contractor shall request approval and notify the Enterprise Infrastructure Chief or designee in the event any State-accessed environment will be temporarily or permanently unavailable or decommissioned.
6.1.2-04 (modified)	The Contractor shall maintain the daily operation and administration of the CalHEERS technical solution, services, applications, and supporting functionality, including but not limited to: 1. Database, operating system, middleware, and other supporting Software 2. Forms and reporting architecture, in coordination with the State and counties 3. All CalHEERS environments, Production, Non-Production, and other supporting environments 4. CalHEERS Real-time and Batch Processing for processing of internal and external interfaces 5. Print-Mail Services
6.1.2-05 (existing)	The Contractor shall perform the responsibilities related to: 1. CalHEERS Operations 2. Technical support 3. Helpdesk and Service ticket processing 4. Maintenance 5. Troubleshooting and repair 6. Release management and testing
6.1.2-06 (existing)	The Contractor shall adopt, enhance and maintain, and execute processes and procedures for all tasks in CalHEERS Operation environments in accordance with the Operations Plan and Operations Manual.
6.1.2-07 (existing)	The Contractor shall adopt, enhance, maintain and execute processes and techniques for Operations management in accordance with the Operations Plan.
6.1.2-08 (existing)	The Contractor shall manage, facilitate, and coordinate the CalHEERS System Design, Maintenance and Operations (SDMO) activities with State-contracted service providers, as directed by the State Project Director or designee.
6.1.2-09 (existing)	The Contractor shall manage, facilitate and coordinate the CalHEERS SDMO issue identification and resolution activities with State-contracted service providers as directed by the State Project Director or designee.
6.1.2-10 (modified)	The Contractor shall manage, facilitate, coordinate, and provide Provider Directory Services as directed by the State.
6.1.2-11 (new)	The Contractor shall create and provide test data at any time for the CalHEERS environments as requested by State.
6.1.2-12 (new)	The Contractor shall implement all changes to the System that improve the Contractor's ability to meet SLAs via no cost change requests.
6.1.2-13 (new)	The Contractor shall collaborate with the State to develop and maintain any new Project Artifacts necessary to support this section. New artifacts shall be added to the Project Artifacts Repository and managed in accordance with the Project Artifact process.

6.2 OPERATIONS MANUAL

The Operations Manual includes detailed processes and procedures describing how the CalHEERS operational environment is managed and supported on a daily basis. The support requirements encompass all facilities, Services and environments associated with the CalHEERS Project, including interface points, information/data flow, and personnel responsibilities.

6.2.1 Operations Manual Requirements

Table 6-3: Operations Manual (CD-6.2-1)

Req #	SOW Requirement
6.2.1-01 (modified)	The Contractor shall adopt, enhance, deliver, and maintain a CD-6.2-1 - Operations Manual, which includes but is not limited to: 1. INTRODUCTION 1.1 Purpose 1.2 List of Reference Documents 1.3 Audience 2. SUMMARY 2.1 Scope 3. APPROACH AND METHODOLOGY 4. ASSUMPTIONS, CONSTRAINTS, AND RISKS 4.1 Assumptions 4.2 Constraints 4.3 Risks 5. REQUIREMENTS 6. ROLES AND RESPONSIBILITIES 7. SYSTEM ENVIRONMENTS 7.1 Overview 7.2 Accessing System Environments 7.3 UAT Environment 7.4 Training Environment 8. OPERATIONS MAINTENANCE 8.1 Operations Process and Procedures 8.2 Case/Incident management 8.2.1 Service Desk Tool Management 8.2.2 Ticket (Case/Incident) Submissions 8.2.3 Service Desk Case/Incident Management 8.2.4 Automated Call Distribution System 8.3 Frequently Asked Questions 8.4 Maintenance and Updates 9. OPERATIONS AUDIT SUPPORT 9.1 Annual Programmatic Audit Support 9.2 General Audit Support 9.3 Audit Support Guidelines 10. GLOSSARY AND ACRONYMS 10.1 New Acronyms and Terms APPENDIX 1: SOW TO DELIVERABLE TRACEABILITY CHECKLIST APPENDIX 2: DELIVERABLE COMPLIANCE AND VALIDATION CHECKLIST APPENDIX 3: ASSOCIATED ARTIFACTS
6.2.1-02 (new)	The Contractor shall only alter or modify this Deliverable's structure or content with the approval of the State Project Director or designee.

Req #	SOW Requirement
6.2.1-03 (new)	The State identifies and associates the following artifacts to the CD-6.2-1 - Operations Manual. The Contractor shall adopt, update, maintain, and deliver these artifacts in accordance with Appendix 3 of this deliverable including, but not limited to: • ABE Build and Deploy SOP • ABE_BandD_understanding • Adding comp in LaunchPad • Aurora Auto Vacuum SOP • Aurora Failover SOP for DR testing • Aurora Upgrade SOP • Aurora postgres patching process • Baseline Metrics for BandD • CALHEERS Development Workspace setup • CH_EP_mapping • CalHEERS - Technical Blueprint - GoToAssist Desktop Support • CalHEERS Operations Smoke Test Scenario • CalHEERS_SOP-Forgerock-AM&IDM-Deployment • CalHEERS_SOP-Forgerock-Build • Clarifications Needed • DB SOPs • DW Deployment • DW_SOPs • EDR HEALTH.sql • EDRProcessingTime.py • EDR_Hourly_Report.sh • EDR_Hourly_Report.zip • Environments Management Worksheet • Environments Workbench • ExecuteEDRHealth.py • ExecuteEligibilitySQLs.py • ExecuteROP.py • ExecuteSQLtoHTML.py • FRBuild_Doc • FuseLWServices_BuildGrouping • Gitlab scripts • HBX_EP_mapping • How to copy Design Document • How_to_upload_jar_in_Nexus • Integration Nonprod polling control • Integration_thread_count_update • LW_AEMNOTICES_Deployment • LW_Workspace_Setup_using_Java11 • Lightweight_Developer_Guide • List_of_Fuse_Services • M&O SOPs • M23.6_SQLs.sql • MIN_MAX_update • Monitoring_23.6 • New_component_in_Gitlab • OCP Ingress Pod Migration • Operations Manual Frequently Asked Questions. • PCAP Env Issues Tracker • PCAP Environment Upgrade .pptx

Req #	SOW Requirement
	• PCAP Security Architecture Diagram_3scale.pptx • PCAP_3scaleInventory • PCAP_CDST_Batches_Run_book • PCAP_LW_Info • PCR Process Guide - Enroller portal 23 Mar • Post Deployment Task connect to MedsMock • R23.4 Deployment Plan_PCAP_Infra_DBA • R23.6 Jenkins Jobs • R23.6 SRs • ReadConfig.py • SOP - 22_6 Apache provisioning • SOP - 503 Error • SOP - Apache Start, Shutdown and Restart • SOP - Apache Upgrade • SOP - Apache logs location • SOP - Apache provisioning • SOP - Build and Deployment Process - Salesforce • SOP - Data Refresh Document • SOP - Deploying 200+ user stories using Copado • SOP - EHIT_PODS • SOP - EP Transition Day In the Life scenario on EP Application • SOP - Enable Disable Splash and Super splash • SOP - Enroller Portal Maintenance • SOP - Enroller Portal Site Switch • SOP - Enroller Portal User Provisioning • SOP - FR and Apache instances provisioning v3 • SOP - Infra Monitoring of Enroller Portal • SOP - OCP Storage Upgrade • SOP - PayNow Certificate Renewal • SOP - Salesforce Enroller Portal Data Refresh Activities • SOP - Salesforce Support Case • SOP - Shop&Compare_22.4_Deployment • SOP - Shop&Compare_22.6_Deployment • SOP - Static content Build and Deploy • SOP - System Admin Reports • SOP - System Monitoring of the Enroller Portal • SOP - Why 8 hours for refresh the sandbox • SOP Prisma Defender Upgrade • SOP for Adding-removing Apache instance form ALB • SOP for Aurora Monitoring and Alerts • SOP to clone Database in Aurora Postgres RDS • SOP to create Fastclone cluster • SOP to create duplicate clone of Aurora Cluster • SOP to create-update CNAME for Aurora Database • SOP – Configuring Redis • SOP- DMS Instance Provisioning • SOP- Deploy External 3scale Routes • SOP- Dynatrace Agent Installtion on EC2 • SOP- Dynatrace license enablement for monitoring • SOP- ETCD Defragmentation • SOP- Enroller Portal Env. Provisioning • SOP- New Pipeline Creation for EP Env

Req #	SOW Requirement
	• SOP- Pollers Bounce on SB Console • SOP- RDS Instance Provisioning • SOP- Triage AM pods eviction issue • SOP-Capture-JFR-Logs • SOP-Configuring-OCP-Alerts • SOP-Create-EFS-Provisioner • SOP-Create-fuse-environment • SOP-Create-nlb-ingress-controller • SOP-Dynatrace-Operator-Installation • SOP-Enroller Portal SSL update • SOP-FTPS_EC2_Cert_update • SOP-FakeTime • SOP-ForgeRock-Monitoring • SOP-MOCK REALTIME UPDATE ENDPOINT (1) • SOP-New-Code-Release-Deployment • SOP-Node Termination & Pod Migrations • SOP-OCP Access control • SOP-OCP Cluster Autoscaling • SOP-OCP MachineConfigPool • SOP-OCP SR Changes • SOP-OCP-Helper-Jobs • SOP-OCP-Modify_instancetype_of_autoscale_Worker_Nodes • SOP-OCP-Pollers-Enable-Disable • SOP-OCP-Troubleshooting • SOP-OCP_3Scale-Installation • SOP-OCP_Backup_Automation • SOP-OCP_Cluster_Validation • SOP-OCP_Cluster_Version_Updates_History • SOP-OCP_Create_Environment • SOP-OCP_Create_LW_Component • SOP-OCP_Deletion • SOP-OCP_Environment_Health • SOP-OCP_HPA_Updated • SOP-OCP_Installation • SOP-OCP_Kibana_troubleshooting_ • SOP-OCP_LW_AT_Build • SOP-OCP_LW_DevBuild • SOP-OCP_LightWeight_Dev_Deployment • SOP-OCP_LightWeight_LT_Deployment • SOP-OCP_LightWeight_NonProd_Deployment • SOP-OCP_Logforwarding_Open Telemetry_OTEL • SOP-OCP_Logforwarding_Splunk_Connect_for_Kubernetes_ • SOP-OCP_Loading_Operator_Installation • SOP-OCP_Monitoring & Logs • SOP-OCP_Patching • SOP-OCP_Post_Installation • SOP-OpenShift_DR • SOP-Password-change • SOP-Service.coveredca.com_cert_update_Create_JKS_STEPS • SOP-TimeMachine • SOP-TimeMachine-Install-Uninstall-with-Separate-EFS-Volume • SOP-add fuse_component_template

Req #	SOW Requirement
	- SOP-build_new_environment - SOP-ocp_itx_installation_using_helm - SOP-to Provision Aurora postgres RDS - SOP-to Provision Aurora postgres RDS form Snapshot - SOP_Dynatrace_License_Consumption_Reporting - SOP_PartnerConnectivityTestActivities - SOP_Review_updates - SQL_File-ProdEDR-DW - SQL_File-ProdEDR - SQL_File - Shopandcompare_BandD - Staging Components SOP - SysOps_Upgrade_Status_Tracker - Technical Steps for setting up SSO for Enroller Portal (3) - Timeshifter implementation overview Aug 2022 - Upgrade JWS Baselmages - Fuse - Upgrade JWS Upgrade - Vendor Contact - aemforms_designer_6_5_0_wwe_win.zip - arch - example copy.properties - example.properties - jdk-11.0.12_windows-x64_bin.exe - pcap-swagger-urls.txt - sop-integration-label-deploy-new2
6.2.1-04 (new)	The Contractor shall adopt and maintain all Project Artifacts that are associated with this Deliverable in the Project Artifact Inventory and manage them in accordance with the Project Artifact process.
6.2.1-05 (new)	The Contractor shall update the following appendices and attach them to the Operations Manual: Appendix 1—SOW to Deliverable Traceability Checklist Description: A table where the Contractor identifies the SOW requirements for this Deliverable, as specified within SOW Section 8, DELIVERABLES, and includes but is not limited to: - SOW Requirement ID # - SOW Requirement Text - Requirement Traceability (Contractor identified traceability from the requirements to the Deliverable) - Requirement Fulfillment (Define how the Contractor has fulfilled the SOW requirements in the Deliverable) Appendix 2—Deliverable Compliance and Validation Checklist Description: A QA Checklist that includes, but is not limited to: - Deliverable Section Number and Title - Deliverable Requirement Statement(s) - Requirement Completion (How the Contractor has complied with or will comply with the requirement statements within the Deliverable) - Validation Method (The method the Contractor used to validate Deliverable compliance) - The Contractor's QA Manager sign-off on compliance Appendix 3—Associated Artifacts

Req #	SOW Requirement
	Description: An extract from the Project Artifact Inventory List of artifacts associated with this Deliverable, and will include but is not limited to the following examples: 1. Artifact Name 2. Associated Parent DEL 3. State Approver 4. SI Point of Contact 5. Review Frequency 6. Submission Frequency 7. Artifact File Format 8. Artifact Location (e.g., SharePoint breadcrumb) 9. Link to artifact

6.2.2 Operations Manual Execution

Table 6-4: Operations Manual Execution

Req #	SOW Requirement
6.2.2-01 (new)	The Contractor shall staff, manage, lead and execute Operations activities on the CalHEERS as defined in this Statement of Work and in accordance with the CD-6.2-1 – Operations Manual.
6.2.2-02 (modified)	The Contractor shall adopt, enhance, maintain, and execute all Service Desk Services identified within the Operations Manual.
6.2.2-03 (modified)	The Contractor shall provide toll-free telephone connectivity to the Service Desk for Covered California, DHCS, and CalHEERS Project staff and users as directed by the State.
6.2.2-04 (existing)	The Contractor shall provide for, at a minimum, 1,000 concurrent users for the automated Service Desk management Tool.
6.2.2-05 (new)	The Contractor shall develop, deliver, and maintain detailed Standard Operating Procedures (SOPs) for all processes for which the State requests, including existing and newly-developed, as part of a CR, processes. The procedures shall be stored in a version control tool in a user-friendly, uniform, and easily accessible way. The required SOPs are those currently available, with the addition of the following: 1. Procedures with respect to all efforts for maintaining external partner interfaces 2. Procedures for regular testing and updating of external links within CalHEERS 3. Procedures for Service Center operations
6.2.2-06 (new)	The Contractor shall collaborate with the State to develop and maintain any new Project Artifacts necessary to support this section. New artifacts shall be added to the Project Artifacts Repository and managed in accordance with the Project Artifact process.

6.2.3 Operations Planning and Management Miscellaneous Deliverables and Processes

The following, in tandem with the CalHEERS Operations Manual are associated work products, deliverables and processes that provide direction and auditability for the CalHEERS components Operations. The contents and services included in each of these plans are governed by the Change Advisory Board (CAB).

6.2.3.1 Technical Change Management Plan

Table 6-5: Technical Change Management Plan (CD-6.2-2)

Req #	SOW Requirement
6.2.3-01 (new)	The Contractor shall adopt, enhance, deliver, and maintain a CD-6.2-2 - Technical Change Management Plan, which includes but is not limited to: 1. INTRODUCTION 1.1 Purpose 1.2 List of Reference Documents 1.3 Audience 2. SUMMARY 2.1 Scope 3. APPROACH 4. ASSUMPTIONS, CONSTRAINTS AND RISKS 4.1 Assumptions 4.2 Constraints 4.3 Risks 5. REQUIREMENTS 6. ROLES AND RESPONSIBILITIES 6.1 Contractor Roles and Responsibilities 6.2 State Roles and Responsibilities 7. TOOLS IN SUPPORT OF TECHNICAL CHANGE MANAGEMENT 8. INPUTS TO TECHNICAL CHANGE MANAGEMENT 9. TECHNICAL CHANGE REQUEST LIFECYCLE 9.1 Initiate, Classify, and Review Technical Change Request 9.1.1 Detailed Process 9.2 Normal Process Flow 9.2.1 Detailed Process 9.3 Emergency Process Flow 9.3.1 Detailed Process 9.4 Standard Process Flow 9.4.1 Detailed Process 9.5 Implement Change Flow 9.5.1 Detailed Process 10. STEP-BY-STEP PROCEDURAL DOCUMENTS 11. GLOSSARY AND ACRONYMS 11.1 New Acronyms and Terms APPENDIX 1: SOW TO DELIVERABLE TRACEABILITY CHECKLIST APPENDIX 2: DELIVERABLE COMPLIANCE AND VALIDATION CHECKLIST APPENDIX 3: ASSOCIATED ARTIFACTS
6.2.3-02 (new)	The Contractor shall only alter or modify this Deliverable's structure or content with the approval of the State Project Director or designee.
6.2.3-03 (existing)	The Contractor shall provide written explanation, cause, resolution, and timeframe for the correction of any and all audit discrepancies.

Req #	SOW Requirement
6.2.3-04 (new)	The State identifies and associates the following artifacts to the Technical Change Management Plan. The Contractor shall adopt, update, maintain, and deliver these artifacts in accordance with Appendix 3 of this deliverable including, but not limited to: • CalHEERS Change Management - Change Advisory Board (CAB) • CalHEERS Change Management - Create Emergency Change • CalHEERS Change Management - Create Normal Change • CalHEERS Change Management - Create Standard Change • CalHEERS Change Management - Create a Standard Change Template • CalHEERS Change Management - Creating Change Tasks • CalHEERS Change Management - Determining Which Change Path to Use. (Emergency, Normal, or Standard) • CalHEERS Change Management - Requesting an Extension • CalHEERS Change Management - Walk-On Procedure • CalHEERS Knowledge - Change Deployment Time Audit • CalHEERS Knowledge - Closed Changes Status Report • CalHEERS Knowledge - Implementation of Technical Change Requests • Create Splunk Support Ticket • Create a New Comprehensive Change • Create a New Emergency Change • Create a New Master Ticket • Create a New Routine Change • DOC 2 Template – CAB Meeting Agenda • DOC 3 Template – CAB Meeting Minutes • DOC 4 Template – CAB Freeze Meeting Agenda • DOC 5 Template – CAB Freeze Meeting Minutes • Daily RUEI Performance Reports • How to Establish a Technical Change Freeze • How to Submit a HWSW Request • How to create Service Test • SOP CCA DW Changes via CAB Process • SOP Service Center Changes via CAB Process • Update Deployment with SCCM
6.2.3-05 (new)	The Contractor shall adopt and maintain all Project Artifacts that are associated with this Deliverable in the Project Artifact Inventory and manage them in accordance with the Project Artifact process.
6.2.3-06 (new)	The Contractor shall update the following appendices and attach them to the Technical Change Management Plan: Appendix 1–SOW to Deliverable Traceability Checklist Description: A table where the Contractor identifies the SOW requirements for this Deliverable, as specified within SOW Section 8, DELIVERABLES, and includes but is not limited to: 1. SOW Requirement ID # 2. SOW Requirement Text 3. Requirement Traceability (Contractor identified traceability from the requirements to the Deliverable) 4. Requirement Fulfillment (Define how the Contractor has fulfilled the SOW requirements in the Deliverable) Appendix 2–Deliverable Compliance and Validation Checklist Description: A QA Checklist that includes, but is not limited to: 1. Deliverable Section Number and Title 2. Deliverable Requirement Statement(s)

Req #	SOW Requirement
	3. Requirement Completion (How the Contractor has complied with or will comply with the requirement statements within the Deliverable) 4. Validation Method (The method the Contractor used to validate Deliverable compliance) 5. The Contractor's QA Manager sign-off on compliance Appendix 3—Associated Artifacts Description: An extract from the Project Artifact Inventory List of artifacts associated with this Deliverable, and will include but is not limited to the following examples: 1. Artifact Name 2. Associated Parent DEL 3. State Approver 4. SI Point of Contact 5. Review Frequency 6. Submission Frequency 7. Artifact File Format 8. Artifact Location (e.g., SharePoint breadcrumb) 9. Link to artifact

6.2.3.2 Technical Change Management Execution

Table 6-6: Technical Change Management Execution

Req #	SOW Requirement
6.2.3-07 (new)	The Contractor shall staff, manage, lead and execute all technical change management activities on CalHEERS as defined in this Statement of Work and in accordance with the CD-6.2-2 – Technical Change Management Plan.
6.2.3-08 (new)	The Contractor shall collaborate with the State to develop and maintain any new Project Artifacts necessary to support this section. New artifacts shall be added to the Project Artifacts Repository and managed in accordance with the Project Artifact process.

6.2.3.3 Network Management Plan

Table 6-7: Network Management Plan (CD-6.2-3)

Req #	SOW Requirement
6.2.3-09 (new)	The Contractor shall adopt, enhance, deliver, and maintain the CD-6.2-3 - Network Management Plan, which includes but is not limited to: 1. INTRODUCTION 1.1 Purpose 1.2 List of Reference Documents 1.3 Audience 2. SUMMARY 2.1 Scope 3. APPROACH 4. ASSUMPTIONS, CONSTRAINTS, AND RISKS 4.1 Assumptions 4.2 Constraints 4.3 Risks 5. REQUIREMENTS 6. ROLES AND RESPONSIBILITIES 6.1 Roles and Responsibilities 6.1.1 Contractor Roles and Responsibilities

Req #	SOW Requirement
	6.1.2 State Roles and Responsibilities 7. FAULT MANAGEMENT 7.1 Network Device Management 7.2 Equipment and Network Services 7.3 Troubleshooting Infrastructure 7.4 Fault Detection, Isolation, Notification, and Correction 8. NETWORK CONFIGURATION MANAGEMENT 8.1 Configuration Standards 8.2 Configuration File Management 8.2.1 Backup of Networking Components 8.3 Network Log Management 8.3.1 VPC Flow logs 8.3.2 Direct Connect Logs 8.3.3 Firewall logs 8.4 Inventory Management 8.5 Software Management 9. NETWORK PATCH MANAGEMENT 10. NETWORK PERFORMANCE MANAGEMENT 10.1 PRTG 10.2 Splunk Synthesis (Rigor) 10.3 Security Monitoring with Contractor FMS and Splunk 11. NETWORK SECURITY MANAGEMENT 11.1 SNMP Protocol 11.2 SNMP Privilege Level 11.3 SNMP Access Control List (ACL) 11.4 SNMP View 11.5 SNMP Version 2 11.6 Vulnerability Management 12. SERVICE CENTER NETWORK MANAGEMENT 13. AKAMAI CONTENT DELIVERY SERVICE 14. GLOSSARY AND ACRONYMS 14.1 New Acronyms and Terms APPENDIX 1: SOW TO DELIVERABLE TRACEABILITY CHECKLIST APPENDIX 2: DELIVERABLE COMPLIANCE AND VALIDATION CHECKLIST APPENDIX 3: ASSOCIATED ARTIFACTS
6.2.3-10 (new)	The Contractor shall only alter or modify this Deliverable's structure or content with the approval of the State Project Director or designee.
6.2.3-11 (new)	The State identifies and associates the following artifacts to the Network Management Plan. The Contractor shall adopt, update, maintain, and deliver these artifacts in accordance with Appendix 3 of this deliverable including, but not limited to: • Certificate_Renewal_Plan • Consolidate_cert_list • PaloAlto Firewall switchover test • SOP - Akamai Cert renewal • SOP - Create, Modify and delete Route table from VPC subnet • SOP - Direct Connection Troubleshooting Guide • SOP - Firewall Change Request_AWS • SOP - Firewall Change Request_DC • SOP - IOS Upgrade Process • SOP - Network Change Request_DC • SOP - Network Services and Components Backup • SOP - View Logs_Monitoring • SOP -SSL_certificate_generation_Godaddy • SOP Akamai Certificate

Req #	SOW Requirement
	- SOP for creating TGW - SOP-Adding Service Centre subnet in TGW route table - SOP-IPSEC Tunnel Configuration_Troubleshooting - SOP-Incident Management-Simulation 2 - SOP_CalHEERS_Deloitte_Security_Emergency_Change_Approvers - VPC_TGW_Routing Details
6.2.3-12 (new)	The Contractor shall adopt and maintain all Project Artifacts that are associated with this Deliverable in the Project Artifact Inventory and manage them in accordance with the Project Artifact process.
6.2.3-13 (new)	The Contractor shall update the following appendices and attach them to the Network Management Plan: Appendix 1–SOW to Deliverable Traceability Checklist Description: A table where the Contractor identifies the SOW requirements for this Deliverable, as specified within SOW Section 8, DELIVERABLES, and includes but is not limited to: - SOW Requirement ID # - SOW Requirement Text - Requirement Traceability (Contractor identified traceability from the requirements to the Deliverable) - Requirement Fulfillment (Define how the Contractor has fulfilled the SOW requirements in the Deliverable) Appendix 2–Deliverable Compliance and Validation Checklist Description: A QA Checklist that includes, but is not limited to: - Deliverable Section Number and Title - Deliverable Requirement Statement(s) - Requirement Completion (How the Contractor has complied with or will comply with the requirement statements within the Deliverable) - Validation Method (The method the Contractor used to validate Deliverable compliance) - The Contractor's QA Manager sign-off on compliance Appendix 3–Associated Artifacts Description: An extract from the Project Artifact Inventory List of artifacts associated with this Deliverable, and will include but is not limited to the following examples: - Artifact Name - Associated Parent DEL - State Approver - SI Point of Contact - Review Frequency - Submission Frequency - Artifact File Format - Artifact Location (e.g., SharePoint breadcrumb) - Link to artifact

6.2.3.4 Network Management Execution

Table 6-8: Network Management Execution

Req #	SOW Requirement
6.2.3-14 (new)	The Contractor shall staff, manage, lead and execute all network management activities on CalHEERS as defined in this Statement of Work and in accordance with the CD-6.2-3 – Network Management Plan.

Req #	SOW Requirement
6.2.3-15 (existing)	The Contractor shall be responsible to analyze any potential impacts to the enterprise Networks and all associated components due to modifications and/or enhancements to the CalHEERS System, third-party software, interfaces, and State sites and Networks.
6.2.3-16 (existing)	The Contractor shall coordinate and communicate the network management activities with State, interface partners, State sponsor agencies, and third-party vendors (e.g., hosting and telecommunications providers).
6.2.3-17 (existing)	The Contractor shall expose the CalHEERS Services consistent with WS-I web service guidelines and interoperability tests that are based on Service Contract Specification.
6.2.3-18 (existing)	The Contractor shall report its compliance with Section 508 of the Federal Rehabilitation Act and the World Wide Web Consortium (W3C) Web Accessibility Initiative, Section 508, (a)(1)(A).
6.2.3-19 (modified)	The Contractor shall report compliance with web accessibility standards of Section 508 of the Rehabilitation Act, WCAG 2.1, and California Government Code Sections 7405, 11135, and 11546.7 to ensure the online application is accessible to all users, and regulations implementing that act as set forth in Part 1194 of Title 36 of the Federal Code of Regulations.
6.2.3-20 (existing)	The Contractor shall provide real-time access to System jobs and maintenance schedules, submission and processing statistics, and System performance tools for designated staff.
6.2.3-21 (existing)	The CalHEERS Business Processes shall comply with the following business transaction standards as mandated by the Affordable Care Act (ACA) HIPAA Transaction Standards: Adopt HIPAA transaction standards for electronic health care transactions. Electronic Eligibility and Enrollment rules: CalHEERS Electronic Eligibility and Enrollment transactions shall comply with the set of operating rules as described in HIT Policy and Standards as defined at www.healthit.gov .
6.2.3-22 (existing)	The Contractor shall provide Network Engineer Support services for all Network and security Hardware and Software at all Project Worksites, for all Network circuits, including but not limited to: - All Local Area Networks (LAN), Wide Area Networks (WAN), and metropolitan area networks (MAN). - All Virtual Private Networks (VPN) connections - All internet connections - All private (dedicated) circuits - All wireless access points (WAP) - All wireless LAN controllers
6.2.3-23 (existing)	The Contractor shall intake, prioritize, manage, and resolve all Network management issues, which includes Hardware and Software for all firewalls, web application firewalls (WAF), Intrusion Prevention Systems (IPS)/Intrusion Detection Systems (IDS), Security Information and Event Management (SIEM) Systems, switches, routers, wireless LAN controllers, WAP, Print Servers, LTS racks/air conditioner blowers, UPS battery backups (including replacements) and all relevant Network infrastructure Equipment.
6.2.3-24 (existing)	The Contractor Network Security Team shall provide the following Network support services, including, at a minimum: - Conducting, at a minimum, the following security activities: - General Infrastructure security scanning, monitoring and alerting - IDS/IPS scanning, monitoring and alerting - IT Security and Compliance scanning, monitoring and alerting - Cloud Provider security scanning, monitoring and alerting (at every network and subnet layer) - Server security scanning, monitoring and alerting - Anti-Virus and Malware scanning, monitoring and alerting - Network Whitelist scanning, monitoring and alerting - VPN scanning, monitoring and alerting

Req #	SOW Requirement
	i. Maintain a tool (e.g., Qualys) for scanning and reporting, vulnerability management, compliance monitoring, security operations, auditing, compliance and protection for all IT assets. j. Identify and Access Management of (IAM) scanning, monitoring and alerting of all CalHEERS environments, including Multi-Factor authentication (MFA) k. Data Classification scanning, monitoring and alerting of PII, PHI, FTI and relevant confidential data. l. Network capacity monitoring and alerting m. Application performance monitoring and alerting n. Security monitoring and alerting of the entire CalHEERS infrastructure o. Network monitoring and alerting to include all networks (LANs, MANs, WANs, VPNs, Dedicated Circuits, etc.) p. System log (Syslog) monitoring and reporting q. Network Access monitoring, segmentation and alerting r. Email SPAM detection and deletion 2. Management, at a minimum, of the following network security related activities: a. Wi-Fi related accounts, including: usernames, passwords, Role Based Access Control (RBAC) b. Active Directory (AD) / Network accounts, including: usernames, passwords, Domains, Role Based Access Control (RBAC), network segmentation c. Configuration backups of all infrastructure equipment
6.2.3-25 (existing)	The Contractor shall adopt, enhance and maintain, deliver and execute Operations procedures, as specified in the Operations Manual and referenced in the Operations Plan.
6.2.3-26 (existing)	The Contractor shall leverage existing State efforts conducted with identity management with the Department of Motor Vehicles (DMV), the California Employment Development Department, and other partners.
6.2.3-27 (existing)	The Contractor shall make the network management and control System and all resultant Data and reports accessible to State for review and independent analysis within 24 hours of being requested.
6.2.3-28 (new)	The Contractor shall staff, manage, lead and execute all network management activities on CalHEERS as defined in this Statement of Work and in accordance with the CD-6.2-3 – Network Management Plan.
<u>6.2.3-28a (existing)</u>	<u>The Contractor shall ensure that Network management and control System tool is made available to a minimum of three (3) designated members of the State.</u>
<u>6.2.3-28b (modified)</u>	<u>The Contractor shall provide all Equipment and Software necessary to support and maintain a Network management and control system to support all components that is based upon industry standard protocols.</u>
<u>6.2.3-28c (existing)</u>	<u>The Contractor shall provide a network management and control system that is capable of remote monitoring and tuning of each vendor component attached to the Network.</u>
<u>6.2.3-28d (existing)</u>	<u>The Contractor shall provide a Network Management and Control System that either provides advanced monitoring and tuning tools or is capable of interacting with widely used third-party tools for advanced monitoring and tuning of Network components.</u>

6.2.3.5 Capacity Management Plan

The CalHEERS Capacity Management Plan is the overall approach and direction for capacity management of CalHEERS. The Capacity Management Plan is needed to ensure resources are sufficient to meet current and future infrastructure needs of the Project.

Table 6-9: Capacity Management Plan (CD-6.2-4)

Req #	SOW Requirement
6.2.3-29 (modified)	The Contractor shall adopt, enhance, deliver, and maintain a CD-6.2-4 - Capacity Management Plan, which includes but is not limited to: 1. INTRODUCTION 1.1 Purpose 1.2 List of Reference Documents 1.3 Audience 2. SUMMARY 2.1 Scope 3. APPROACH 4. ASSUMPTIONS, CONSTRAINTS, AND RISKS 4.1 Assumptions 4.2 Constraints 4.3 Risks 5. REQUIREMENTS 6. ROLES AND RESPONSIBILITIES 6.1 Roles and Responsibilities 7. TOOLS 8. CAPACITY MANAGEMENT SUB-PROCESSES 9. CAPACITY MANAGEMENT 9.1 Capacity Planning and Design 9.2 Capacity Trending 9.3 Capacity Bench%ing 9.4 Capacity Forecasting 9.5 Capacity Monitoring 10. GLOSSARY AND ACRONYMS 10.1 New Acronyms and Terms APPENDIX 1: SOW TO DELIVERABLE TRACEABILITY CHECKLIST APPENDIX 2: DELIVERABLE COMPLIANCE AND VALIDATION CHECKLIST APPENDIX 3: ASSOCIATED ARTIFACTS
6.2.3-30 (new)	The Contractor shall only alter or modify this Deliverable's structure or content with the approval of the State Project Director or designee.
6.2.3-31 (existing)	The Capacity Management Plan shall accurately include, but not be limited to: • Approach towards capacity management Methodology that describes the utilization of capacity management mathematical analysis Contractor, State Project staff and State roles and responsibilities • Tools to be used for capturing, analyzing, and reporting data for capacity management of enterprise infrastructure • Processes and procedures for capacity management, planning, forecasting and communications • Assumptions • Design Capacity • Lead, Lag, Match and Adjustment strategies
6.2.3-32 (existing)	The Contractor shall develop the Project work plans to include tasks, summary tasks and activities described in CalHEERS Project plans and shall specify task start and finish dates that are consistent with high level milestones included in the Capacity Management Plan.
6.2.3-33 (existing)	The Contractor shall document and determine the Production, Systems Engineering and Interactive Voice Response capacity(s) needed to meet changing demands in a Maintenance and Operations environment.
6.2.3-34 (new)	The State identifies and associates the following artifacts to the Capacity Management Plan. The Contractor shall adopt, update, maintain, and deliver these artifacts in accordance with Appendix 3 of this deliverable including, but not limited to: • Procedural Appendix 12 - Template - 20XX QX Audit Report

Req #	SOW Requirement
6.2.3-35 (new)	The Contractor shall adopt and maintain all Project Artifacts that are associated with this Deliverable in the Project Artifact Inventory and manage them in accordance with the Project Artifact process.
6.2.3-36 (new)	The Contractor shall update the following appendices and attach them to the Capacity Management Plan: Appendix 1—SOW to Deliverable Traceability Checklist Description: A table where the Contractor identifies the SOW requirements for this Deliverable, as specified within SOW Section 8, DELIVERABLES, and includes but is not limited to: 1. SOW Requirement ID # 2. SOW Requirement Text 3. Requirement Traceability (Contractor identified traceability from the requirements to the Deliverable) 4. Requirement Fulfillment (Define how the Contractor has fulfilled the SOW requirements in the Deliverable) Appendix 2—Deliverable Compliance and Validation Checklist Description: A QA Checklist that includes, but is not limited to: 1. Deliverable Section Number and Title 2. Deliverable Requirement Statement(s) 3. Requirement Completion (How the Contractor has complied with or will comply with the requirement statements within the Deliverable) 4. Validation Method (The method the Contractor used to validate Deliverable compliance) 5. The Contractor's QA Manager sign-off on compliance Appendix 3—Associated Artifacts Description: An extract from the Project Artifact Inventory List of artifacts associated with this Deliverable, and will include but is not limited to the following examples: 1. Artifact Name 2. Associated Parent DEL 3. State Approver 4. SI Point of Contact 5. Review Frequency 6. Submission Frequency 7. Artifact File Format 8. Artifact Location (e.g., SharePoint breadcrumb) 9. Link to artifact

6.2.3.6 Capacity Management Execution

Table 6-10: Capacity Management Execution

Req #	SOW Requirement
6.2.3-37 (new)	The Contractor shall staff, manage, lead and execute all capacity management activities on CalHEERS as defined in this Statement of Work and in accordance with the CD-6.2-4 – Capacity Management Plan.
6.2.3-38 (existing)	The Contractor shall report and address all capacity issues that impact System performance requirements.
6.2.3-39 (modified)	The CalHEERS System shall retain up to five (5) years of data that can be viewed online through the CalHEERS portal and up to ten (10) years of data in a retrievable storage area unless directed otherwise by the State Project Director or Designee.

Req #	SOW Requirement
6.2.3-40 (existing)	The Contactor shall accurately include forecasts for next calendar year for expected needs for Central Process Unit (CPU) resources, Network bandwidth and Data storage capacities for all Contractor Equipment within the annual update to the Operations Manual.
6.2.3-41 (new)	The Contractor shall collaborate with the State to develop and maintain any new Project Artifacts necessary to support this section. New artifacts shall be added to the Project Artifacts Repository and managed in accordance with the Project Artifact process.

6.3 OPERATIONS REPORTING, DATA, AND ANALYTICS

The Operational Reporting, Data, and Analytics is intended to provide the CalHEERS organization with reporting, data and analytics to support day-to-day activities, critical initiatives, strategic planning, and impact measurement across the CalHEERS organization.

6.3.1 Daily Production Status Report

The Contractor shall perform the Operations Reporting services described in this section.

Table 6-11: Daily Production Status Report (CD-6.3-1)

Req #	SOW Requirement
6.3.1-01 (modified)	The Contractor shall adopt, enhance, maintain and provide the CD-6.3-1 - Daily Production Status Report that accurately specifies scheduled system downtime and provides a corrective action taken for any unscheduled downtime that occurred.
6.3.1-02 (existing)	The Daily Production Status Report shall accurately specify accomplishments during the report period in a task-by-task format, including all tasks that are being performed on schedule, tasks that are behind schedule, tasks planned for next period, any administrative problems encountered, and the proposed resolution of all problem areas.
6.3.1-03 (modified)	The Contractor shall document an SOP to produce the CD-6.3-1 - Daily Production Status Report and include the following metrics as part of the Daily Production Status Report email at a minimum (and additional items at the request of the State Project Director or designee): • System Performance Metrics • Operations Summary by Area • Operations Details • Data Warehouse • Daily CalHEERS User Report • Daily CalHEERS Transaction Report • Program Support Status • Notice Generation • Inbound Images • Production Defect Release Level Status Metrics • Financial Metrics • Financial Management Processing • Individual Participation Fee Billing • Special Provisions and Service Level Agreement (SLA) Metric
6.3.1-04 (new)	The Contractor shall only alter or modify this Deliverable's structure or content with the approval of the State Project Director or designee.
6.3.1-05 (new)	The Contractor shall adopt and maintain all Project Artifacts that are associated with this Deliverable in the Project Artifact Inventory and manage them in accordance with the Project Artifact process.

6.3.2 Daily Production Status Report Execution

Table 6-12: Daily Production Status Report Execution

Req #	SOW Requirement
6.3.2-01 (new)	The Contractor shall staff, manage, lead and execute all daily production status reporting activities on CalHEERS as defined in this Statement of Work and in accordance with the CD-6.3-1 – Daily Production Status Report.
6.3.2-02 (new)	The Contractor shall collaborate with the State to develop and maintain any new Project Artifacts necessary to support this section. New artifacts shall be added to the Project Artifacts Repository and managed in accordance with the Project Artifact process.

6.3.3 Operations Reporting Dashboard

This section includes the requirements for the Operations Reporting miscellaneous deliverables.

Table 6-13: Operations Reporting Dashboard (CD-6.3-2)

Req #	SOW Requirement
6.3.3-01 (existing)	The Contractor shall adopt, enhance, maintain and provide the CD-6.3-2 - Operations Reporting Dashboard that serves as a real time portal for designated State Project staff to receive an up-to-date summary presentation of System Operations status at any time.
6.3.3-02 (existing)	The Contractor shall design the Operations Reporting Dashboard to provide drill down capabilities to all State Project staff to view detailed information in each category of information presented on the dashboard.
6.3.3-03 (existing)	The Contractor shall design the Operations Reporting Dashboard to be intuitive and user friendly for nontechnical users and with consistent look-and-feel throughout the application.
6.3.3-04 (existing)	The Contractor shall design the Operations Reporting Dashboard to display alerts and updates for System problems and outages which impacts 100 or more users and/or multiple sites.
6.3.3-05 (existing)	The Contractor shall provide an Operations Reporting Dashboard that includes capabilities to print and download information in Adobe™ PDF and Microsoft Excel® formats.
6.3.3-06 (existing)	The Contractor shall design the Operations Reporting Dashboard to integrate with other tools proposed by the Contractor that includes, but is not be limited to: 1. Service Desk Application 2. CR Management
6.3.3-07 (new)	The Contractor shall only alter or modify this Deliverable's structure or content with the approval of the State Project Director or designee.
6.3.3-08 (modified)	The Contractor shall document a SOP to produce the Operations Reporting Dashboard and provide an Operations Reporting Dashboard that must display graphical and textual representation of the following information, including, but not limited to: 1. Problem Management 2. CR Management 3. Status of batch jobs and batch processing activities 4. Status of interface jobs and interface processing activities 5. Status of management reporting jobs and activities 6. Status of print processing jobs and activities 7. Performance charts displaying live and historical performance of production system 8. Status of User Acceptance Test (UAT) and Production environments 9. Broadcast messaging to State Project staff 10. Dashboard legend

Req #	SOW Requirement
6.3.3-09 (new)	The State identifies and associates the following artifacts to the Operations Reporting Dashboard. The Contractor shall adopt, update, maintain, and deliver these artifacts in accordance with Appendix 3 of this deliverable including, but not limited to: CalHEERS Reports List
6.3.3-10 (new)	The Contractor shall update or develop the following appendices and attach them to the Daily Status Report deliverable: Appendix 1—SOW to Deliverable Traceability Checklist Description: A table that identifies the SOW requirements for this Deliverable, as specified within SOW Section 8, DELIVERABLES, and includes but is not limited to: - SOW Requirement ID # - SOW Requirement Text - Requirement Traceability (Define traceability of the requirements to the Deliverable) - Requirement Fulfillment (Define how the SOW requirements have been fulfilled by this Deliverable) Appendix 2—Deliverable Compliance and Validation Checklist Description: A QA Checklist that includes, but is not limited to: - Deliverable Section Number and Title - Deliverable Requirement Statement(s) - Requirement Completion (How the Contractor will comply with or has complied with the requirement statements within the plan) - Validation Method (The method the Contractor used to validate Deliverable compliance) - The Contractor's QA Manager sign-off on compliance Appendix 3—Associated Artifacts Description: An extract from the Project Artifact Inventory List of artifacts associated with this Deliverable, and will include but is not limited to the following examples: - Daily Status Report Artifact Name - Associated Parent DEL - State Approver - SI Point of Contact - Review Frequency - Submission Frequency - Artifact File Format - Artifact Location (e.g., SharePoint breadcrumb) - Link to artifact

6.3.4 Operations Reporting Dashboard Execution

Table 6-14: Operations Reporting Dashboard Execution

Req #	SOW Requirement
6.3.4-01 (new)	The Contractor shall staff, manage, lead and execute all Operations Reporting Dashboard reporting activities on CalHEERS as defined in this Statement of Work and in accordance with the CD-6.3-2 – Operations Reporting Dashboard.
6.3.4-02 (existing)	The Contractor shall provide the Operations Reporting Dashboard on a 24/7/365 basis.
6.3.4-03 (new)	The Contractor shall collaborate with the State to develop and maintain any new Project Artifacts necessary to support this section. New artifacts shall be added to the Project Artifacts Repository and managed in accordance with the Project Artifact process.

6.3.5 Ongoing and ad Hoc Reporting

Table 6-15: CalHEERS Reports List

Req #	SOW Requirement
6.3.5-01 (existing)	The Contractor shall adopt, update and maintain the CalHEERS Reports List as reports are added and modified.

6.3.6 Data, Analytics, and Reporting Support

Table 6-16: Data, Analytics, and Reporting Support

Req #	SOW Requirement
6.3.6-01 (new)	The Contractor shall staff, manage, and execute all system activities needed to maintain and enhance the operations of CalHEERS operational reporting and analytics, including the CalHEERS Data Warehouse and related ad-hoc reports, as defined in existing CalHEERS artifacts and design documents.
6.3.6-02 (existing)	The Contractor shall adopt, enhance, and maintain the CalHEERS data warehouse used for storing, and maintaining CalHEERS data.
6.3.6-03 (new)	The Contractor shall ingest data from CalHEERS and external sources, including Google Analytics, Salesforce, Tableau, other state agencies, and custom datasets.
6.3.6-04 (existing)	The Contractor shall transmit CalHEERS data, as directed by the State Project Director or designee, including but not limited to: 1. Application processing data that includes standardized denial reasons and applicant demographics by program; 2. Monthly enrollment data by member and program (if not already collected by the MIS/DSS); 3. Disenrollment data that includes standardized reasons for voluntary and involuntary disenrollment as needed per program and enrollee demographics; and 4. Other data required to perform statistical analysis required of each program by applicable state and federal agencies.
6.3.6-05 (new)	The contractor shall utilize an Extract, Transform, and Load (ETL) design developed to meet CalHEERS analytics and data needs. The ETLs shall deliver data refreshes at business-required latencies, such as daily for financial reports, and hourly, or more frequently, for consumer actions that require immediate response.
6.3.6-06 (new)	The contractor shall host the analytics platform on a cloud platform, leveraging cloud-native technologies, and supporting data assets in staging, curated, and final reporting stages.
6.3.6-07 (new)	The contractor shall document and catalog data lineage and metadata comprehensively. The catalog shall be accessible and allow for a variety of user roles to maintain authoritative and up-to-date content from data owners and stewards throughout the CalHEERS data ecosystem.
6.3.6-08 (new)	The contractor shall enable User Acceptance Testing (UAT) for new reports and data products on a production-like copy to simulate realistic data behaviors and volumes.
6.3.6-09 (new)	The contractor shall enable the integration and governance of external data sources, per CalHEERS policies, as needed by the Department of Health Care Services or Covered California.
6.3.6-10 (new)	The contractor shall host and integrate data with separate servers as required by sponsors, such as SQL Server and ArcGIS, per CalHEERS policies.
6.3.6-11 (new)	The contractor shall automate data integrations with other cloud data platforms, such as SAS Viya or Snowflake, per CalHEERS policies.
6.3.6-12 (new)	The contractor shall provide secured data environments integrated with the core data platform for CalHEERS approved data engineers and analysts at Covered California or DHCS to securely test, develop, and maintain new data products, per CalHEERS policies.

Req #	SOW Requirement
6.3.6-13 (new)	The contractor shall allow authorized users to obtain data and results through no-code and advanced self-service tools such as Tableau for visualization, direct querying access to the data warehouse (such as through Snowflake, Databricks), and via ODBC with industry-standard data analytic tools such as Python, R, etc., per CalHEERS policies.
6.3.6-14 (new)	Upon transition completion, the Contractor shall review the CalHEERS Report List, all related SOPs, and requirements with CalHEERS, seeking report approval, and shall only alter or modify the structure or content of reports with the approval of the State Project Director or designee.
6.3.6-15 (new)	The Contractor shall receive approval of the State Project Director or designee for each report, including SOP to produce the report, report design, delivery, accessibility, and schedule.
6.3.6-16 (new)	The Contractor will ensure report listing, and complete report documentation is maintained, and updated based on report assessments or subsequent changes. Report documentation will be searchable and cataloged, and shall include details about the purpose, data sources and lineage, transformations, applicable code (i.e., SQL queries, etc.), definitions, and any other needed attributes to enable report users to interpret the report and report producers to replicate the report.
6.3.6-17 (new)	The Contractor shall process updates to Reports and associated documentation within the timeframes identified by CalHEERS.
6.3.6-18 (modified)	The Contractor shall adopt, enhance and maintain the CalHEERS business intelligence (BI) System with sufficient licenses, per CalHEERS Procurement Processes, to support business and operational needs as defined by the State Project Director or designee.
6.3.6-19 (existing)	The Contractor shall assist data warehouse and analytic users by: 1. Refining queries to achieve their desired analytic output 2. Providing data model and coding expertise for pulling the needed data 4. Identifying issues and performing issue resolution 5. Responding to questions and concerns from users 6. Appropriately indicating when issues will be escalated and mitigated either by CalHEERS Project Management Office (PMO) or via the use of the Defect Management Process
6.3.6-20 (modified)	The Contractor shall generate the reports and extracts as identified by sponsors. The data domains for CalHEERS reports including, but are not limited to: • Carrier Data • Enrollment and premium trends • Eligibility determination outcomes • Consumer experience, including website interaction data • Notices and member communications • Financial reports • Audit and compliance reporting, including related to data interfaces (such as with IRS) • Transactional and system monitoring reports • Consumer assistance reporting (such as by broker, certified assister, Service Center or county eligibility workers)
6.3.6-21 (new)	The contractor shall provision role-based access control, per CalHEERS policy, across all platform layers (both production and test environments) and apply role-based security controls, including column-level masking.
6.3.6-22 (existing)	As new reports and extracts are identified, the Contractor Reporting team shall work with State users to identify the data requirements and update the report or extract inventory to reflect the new item.
6.3.6-23 (existing)	The Contractor shall prepare for operational cycles by revisiting the prior year's reports and making modifications for the new year, as appropriate. Reporting and extract requirements are categorized as: 1. Enrollment Renewal reports

Req #	SOW Requirement
	2. Program transition population reports 3. Open Enrollment reports 4. IRS 1095 reporting 5. FTB 3895 reporting 6. Marketing and Outreach (e.g., assisters, delegates, service channels) 7. CMS reporting and CMS performance stats (i.e., average concurrent users, unique visits, etc.) 8. Service Center Reporting/Dashboards 9. Batch fallout support 10. Carrier renewal reconciliation file 11. ROP Reporting: Automatically discontinue members after 90 days 12. Truven data file
6.3.6-24 (existing)	The Contractor Reporting team must keep copies of the final build code on CalHEERS Repository.
6.3.6-25 (existing)	The Contractor shall add the final copies of the code to the CalHEERS Project's Reports Library.
6.3.6-26 (existing)	The Contractor shall provide documentation for carriers and Covered California for interpretation and utilization of the audit file.

6.4 OPERATIONS MAINTENANCE

Operations Maintenance addresses Commercial off the Shelf (COTS) and Operating System (O/S) updates, as well as upgrades and patches to supporting software. The plan describes the roles and responsibilities, procedures, data source, and action items for the Contractor in maintaining the CalHEERS infrastructure. This plan applies to all CalHEERS environments hosted.

6.4.1 Operations Audit Support

Table 6-17: Operations Audit Support

Req #	SOW Requirement
6.4.1-01 (existing)	The Contractor shall undergo an annual Statement of Standards for Attestation Engagements No. 18 (SSAE 18) or successor audit as directed by the State Project Director or designee.
6.4.1-02 (existing)	The Contractor shall actively participate and assist State auditors in conducting annual audits.
6.4.1-03 (existing)	The Contractor shall work collaboratively with the auditors and provide complete and accurate information and Documentation at no cost to the State for such participation, assistance, and work.
6.4.1-04 (existing)	The Contractor shall notify the appropriate State staff, Service Desks, and all impacted vendors of any incident (e.g., limited access, outages, and security violations).
6.4.1-05 (existing)	The Contractor shall deliver to the authorized State representative who will determine outcomes.

6.4.2 Operations Maintenance Requirements

Table 6-18: Operations Maintenance Requirements

Req #	SOW Requirement
6.4.2-01 (existing)	The Contractor shall update and maintain all data elements as required by the Federal General Systems Design for Federal reporting.
6.4.2-02 (modified)	The Contractor shall accurately document and provide within the Operations manual, processes and procedures to manage availability of the System and cloud-based Services. This includes, but is not limited to: 1. Approach to monitor, analyze, and manage the availability of the System to meet the availability requirements 2. Contractor, State Project staff and State roles and responsibilities 3. Assumptions 4. Moves, additions, changes, and de-installation of System and cloud-based services and configurations. 5. Install and upgrade software components 6. Monitor all System availability for System and cloud-based service including the identification, analysis, resolution and reporting of issues
6.4.2-03 (existing)	The State and the Contractor shall jointly determine the criteria using reasonable judgment, for replacement of any equipment component which, after multiple service calls, fails to effectively perform or function in an acceptable manner.
6.4.2-04 (modified)	The Contractor shall accurately detail Contractor and State roles & responsibilities in the Operations Plan Deliverable.
6.4.2-05 (modified)	The Contractor shall provide the following information on where Asset Management Tool will reside. The information shall include but not be limited to: 1. Environment(s) 2. Interfaces 3. Accessibility 4. Usability 5. Reliability 6. Backup and recovery
6.4.2-06 (modified)	The Contractor shall provide information on Asset Management Tool Security. The information shall include but not be limited to: 1. Overall security of the tool 2. Administrative Overview
6.4.2-07 (existing)	The Contractor shall be fully responsible for the availability, performance, growth, capacity, equipment, software, and operational services of the System.
6.4.2-08 (existing)	The Contractor shall be responsible for maintaining and operating the System.
6.4.2-09 (existing)	The Contractor shall formally request approval for scheduled maintenance periods at least 72 hours prior to the maintenance activity. Scheduled maintenance periods shall be mutually agreed upon and approved by the State and the Contractor.
6.4.2-10 (modified)	The Contractor shall evaluate and implement state and federal statutory and/or regulatory changes associated with the Affordable Care Act Renewal and Open Enrollment functionality.
6.4.2-11 (existing)	The Contractor shall evaluate and implement state and federal regulatory or contractual changes associated with the annual update to carrier offers of insurance through the Covered California marketplace. Changes include but are not limited to: 1. Onboarding of new carriers 2. Upload of new insurance offerings and rates 3. Decommission of non-Contracted carriers 4. Carrier interface testing and certification activities
6.4.2-12 (new)	The Contractor shall evaluate and implement changes associated with the Federal Poverty Level Cost of Living Adjustments (COLA).

Req #	SOW Requirement
6.4.2-13 (new)	The Contractor shall, through ongoing, year-round efforts, evaluate and implement changes associated with all annual tax filing forms, notices, and interface files for the Internal Revenue Services (IRS) and the Franchise Tax Board (FTB).

6.5 INTERFACE SUPPORT

6.5.1 Interface Control Document

The CalHEERS Project works closely and collaboratively with various stakeholders across the State. Part of this collaboration includes interfaces with both State and federal systems in an effort to support the State. The Contractor shall perform the Interfaces Support Services as described in the requirements in this section.

Table 6-19: Interface Control Document (CD-6.5-1)

Req #	SOW Requirement
6.5.1-01 (modified)	The Contractor shall adopt, enhance, deliver, and maintain the CD-6.5-1 - Interface Control Document, which includes but is not limited to: 1. INTRODUCTION 1.1 Purpose 1.2 Audience 2. SUMMARY 2.1 Scope 3. APPROACH 4. ASSUMPTIONS, CONSTRAINTS, AND RISKS 4.1 Assumptions 4.2 Constraints 4.3 Risks 5. REQUIREMENTS 6. ROLES AND RESPONSIBILITIES 7. INTERFACE PARTNERS 7.1 Partnerships 7.2 Federal Data Service Hub 7.3 Department of Health Care Services 7.4 Insurance Carriers 7.5 Employment Development Department 7.6 Franchise Tax Board 7.7 Statewide Automated Welfare System 7.8 Salesforce 7.9 Smarty Streets 7.10 Intelligent Document Processing (IDP) 7.11 KP Corp and DFS Activity 7.12 AIM Interface 7.13 Contingency Plans 7.14 Detailed Interface Requirements 7.15 Integrated Healthcare Association (IHA) 7.16 California Medicaid Management Information System (CA-MMIS) and Health Access Programs (HAP) 8. TECHNICAL INTERACTIONS 8.1 Web Services 8.1.1 Producer 8.1.2 Consumer 8.2 Integration Fuse

Req #	SOW Requirement
	8.2.1 Communication Protocol 8.2.2 Security Methodology 8.3 Batch Service 8.3.1 Batch File Exchange 8.3.2 Communication Protocol 8.3.3 Security Methodology 9. TESTING APPROACH 9.1 Unit Testing 9.1.1 Trigger Test – Web Services 9.1.2 Trigger Test – Batch 9.1.3 Response Test – Web Service 9.1.4 Response Test – Batch 9.2 Assembly Testing – All Services 9.3 System Testing 9.3.1 System Testing – Web Services 9.3.2 System Testing – Batch 9.4 Network Connection Test – All Services 9.5 Integration Test 9.5.1 Integration Test – Web Services 9.5.2 Integration Test – Batch 9.6 Interface Performance (Load Testing) 9.6.1 Web Services 9.6.2 Performance Testing – Batch 9.7 Security Testing 9.8 UAT Testing 9.8.1 User Acceptance Testing – Web Services 9.8.2 User Acceptance Testing – Batch 9.9 Testing Schedule 10. GLOSSARY AND ACRONYMS 10.1 New Acronyms and Terms APPENDIX 1: SOW TO DELIVERABLE TRACEABILITY CHECKLIST APPENDIX 2: DELIVERABLE COMPLIANCE AND VALIDATION CHECKLIST APPENDIX 3: ASSOCIATED ARTIFACTS APPENDIX 4: RETIRED INTERFACE PARTNERS APPENDIX 5: RETIRED INSURANCE CARRIER INTERFACES
6.5.1-02 (new)	The Contractor shall only alter or modify this Deliverable's structure or content with the approval of the State Project Director or designee.
6.5.1-03 (new)	The State identifies and associates the following artifacts to the CD-6.5-1 - Interface Control Document. The Contractor shall adopt, update, maintain, and deliver these artifacts in accordance with Appendix 3 of this deliverable including, but not limited to: • CalHEERS - product vendor access list • Partner Contacts
6.5.1-04 (new)	The Contractor shall adopt and maintain all Project Artifacts that are associated with this Deliverable in the Project Artifact Inventory and manage them in accordance with the Project Artifact process.
6.5.1-05 (new)	The Contractor shall update the following appendices and attach them to the Interface Control Document: Appendix 1—SOW to Deliverable Traceability Checklist Description: A table where the Contractor identifies the SOW requirements for this Deliverable, as specified within SOW Section 8, DELIVERABLES, and includes but is not limited to: 1. SOW Requirement ID # 2. SOW Requirement Text

Req #	SOW Requirement
	3. Requirement Traceability (Contractor identified traceability from the requirements to the Deliverable) 4. Requirement Fulfillment (Define how the Contractor has fulfilled the SOW requirements in the Deliverable) Appendix 2—Deliverable Compliance and Validation Checklist Description: A QA Checklist that includes, but is not limited to: 1. Deliverable Section Number and Title 2. Deliverable Requirement Statement(s) 3. Requirement Completion (How the Contractor has complied with or will comply with the requirement statements within the Deliverable) 4. Validation Method (The method the Contractor used to validate Deliverable compliance) 5. The Contractor's QA Manager sign-off on compliance Appendix 3—Associated Artifacts Description: An extract from the Project Artifact Inventory List of artifacts associated with this Deliverable, and will include but is not limited to the following examples: 1. Artifact Name 2. Associated Parent DEL 3. State Approver 4. SI Point of Contact 5. Review Frequency 6. Submission Frequency 7. Artifact File Format 8. Artifact Location (e.g., SharePoint breadcrumb) 9. Link to artifact

6.5.2 Interface Support Execution

Table 6-20: Interface Support Execution

Req #	SOW Requirement
6.5.2-01 (new)	The Contractor shall staff, manage, lead and execute all interface support activities on CalHEERS as defined in this Statement of Work and in accordance with the CD-6.5-1 – Interface Control Document.
6.5.2-02 (existing)	The Contractor shall be responsible for managing and maintaining the interconnections and services between the System and interface partners on behalf of the CalHEERS Project.
6.5.2-03 (existing)	The Contractor shall provide consultation and technical assistance in support of ANSI EDI 834 carrier transaction creation and potential file splits in support of yearly enrollment transactions.
6.5.2-04 (existing)	The Contractor shall generate enrollment flat file to send to carriers for alternative Electronic Data Interchange (EDI) processing and process the response files to effectuate coverage as necessary.
6.5.2-05 (existing)	The Contractor shall monitor and report upon the processing of batch files and review the batch logs of all interfaces, in accordance with the Operations Plan and is responsible for any issues/defects that occur as a result of failed batch/interface transactions.
6.5.2-06 (existing)	The Contractor shall assist the State in the development of Inter-Agency Agreements with each entity that the System will interface with. The Inter-Agency Agreements will document interface file layouts, interface transaction frequencies, interface test procedures, security and file transfer protocols.

Req #	SOW Requirement
6.5.2-07 (existing)	The Contractor shall propose and implement a strategy to interface with each of the existing Statewide Automated Welfare Systems.
6.5.2-08 (new)	The Contractor shall collaborate with the State to develop and maintain any new Project Artifacts necessary to support this section. New artifacts shall be added to the Project Artifacts Repository and managed in accordance with the Project Artifact process.

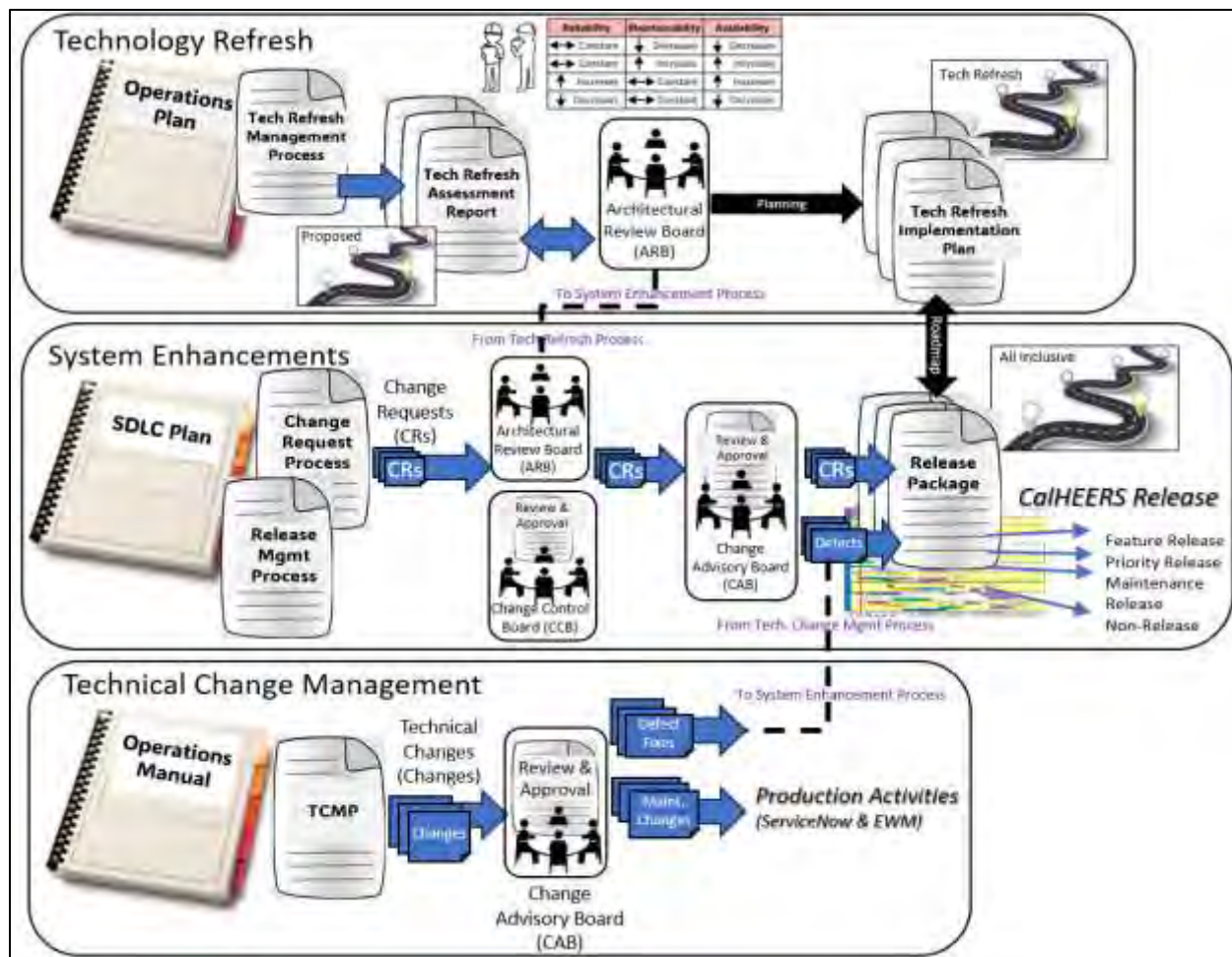
6.6 TECHNOLOGY REFRESH

Technology Refresh (also referred to as Tech Refresh) is the systematic processes and governance for maintaining relevancy of System components and Services driven primarily by the shear pace of technology that causes obsolescence, devaluation of component functionality, and creates System vulnerabilities, maintainability, and supportability issues.

To support the State's technology refresh needs, the Contractor will assist the State in creating several documents outlined below to guide the process of technology refresh and to ensure refresh activities are planned for and rolled out in a strategic, and systematic way.

There are three important processes to consider when implementing Tech Refresh: Technology Refresh, System Enhancements, and Technical Change Management. The relationship between the three aspects of tech refresh is identified in SOW 6.1.1 OPERATIONS PLAN and shown in the figure below.

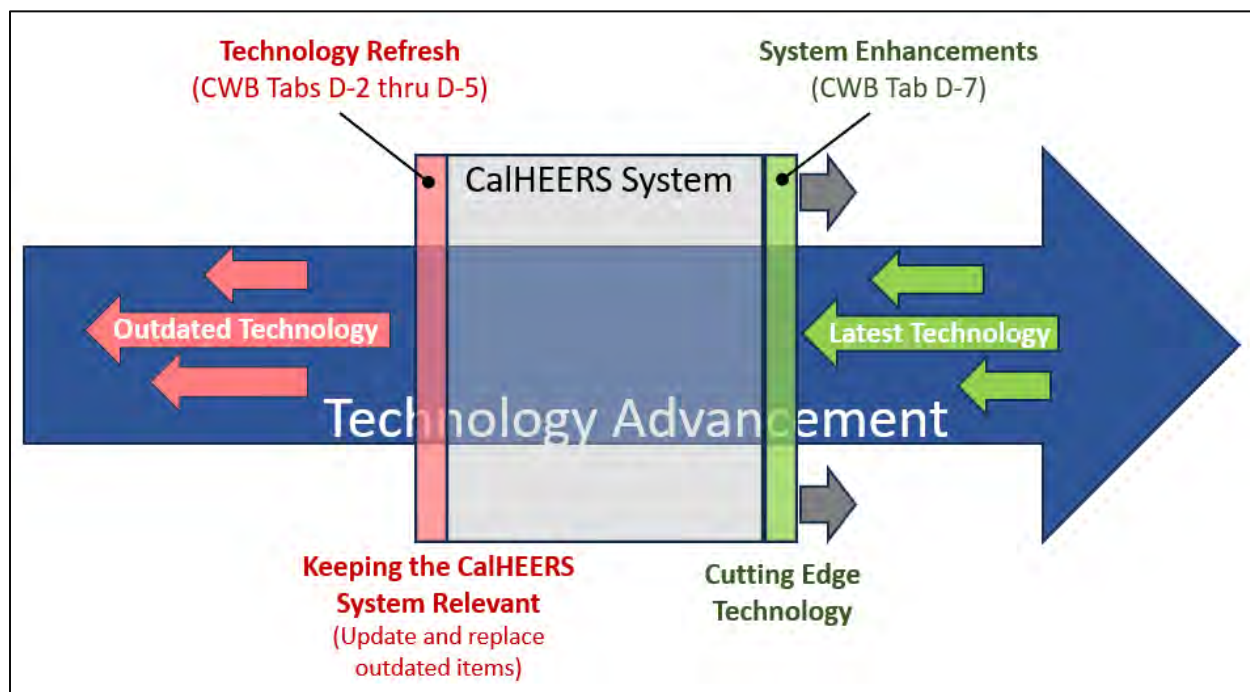
Figure 6-1: Technology Refresh Interactions



Technology Refresh versus System Enhancements: Technology refresh does have cross-over to Enhancement activities discussed in SOW 4. However, enhancements push the CalHEERS forward-looking to newer functionality and innovation in scope over time while technology refresh looks back in order to ensure the existing functionality remains supportable, sustainable, secure and maintainable over time.

Figure 6-2 below helps to illustrate how both technology refresh and system enhancements interact with one another while maintaining different purposes and focus. [Technology refresh services mostly strive to maintain system relevancy, with a maintenance focus, while also ensuring that the technology does not become obsolete, outdated, and unreliable. Funding for technology refresh is provided with funding sources from the Appendix D - Cost Workbook \(CWB\) Tabs D-2 thru D-5. Converse, System Enhancement services mostly strive to find cutting edge technology to bring efficiencies, innovation, and productivity improvements. Funding for system enhancements is provided with funding sources from CWB Tab D-7. As shown in the figure below, there is a grey area between Technology Refresh and System Enhancements. For the grey areas, the State will work in partnership and on a case-by-case basis to decide the best classification to assign costs.](#)

Figure 6-2: Technology Refresh versus System Enhancement



6.6.1 Technology Refresh Management Process

The Tech Refresh Management process is the establishment of consistent and repeatable processes that govern and strategically drive the Tech Refresh activities through the System Enhancements processes (SOW 4) within the CalHEERS management [structure](#). Governance for Tech Refresh is done via the Architectural Review Board (ARB) and interacts with the existing CalHEERS Change Request (CR) processes and Release Planning lifecycles.

Table 6-21: Technology Refresh Management Process (CD-6.6-1)

Req #	SOW Requirement
6.6.1-01 (new)	The Contractor shall develop, adopt, enhance, deliver, and maintain a Technology Refresh Management Process that identifies repeatable processes that govern and strategically drive/manage the tech refresh activities for CalHEERS. The deliverable shall include but is not limited to: REVISION HISTORY 1. INTRODUCTION 1.1. Purpose of this Deliverable 1.2. Reference Documents (used to create this del and/or referenced by this del) 1.3. Deliverable/Artifact Hierarchy Diagram Relationships 1.4. Intended Audience for this Deliverable 2. SCOPE 2.1. Scope of the Tech Refresh Management Process DEL 2.2. Tech Refresh In-Scope/Out-of-Scope 2.3. Definitions 2.4. Distinctions between Tech Refresh, System Enhancements (CR's), Technical Change Requests (TCR's) 2.5. Update Frequency 2.6. SOW requirements for this deliverable (reference Appendix 1,2,3) 2.7. Other requirements (implied or other) for this deliverable 3. The Tech Refresh Life Cycle 3.1. Tech Refresh Life Cycle Timeline (Figure and Narrative) 3.2. How the Tech Refresh Life Cycle Works 3.3. Role of Architectural Review Board (ARB) in Tech Refresh 3.4. Interfaces to Enhancement CR Cycles and Technology Change Cycles 4. ASSUMPTIONS, CONSTRAINTS, AND RISKS 4.1. Assumptions for managing Tech Refresh 4.2. Constraints for managing Tech Refresh 4.3. Risks to the management of Tech Refresh 5. SPECIFIC PROCESSES FOR MANAGING TECH REFRESH 5.1. Assessments, Findings, & Recommendations Report Processes 5.2. Assessment Presenting, Prioritizing & Approving Candidate Processes 5.3. Architectural Review Board (ARB) Process 5.4. Processes for Interfacing System Enhancement Governance (e.g. CRs) 5.5. Tech Refresh Plan & Tech Refresh Implementation Processes 5.6. Tech Refresh Implementation Completion and Retrospect Process. 5.7. Processes for Managing the Tech Refresh Life Cycle 5.8. Process for Cost Review/Approvals, Cost Traceability, & Cost Management Plan 6. ROLES AND RESPONSIBILITIES (by Tech Refresh Processes) 6.1. Process 5.1 - R&Rs (SI, Sponsor, OTSI CalHEERS Technical, PM, Fiscal, etc.) 6.2. Process 5.2 - R&Rs (SI, Sponsor, OTSI CalHEERS Technical, PM, Fiscal, etc.) 7. TOOLS 7.1. Approach for Using Tools to Manage Tech Refresh 8. MANAGEMENT OF OPERATIONS AREAS APPLICABLE TO TECH REFRESH 8.1. Cloud Infrastructure 8.2. Capacity 8.3. Compute – CPU, Servers and Memory 8.4. Network 8.5. Storage 8.6. Database 8.7. Other 9. TRIGGERS DRIVING TECHNOLOGY REFRESH & FUNDING CATEGORIES 10. GLOSSARY AND ACRONYMS 10.1. Existing Terms Used for Tech Refresh

Req #	SOW Requirement
	10.2. New Acronyms and Terms APPENDIX 1: SOW TO DELIVERABLE TRACEABILITY CHECKLIST APPENDIX 2: DELIVERABLE COMPLIANCE AND VALIDATION CHECKLIST APPENDIX 3: ASSOCIATED ARTIFACTS
6.6.1-02 (new)	The Contractor shall include as part of the Technology Refresh Management Process, a description of the process for collaboration with the <u>State</u> in the planning and development of the Technology Refresh Roadmap.
6.6.1-03 (modified)	The Contractor shall include as part of the technology refresh management process a description of the <u>following</u> tech refresh triggers (and <u>applicable</u> funding category), including, but not limited to: • Hardware <u>Triggers / Funding category- CWB D-2 Hardware</u> - o <u>Version compliance</u> - o <u>No longer supportable</u> - o End-of-Life including impact of continued vendor maintenance availability - o <u>Independent outside feedback</u> • Hosting <u>Triggers / Funding category- CWB D-4 Cloud Hosting Data Center Services</u> - o CPU resources - o Network bandwidth - o Data storage - o Capacity • Software <u>Triggers / Funding category- CWB D-3 Software</u> - o Licenses - o N-1 version compliance - o Support retention - o Product defect correction - o End-of-Life including impact of continued vendor maintenance availability - o Pre-existing security vulnerabilities - o <u>Independent outside feedback</u> • SDMO <u>Triggers / Funding category- CWB D-5 SDMO Services</u> - o Tech Refresh planning, research, analysis, reporting, tracking, presenting, deliverable development, artifact development, etc. - o Contractor role in ARB process, including proof of concept (POC), sandbox, pilot, and other activities that lead to solution selection. - o Effort related to implementing & configuring Technology Refresh solutions • System Enhancement <u>Triggers / Funding category- CWB D-7 Enhancements</u> - o State <u>approved</u> enhancements to <u>hHardware</u>, <u>sSoftware</u>, <u>eCloud</u> <u>hosting data center sServices</u>, and <u>enterprise</u> <u>tools</u> beyond the scope of Tech Refresh (e.g., replacing an <u>industry standard</u> <u>obsolete</u> tool with a state-of-the-art AI solution)
6.6.1-04 (new)	The Contractor shall document the Architectural Review Board (ARB) process, including diagrams and associated roles and responsibilities within the CD-6.6-1 - Technology Refresh Management Process deliverable.
6.6.1-05 (new)	The Contractor shall collaborate with the State to develop and maintain any new Project Artifacts necessary to support this section. New artifacts shall be added to the Project Artifacts Repository and managed in accordance with the Project Artifact process.
6.6.1-06 (new)	The State identifies and associates the following artifacts to the Technology Refresh Management Process. The Contractor shall adopt, update, maintain, and deliver these artifacts in accordance with Appendix 3 of this Deliverable including, but not limited to: • API Integration with 3Scale • LWReleaseSchedule • OCP_Clusterwise_ProjectInventory • SOP - ClamAV Installation and Operation - Updated • SOP-ApiPolicy_Custom_AT_Build • SOP-ApiPolicy_Custom_AT_Deployment

Req #	SOW Requirement
	- SOP-APIPolicy_Custom_Dev_Build - SOP-APIPolicy_Custom_Dev_Deployment
6.6.1-07 (new)	The Contractor shall adopt and maintain all Project Artifacts that are associated with this Deliverable in the Project Artifact Inventory and manage them in accordance with the Project Artifact process.
6.6.1-08 (new)	The Contractor shall update or develop the following appendices and attach them to the Technology Refresh Assessment Report Deliverable: Appendix 1—SOW to Deliverable Traceability Checklist Description: A table that identifies the SOW requirements for this Deliverable, as specified within SOW Section 8, DELIVERABLES, and includes but is not limited to: - SOW Requirement ID # - SOW Requirement Text - Requirement Traceability (Define traceability of the requirements to the Deliverable) - Requirement Fulfillment (Define how the SOW requirements have been fulfilled by this Deliverable) Appendix 2—Deliverable Compliance and Validation Checklist Description: A QA Checklist that includes, but is not limited to: - Deliverable Section Number and Title - Deliverable Requirement Statement(s) - Requirement Completion (How the Contractor will comply with or has complied with the requirement statements within the plan) - Validation Method (The method the Contractor used to validate Deliverable compliance) - The Contractor's QA Manager sign-off on compliance Appendix 3—Associated Artifacts Description: An extract from the Project Artifact Inventory List of artifacts associated with this Deliverable, and will include but is not limited to the following examples: - Artifact Name - Associated Parent DEL - State Approver - SI Point of Contact - Review Frequency - Submission Frequency - Artifact File Format - Artifact Location (e.g., SharePoint breadcrumb) - Link to artifact

6.6.2 Technology Refresh Assessments & Findings Reports

Tech Refresh Assessments are scheduled events done periodically and in accordance with the CalHEERS Operations Plan processes for Tech Refresh and in collaboration with the State. The assessments assess the CalHEERS System components (e.g. Hardware, Software, Cloud Services, and enterprise tools) for technology that needs to be considered for replacement or upgrade due to supportability, maintainability, or other factors that could put the System at risk operationally.

Assessment findings are then summarized in the Technology Refresh Assessment Report. The report includes a presentation of findings and recommendations for when and how candidates might be implemented as part of a future release. The implementation of Tech Refresh activities are coordinated through the Tech Refresh Plan and coordinated with the existing CalHEERS release planning processes for eventual release.

Table 6-22: Technology Refresh Assessment Report (CD-6.6-2)

Req #	SOW Requirement
6.6.2-01 (new)	The Contractor shall develop, adopt, enhance, deliver, and maintain a CD-6.6-2 - Technology Refresh Assessment Report, which includes but is not limited to: REVISION HISTORY 1. INTRODUCTION 1.1. Purpose of this Deliverable 1.2. Reference Documents 1.3. Intended Audience for this Deliverable 1.4. SOW Reference and Traceability (reference to Appendix 1, 2, 3) 1.5. Deliverable/Artifact Hierarchy Diagram (applicable to this Report) 2. BACKGROUND 2.1. Technology Refresh Assessment Methodology and Approach Used 2.2. Timeframe for creation of the Report 2.3. Specific areas focused on by this Report during this Tech Refresh cycle 2.4. Triggers that are driving this Tech Refresh cycle (HW, SW, Cloud, etc.) 2.5. Exceptions / Items Not Addressed by this Tech Refresh cycle 3. EXECUTIVE LEVEL SUMMARY OF FINDINGS AND RECOMMENDATIONS 3.1. Report Findings & Recommendations Executive Summary Table 3.2. High Level Tech Refresh Release Timelines for Single/Multiple Releases 3.3. Scorecard (matrix) of Tech Refresh Triggers by Operational Area 3.4. Proposed Cost Estimates for Implementation / Options to Consider / Contract Cost Categories 3.5. Urgency and Rationale for the Tech Refresh Timeline/Schedule/Cost 3.6. Resource Team used to create this Assessment Report (SI, State, other) 3.7. Outstanding Action Items, Risks, Decision Items to Follow-up on 3.8. PowerPoint Presentation & Materials for the High-Level Summary for Mgmt 4. APPROACH & STRATEGIES FOR IMPLEMENTATION 4.1. Strategies Considered and Recommending for Implementation (if approved) 4.2. Fiscal Cost Matrix (Change- by- HW(D-2), SW(D-3), Cloud Hosting (D-4), Imp Labor (D-5), and in rare cases, Enhancement (D-7) 4.3. # Change Requests and Composition Proposed for Consideration 5. ASSUMPTIONS, CONSTRAINTS, AND RISKS IN CREATING THIS REPORT 5.1. Assumptions Made in the Creation and Recommendations of this Report 5.2. Constraints Made in the Creation and Recommendations of this Report 5.3. Risks to Consider with implementing this Tech Refresh effort 6. REPORT DETAILS 6.1. Matrix of Operational Areas Impact 6.2. Matrix of Cost Area Impacts 6.3. Other Details 7. GLOSSARY AND ACRONYMS 7.1. New Acronyms and Terms APPENDIX 1: SOW TO DELIVERABLE TRACEABILITY CHECKLIST APPENDIX 2: DELIVERABLE COMPLIANCE AND VALIDATION CHECKLIST APPENDIX 3: ASSOCIATED ARTIFACTS
6.6.2-02 (new)	The Contractor shall only alter or modify this Deliverable's structure or content with the approval of the State Project Director or designee.
6.6.2-03 (new)	The Contractor shall conduct the technology refresh assessment process, utilizing the technology refresh trigger categories defined in the Technology Refresh Management Process, and develop a Technology Refresh Assessment Report that provides the recommendations for operating and enhancing CalHEERS.

Req #	SOW Requirement																																								
6.6.2-04 (new)	The Contractor shall, within the Technology Refresh Assessment Report, provide the State with itemized tech refresh solution options, including all alternative options and pros and cons, with associated cost data for State approval: • Current Solution • Trigger that justified Bare Minimum Solution need • Bare Minimum Solution (Keeps CalHEERS running) • Bare Minimum + Enhancement Solution (Added benefit opportunity) • Justification for choosing Bare Minimum + Enhancement Solution • State Decision																																								
6.6.2-05 (new)	The Contractor shall develop, maintain, and utilize a Scorecard (matrix) that cross-references the Tech Refresh Categories by Operational Area (see example below), providing a grading/rating system that conveys to the State the projects status at the time of the Assessment Report. <table><tr><th></th><th>Hardware</th><th>Software</th><th>Hosting</th><th>Other</th></tr><tr><td>Cloud Infrastructure</td><td></td><td></td><td></td><td></td></tr><tr><td>Capacity</td><td></td><td></td><td></td><td></td></tr><tr><td>Compute – CPU, Servers and Memory</td><td></td><td></td><td></td><td></td></tr><tr><td>Network</td><td></td><td></td><td></td><td></td></tr><tr><td>Storage</td><td></td><td></td><td></td><td></td></tr><tr><td>Database</td><td></td><td></td><td></td><td></td></tr><tr><td>Other</td><td></td><td></td><td></td><td></td></tr></table>		Hardware	Software	Hosting	Other	Cloud Infrastructure					Capacity					Compute – CPU, Servers and Memory					Network					Storage					Database					Other				
	Hardware	Software	Hosting	Other																																					
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Compute – CPU, Servers and Memory																																									
Network																																									
Storage																																									
Database																																									
Other																																									
6.6.2-06 (new)	The Contractor shall adopt and maintain all Project Artifacts that are associated with this Deliverable in the Project Artifact Inventory and manage them in accordance with the Project Artifact process.																																								
6.6.2-07 (new)	The Contractor shall update or develop the following appendices and attach them to the Technology Refresh Assessment Report Deliverable: Appendix 1—SOW to Deliverable Traceability Checklist Description: A table that identifies the SOW requirements for this Deliverable, as specified within SOW Section 8, DELIVERABLES, and includes but is not limited to: 1. SOW Requirement ID # 2. SOW Requirement Text 3. Requirement Traceability (Define traceability of the requirements to the Deliverable) 4. Requirement Fulfillment (Define how the SOW requirements have been fulfilled by this Deliverable) Appendix 2—Deliverable Compliance and Validation Checklist Description: A QA Checklist that includes, but is not limited to: 1. Deliverable Section Number and Title 2. Deliverable Requirement Statement(s) 3. Requirement Completion (How the Contractor will comply with or has complied with the requirement statements within the plan) 4. Validation Method (The method the Contractor used to validate Deliverable compliance) 5. The Contractor's QA Manager sign-off on compliance Appendix 3—Associated Artifacts Description: An extract from the Project Artifact Inventory List of artifacts associated with this Deliverable, and will include but is not limited to the following examples: 1. Artifact Name 2. Associated Parent DEL 3. State Approver 4. SI Point of Contact																																								

Req #	SOW Requirement
	5. Review Frequency 6. Submission Frequency 7. Artifact File Format 8. Artifact Location (e.g., SharePoint breadcrumb) 9. Link to artifact

6.6.3 Technology Refresh Planning / Technology Refresh Implementation Plan

Technology Refresh planning is the mechanism used to implement needed tech refresh updates as governed by the Technology Refresh Process, and through the existing CalHEERS Change Request (CR) process and release planning lifecycles.

As shown in Figure 1, the Technology Refresh Implementation Plan (also referred to as the Tech Refresh Implementation Plan) is an implementation-type plan that specifically outlines how a point-in-time technology refresh release(s) will be planned and implemented (start to finish). There will be many Tech Refresh Plans created and implemented throughout the life of the Contract and coordinated in accordance with the Technology Refresh Management Process in the Operations Plan.

Table 6-23: Technology Refresh Implementation Plan (CD-6.6-3)

Req #	SOW Requirement
6.6.3-01 (new)	The Contractor shall develop, adopt, enhance, deliver, and maintain a CD-6.6-3 - Technology Refresh Implementation Plan, which includes but is not limited to: REVISION HISTORY 1. INTRODUCTION 1.1. Purpose 1.2. List of Reference Documents 1.3. Recap of Findings from the Tech Refresh Assessment Report 1.4. Intended Audience for the Plan 2. SCOPE / CR SUMMARY 2.1. Overview of Technology Refresh Changes being Implemented or Proposed 2.2. Tech Refresh-Specific CR Requirements Summary 2.3. In-Scope and Out-of-Scope Considerations & Clarifications 2.4. SOW Requirements Traceability (reference to Appendix 1,2,3) 3. SCHEDULE AND COST SUMMARY 3.1. Tech Refresh Release Roadmap (if multiple releases, show full roadmap) 3.2. Tech Refresh Workplan (.mpp file) 3.3. Tech Refresh Change-to-Cost Category (HW/SW/Hosting) Traceability Matrix 3.4. Specific Schedule/Cost Considerations, Assumptions, Constraints made 3.5. Invoicing and Payment Plan Details & Interaction with the Cost Mgmt Plan 4. IMPLEMENTATION APPROACH 4.1. Implementation Strategies Employed 4.2. Triggers that are driving the Tech Refresh Upgrade (HW, SW, Cloud, etc.) 4.3. Planning & Implementation Considerations 4.4. Detailed Roadmap/Schedule Information (Microsoft Schedule for this Plan) 4.5. PowerPoint Presentation & Materials for Management Mtgs and Reviews 4.6. Meeting Agenda's and Meeting Minutes (Including Action Item tracking, etc.) 5. IMPLEMENTATION ASSUMPTIONS, CONSTRAINTS, AND RISKS 5.1. Assumptions for this Tech Refresh effort 5.2. Constraints for this Tech Refresh effort 5.3. Risks with implementing this Tech Refresh effort 6. IMPLEMENTATION ROLES AND RESPONSIBILITIES 6.1. System Integrator R&Rs

Req #	SOW Requirement
	6.2. Sponsor CalHEERS R&Rs (if any) 6.3. OTSI CalHEERS Technical Team R&Rs 6.4. OTSI CalHEERS Fiscal Team R&Rs 6.5. Other R&Rs 7. IMPLEMENTATION CLOSEOUT 7.1. Retrospect 7.2. Lessons Learned 8. DETAILS- OPERATIONS AREAS IMPACTED (mapped to CR#, Cost type, & Release) 8.1. Cloud Infrastructure 8.2. Capacity 8.3. Compute – CPU, Servers and Memory 8.4. Network 8.5. Storage 8.6. Database 8.7. Other 9. GLOSSARY AND ACRONYMS 9.1. Existing Acronyms used in this Plan 9.2. New Acronyms and Terms APPENDIX 1: SOW TO DELIVERABLE TRACEABILITY CHECKLIST APPENDIX 2: DELIVERABLE COMPLIANCE AND VALIDATION CHECKLIST APPENDIX 3: ASSOCIATED ARTIFACTS
6.6.3-02 (new)	The Contractor shall only alter or modify this Deliverable's structure or content with the approval of the State Project Director or designee.
6.6.3-03 (new)	The Contractor shall adopt and maintain all Project Artifacts that are associated with this Deliverable in the Project Artifact Inventory and manage them in accordance with the Project Artifact process.
6.6.3-04 (new)	The Contractor shall update or develop the following appendices and attach them to the CalHEERS Policy and Legislative Change Support Plan deliverable: Appendix 1—SOW to Deliverable Traceability Checklist Description: A table that identifies the SOW requirements for this Deliverable, as specified within SOW Section 8, DELIVERABLES, and includes but is not limited to: 1. SOW Requirement ID # 2. SOW Requirement Text 3. Requirement Traceability (Define traceability of the requirements to the Deliverable) 4. Requirement Fulfillment (Define how the SOW requirements have been fulfilled by this Deliverable) Appendix 2—Deliverable Compliance and Validation Checklist Description: A QA Checklist that includes, but is not limited to: 1. Deliverable Section Number and Title 2. Deliverable Requirement Statement(s) 3. Requirement Completion (How the Contractor will comply with or has complied with the requirement statements within the plan) 4. Validation Method (The method the Contractor used to validate Deliverable compliance) 5. The Contractor's QA Manager sign-off on compliance Appendix 3—Associated Artifacts Description: An extract from the Project Artifact Inventory List of artifacts associated with this Deliverable, and will include but is not limited to the following examples: 1. Artifact Name 2. Associated Parent DEL

Req #	SOW Requirement
	3. State Approver 4. SI Point of Contact 5. Review Frequency 6. Submission Frequency 7. Artifact File Format 8. Artifact Location (e.g., SharePoint breadcrumb) 9. Link to artifact

6.6.4 Technology Refresh Execution

Table 6-24: Technology Refresh Execution

Req #	SOW Requirement
6.6.4-01 (new)	The Contractor shall staff, manage, lead and execute all technology refresh activities on CalHEERS as defined in this Statement of Work and in accordance with the approved Technology Refresh deliverables.
6.6.4-02 (new)	The Contractor shall conduct all Technology Refresh planning, management, assessment, reporting, tracking, Deliverable development, workplan development and maintenance activities under the Fixed Price. Note: The Implementation of the State approved technology refresh recommendations will be executed via the existing CalHEERS change management processes, as defined within the CD-4.2-1 - Change Request Process, and costed as described below: • Tech Refresh HW costs → Appendix D-2, SDMO Hardware Costs • Tech Refresh SW costs → Appendix D-3, SDMO Software Costs • Tech Refresh Cloud Hosting Service Costs → Appendix D-4, Cloud Hosting Data Center Services Costs • Tech Refresh Implementation Effort → Appendix D-5, SDMO Fixed Price Costs. • State approved Enhancements driven by Tech Refresh → Appendix D-7, System Change Costs (not typical/used on an exception basis).
6.6.4-03 (new)	The Contractor shall conduct a Technology Refresh Assessment, which shall assess the projects technology (e.g., Hardware, Software, Cloud Services, and enterprise tools) with a focus on System supportability, maintainability, and enhancing CalHEERS, as defined in Requirement #6.6.1-03.
6.6.4-04 (new)	The Contractor shall facilitate all Technology Refresh meetings, including planning, technical, pilots/demos, financial, weekly status, workplan review, and any other meetings deemed necessary by the State, providing agendas, presentation materials, minutes, and any other documentation necessary.
6.6.4-05 (new)	The Contractor shall update all project documentation related to technical refresh, e.g., Weekly Director's Report , and Deliverables & artifacts, including design documents, technical and target State architecture diagrams, etc.
6.6.4-06 (new)	The Contractor shall communicate out Technical Refresh planning and status information to the project.
6.6.4-07 (new)	The Contractor shall collaborate with the State to review the Technology Refresh Assessment recommendations and determine where proposed upgrades fall, as defined in ~~Requirement Rqmt~~ #6.6.1-03.
6.6.4-08	~~Intentionally Left Blank~~
6.6.4-09 (new)	The Contractor shall utilize the Architectural Review Board (ARB) process for general and technology refresh architectural changes, as directed by the State, analyzing and approving newly introduced technical solutions, architectural changes, or add-on features to existing solutions for use on CalHEERS.

Req #	SOW Requirement
6.6.4-10 (new)	The Contractor shall support the CalHEERS ARB process, including but not limited to those activities required to narrow down and finalize solution selection: • Licensing or tool-related costs required for any pre-state decisioning • Hosting or environment changes • Proof of Concept (POC), sandbox, pilot, etc. • Testing • Additional reporting, data, or testing requested by the State in relation to tool review and/or testing. Cost Consideration: • ARB support for Tech Refresh efforts shall be costed under the Fixed Price (Appendix D, D-5 Fixed Price, SOW 6.6). • ARB support for Technology Enhancements & Innovation shall be costed under the System Changes Costs (Appendix D, D-7 System Change).
6.6.4-11 (new)	The Contractor shall facilitate, organize, and implement all phases of the ARB process, which at a minimum scrutinizes each new change or item (whether Software has licensing cost or no cost, such as Open Source Software) for security and technical synergy with CalHEERS. The State Contract Management team should be involved as soon as costs or contractual obligations become part of the discussion. Three phases in the ARB process: 1. ARB Preparation a. Requires development of a use case for the solution and then a narrowing of options for State review from all industry-leading and other recommended Software that fit CalHEERS needs to a minimum of three (3). Criterion for developing the use case and narrowing of options shall include but not be limited to: i. Requirements gathering is the first step, which should involve the State Technical Team and Sponsors, and, when applicable, the team who will be using the Software. (When an enterprise tool, this of course must include State team members who use the tool, State PMO, etc.) This step includes but is not limited to, a review of environment(s) required for, Data Governance, interfaces, accessibility, usability, reliability, space and resource needs, backup and recovery. ii. POCs, pilots, sandbox, and other testing, vetting, narrowing of options. iii. Review options based on risks to the State/CalHEERS. (Including review of terms and conditions, end user license agreements, etc., for State risks.) iv. Review options based on CalHEERS needs, fit with existing interfacing Software or interfaces, and pain points. v. Review options based on the security viability of each option. b. State and CalHEERS ISO security review of top 3 or more options Contractor proposes proceeding with as options for review in next phases. 2. Official ARB – Once narrowed to top three options, the Official ARB process shall begin with presentation of options to the State, providing pros and cons and results gathered from the ARB Preparation phase for each option. Presentation to State with these options shall include but not be limited to: a. SI must provide a minimum of 3 product choices of industry best software for the solution along with the larger list (minimum of the top ten (10) industry-best tools shall always be measured against State needs and pain points) of all tools originally reviewed and considered. b. Tech synergy discussions and compatibility with existing project Software, where applicable. c. Cost comparisons among options including total cost for initial and

Req #	SOW Requirement
	projected for the future (including all additional related costs required such as Software, hosting, etc.) d. Comparisons of pros and cons, costs for current solution (when applicable) versus all costs for each proposed solution, features, and State needs. e. Data retention plan. f. Options to avoid “lock-in.” Lock-in is the effort and costs necessary to transition, accurately and efficiently, all active and historical data when a new tool is required by the State. (Lock-in does not just refer to the tool itself, but often to related tools and infrastructure. For example, the use of some tools can cause the System to be locked-in to using the current cloud provider or require the use of other, related tools.) g. All ARB presentations must include Data Governance Diagrams (as defined in 6.9.2 Data Management Execution, with enough detail to support data sharing with external partners, if required. 3. Post-ARB a. State team using Software and State Technical Team may give final review and make final decision on options and additional changes and tool settings to improve the tool. b. As part of the ramp up in use of any new tool are tool-related changes, improvements, and new pain points requiring settings tweaks, additional Software, and add-on features that may also require ARB review, or at a minimum, security review. c. Any product previously approved by the ARB and being considered for additional features, must have an additional ARB review to ensure that the expanded use is evaluated for compatibility with architecture and Data Governance.
6.6.4-12 (new)	The Contractor shall, when proposing a “lock-in” solution/configuration in the ARB process (a solution/configuration that “locks” the State onto a technical path that may limit downstream or future solution options) document and present the State with an analysis that includes, but is not limited to the following: 1. Identification of all solution system impacts to the System 2. List of pre-dispositioned follow-on solutions that result from the lock-in 3. List of solutions rendered non-viable for CalHEERS because of the lock-in
6.6.4-13 (new)	The Contractor shall be responsible for the complete and accurate extraction, conversion, and migration of any and all data from the existing to ARB approved solutions.
6.6.4-14 (new)	The Contractor shall collaborate with the State to develop and maintain any new Project Artifacts necessary to support this section. New artifacts shall be added to the Project Artifacts Repository and managed in accordance with the Project Artifact process.

6.7 SYSTEM SECURITY

During the term of this Contract, the Contractor and the State will have access to and become acquainted with each party’s Confidential Information. The requirements below describe the responsibilities of the Contractor as it pertains to CalHEERS security for both State and federal requirements.

6.7.1 System Security Plan

The Contractor shall perform the System Security Plan services described in this section.

Table 6-25: System Security Plan (CD-6.7-1)

Req #	SOW Requirement
6.7.1-01 (new)	The Contractor shall adopt, enhance, deliver, and maintain the CD-6.7-1 - System Security Plan, ensuring it meets all the needs of the State, and includes the following appendices: APPENDIX 1: SOW TO DELIVERABLE TRACEABILITY CHECKLIST APPENDIX 2: DELIVERABLE COMPLIANCE AND VALIDATION CHECKLIST APPENDIX 3: ASSOCIATED ARTIFACTS
6.7.1-02 (new)	The Contractor shall only alter or modify this Deliverable's structure or content with the approval of the State Project Director or designee.
6.7.1-03 (modified)	The Contractor shall adopt, enhance and maintain a System Security Plan which documents the System's security level and describes managerial, technical and operational security controls, that includes but is not limited to: 1. System Identification 2. Security Controls Detail by area 3. Threat Mitigation, including but not limited to applications, network, and facilities
6.7.1-04 (modified)	The Contractor shall provide and maintain a Security Policy and System Security Plan that includes, but is not be limited to: 1. The overall approach to State Security management and the Contractor, State Project staff and State roles and responsibilities. 2. Process and procedures for authentication of users based on role categories and access mechanisms. 3. Tools and regular tests used for monitoring security threats and vulnerabilities. 4. Processes and procedures for managing and responding to security incidents. 5. Procedures and templates for communications related to security activities and incidents.
6.7.1-05 (modified)	The Security Policy and System Security Plan shall accurately conform to the principles contained in the following Standards, Codes, acts, policies, publications and other documents: 1. Current ARC-AMPE. 2. Federal Information Processing Standards (FIPS) Publications 3. Federal Information Security Management Act (FISMA) and related U.S. Department of Health and Human Services (DHHS) Information Resource Management (IRM) and Office of the Chief Information Officer (OCIO) policies and Standards 4. Information Practices Act (Civil Code section 1798, et seq.) 5. OMB Circular A-130. Applicable International Organization for Standardization (ISO) Standards. Sarbanes Oxley 6. California Civil Code Section 1798.29 & 1798.82. AB 1298 (California Civil Code Sections 56.6, 1785.11.2, 1798.29, and 1798.82, relating to personal information) 7. Welfare and Institutions Code Section 10850 8. Civil Code 56.35© (5) 9. National Institute of Standards and Technology (NIST) Publications 10. SAS-70 Audit Standards 11. California Government Code 12168.7
6.7.1-06 (modified)	The Contractor shall develop, maintain, and execute a System Security Plan that utilizes and is maintained to the most current version of the Acceptable Risk Controls for Affordable Care Act (ACA), Medicaid, and Partner Entities (ARC-AMPE) and other security best practices to ensure that the CalHEERS has the appropriate level of System security.

Req #	SOW Requirement
6.7.1-07 (existing)	The Contractor shall accurately maintain a System Security Document which describes in specified detail the System's security level and describes managerial, technical and operational security controls, that includes, but is not limited to: 1. System Identification 2. Security Controls Detail by area
6.7.1-08 (new)	The State identifies and associates the following artifacts to the System Security Plan. The Contractor shall adopt, update, maintain, and deliver these artifacts in accordance with Appendix 3 of this deliverable including, but not limited to: • Information Security Risk Assessment • Security Incident Report • System Security Briefing • Keepass Setup_2022_ StepbyStep • OPAM User Guide - General Users • OPAM User Guide - Team Admins • Privacy Incident Process Overview - Best Practices • SOP - Guidance for upgrading Splunk enterprise • SOP - Prisma Cloud Container Scanning tool Upgrade • SOP - Trend Micro Upgrade • SOP-Palo Alto Firewall Upgrade • Security Incident Process Overview - Best Practices
6.7.1-09 (new)	The Contractor shall adopt and maintain all Project Artifacts that are associated with this Deliverable in the Project Artifact Inventory and manage them in accordance with the Project Artifact process.
6.7.1-10 (new)	The Contractor shall update or develop the following appendices and attach them to the System Security Plan deliverable: Appendix 1—SOW to Deliverable Traceability Checklist Description: A table that identifies the SOW requirements for this Deliverable, as specified within SOW Section 8, DELIVERABLES, and includes but is not limited to: 1. SOW Requirement ID # 2. SOW Requirement Text 3. Requirement Traceability (Define traceability of the requirements to the Deliverable) 4. Requirement Fulfillment (Define how the SOW requirements have been fulfilled by this Deliverable) Appendix 2—Deliverable Compliance and Validation Checklist Description: A QA Checklist that includes, but is not limited to: 1. Deliverable Section Number and Title 2. Deliverable Requirement Statement(s) 3. Requirement Completion (How the Contractor will comply with or has complied with the requirement statements within the plan) 4. Validation Method (The method the Contractor used to validate Deliverable compliance) 5. The Contractor's QA Manager sign-off on compliance Appendix 3—Associated Artifacts Description: An extract from the Project Artifact Inventory List of artifacts associated with this Deliverable, and will include but is not limited to the following examples: 1. Artifact Name 2. Associated Parent DEL 3. State Approver 4. SI Point of Contact 5. Review Frequency

Req #	SOW Requirement
	6. Submission Frequency 7. Artifact File Format 8. Artifact Location (e.g., SharePoint breadcrumb) 9. Link to artifact

6.7.2 System Security Execution

6.7.2.1 System Security Execution

Table 6-26: System Security Execution

Req #	SOW Requirement
6.7.2-01 (new)	The Contractor shall staff, manage, lead, and execute all System Security activities on CalHEERS as defined in the Statement of Work and in accordance with the CD-6.7-1 – System Security Plan.
6.7.2-02 (existing)	The Contractor <u>shall</u> develop, maintain, and execute a System Security Plan that includes but is not limited to monitoring activities to ensure that the CalHEERS System is <u>kept, at a minimum, up to the current industry best practices and current standards for</u> system security.
6.7.2-03 (new)	The Contractor shall mitigate, support, review, and respond to findings based on all Interagency Agreements. These activities will include, at a minimum: 1. Annual review to ensure compliance with data retention requirements. 2. Annual review to ensure compliance with cloud environment security.
6.7.2-04 (new)	The Contractor shall support independent penetration testing activities, reporting, and outcome resolutions, at the State's direction.
6.7.2-05 (existing)	The Contractor <u>shall</u> use a multi-layered approach to meet business and technical requirements and service level needs in both prevention and reaction. This includes but is not limited to physical boundary security, redirection of connections, separation of duties, user authentication and authorization, and end user behavior analysis.
6.7.2-06 (existing)	The Contractor, and each of their officers, employees, and authorized Contractors and Agents, shall maintain all Confidential Information of the other party in confidence and at least to the extent as it protects the confidentiality of its own confidential proprietary information of like kind, but in no event with less than reasonable care.
6.7.2-07 (existing)	No party will at any time use, publish, reproduce, or disclose any Confidential Information, except to authorized officers, employees, contractors and agents requiring such information under confidentiality requirements as authorized in writing by the other party, as otherwise specifically permitted herein, or to perform its obligations as authorized hereunder.
6.7.2-08	<u>Intentionally Left Blank</u>
6.7.2-09 (existing)	All parties shall take all steps necessary, including without limitation oral and written instructions to all Staff to safeguard, in accordance with applicable federal and State law, regulation and codes, the other party's Confidential Information against unauthorized disclosure, reproduction, publication or use, and to satisfy their obligations under this Contract.

Req #	SOW Requirement
6.7.2-10 (modified)	Each party agrees that, prior to disclosing any Confidential Information of the other party to any third party, it will obtain from that third party a written acknowledgment that such third party will be bound by the same terms with respect to the Confidential Information. In addition to the requirements expressly stated, the Contractor and its Subcontractors will comply with any applicable policy, rule, or reasonable requirement of the State or the Federal government (as of the Execution Date and thereafter as addressed in executed CRs) that relates to the safeguarding or disclosure of information relating to applicants and recipients of Covered California's services, the Contractor's operations, or the Services performed by Contractor under this Contract, including without limitation the terms of HIPAA; the HITECH Act; the HIPAA Privacy and Security Rules, 45 C.F.R. Part 160 and Part 164, Subparts A, C and E; 42 C.F.R. Part 2; 26 U.S.C. Section 6103; IRS Publication 1075 (Sep 2021 Version), the California Information Practices Act, California Civil Code <u>Section 1798 et seq.</u> ; the privacy and security provisions of the Information Exchange Agreement between the Social Security Administration and the California DHCS; and the Computer Matching and Privacy Protection Act Agreement between the Social Security Administration and the California Health and Human Services (CalHHS) Agency.
6.7.2-11 (existing)	The parties acknowledge and agree that such Information Exchange Agreement and Computer Matching and Privacy Protection Act Agreement, containing such privacy and security provisions, have been provided to the Contractor as of the Execution Date and are incorporated into the Contract by this reference. In the event that there are changes after the Execution Date in any applicable policy, rule or requirement of the State or federal governments relating to the safeguarding or disclosure of information as described above, such changes shall be treated as CRs if requested by either party.
6.7.2-12 (existing)	Each party, and its officers, employees, Subcontractors, and agents shall at all times comply with (i) all security standards which are described in the <u>Contract</u> , and (ii) practices and procedures which shall be documented in the System Security Plan Deliverable (as of the Execution Date and thereafter as addressed in executed CRs), and (iii) other security standards, practices and procedures of the State or the federal government (as of the Execution Date and thereafter as addressed in executed CRs), including the Information Exchange Agreement and Computer Matching and Privacy Protection Act Agreement. Such compliance shall be required with respect to information and materials which come into each party's possession and to which such party gains access under this Contract, including without limitation all Confidential Information.
6.7.2-13 (existing)	The State reserves the right to monitor, audit or investigate the Contractor's use of the State Confidential Information collected, used, or acquired by the Contractor under this Contract.
6.7.2-14 (modified)	Subject to record retention laws and Section 6.8, DATA RETENTION, BACKUP AND RECOVERY and Archive each party shall promptly return to the disclosing party, on termination or expiration, all of the disclosing party's Confidential Information, including copies thereof.
6.7.2-15 (existing)	The following information shall not be considered Confidential Information for the purposes of this Contract: information previously known when received from the other party and not subject to confidentiality obligations; information freely available to the general public; information which now is or hereafter becomes publicly known by other than a breach hereof; information which is developed by one party independently of any disclosures made by the other party of such information; or information which is disclosed by a party pursuant to subpoena or other legal process and is lawfully obtainable by the general public.
6.7.2-16 (existing)	Notwithstanding the above, the Contractor acknowledges that this Contract shall be a public record under State law, subject to California Government Code Section 100508. Any specific information that is claimed by the Contractor to be Confidential Information must be clearly identified as such by the Contractor. To the extent consistent with State law, including the California Public Records Act, the State will maintain the confidentiality of all such information marked Confidential Information.

Req #	SOW Requirement
6.7.2-17 (existing)	If a request is made to view the Contractor's Confidential Information, the State will notify the Contractor of the request and of the date that any such records will be released to the requester unless the Contractor obtains a court order enjoining that disclosure or other appropriate remedy. If the Contractor fails to obtain the court order enjoining disclosure prior to the deadline for responding to the request for documents, the State may release the identified requested information on the date specified without penalty or liability. The State reserves the right to also seek reimbursement for all costs and expenses incurred by the State in their refusal to produce the Contractor's confidential documents.
6.7.2-18 (existing)	As part of its nondisclosure obligations, the Contractor shall comply and require its officers, employees and Subcontractors to comply with the provisions of Section 14100.2 of the California Welfare and Institutions Code, Title 22 of the California Code of Regulations, Section 51011, and all other statutory laws relating to privacy and confidentiality.
6.7.2-19 (existing)	The Contractor shall keep confidential and not open to examination, for any purpose not directly connected with the administration of public social services, any applications and records concerning any individual made or kept by a public officer or agency in connection with the administration of the provision of the Welfare and Institutions Code relating to any form of public social services.
6.7.2-20 (existing)	The Contractor shall inform all of its employees, agents, Subcontractors, and partners of the above provision and that any person knowingly and intentionally violating the provisions of this State law is guilty of misdemeanor.
6.7.2-21	Intentionally Left Blank
6.7.2-22	Intentionally Left Blank
6.7.2-23 (modified)	The Contractor shall ensure that all data being stored or exchanged outside of the direct CalHEERS certified data hosting locations is handled based on current Acceptable Risk Controls for Affordable Care Act (ACA), Medicaid, and Partner Entities (ARC-AMPE). This includes, but is not limited to: 1. Offsite backup media; 2. Desktop/laptop disk drives; and 3. Data exchanges between any CalHEERS stakeholders including interface partners. 4. Other tool-specific Software-as-a-Service hosting solutions.
6.7.2-24 (existing)	The Contractor shall accurately provide and update a Data Use/Data State/Interconnection Security Agreement Document as required by Centers for Medicare and Medicaid Services (CMS).
6.7.2-25 (existing)	The Contractor shall prepare a Data Use/Data Exchange/Interconnection Security Agreement (Final) to address and include the following information: The Data Use Agreement (DUA) must be developed by the Business Owner and Project Manager and initiated in the design phase, continued throughout the development phase and test phase, and completed in the implementation phase. A DUA is a legal binding agreement between a federal agency and an external entity (e.g., Contractor, private industry, academic institution, other federal government agency, or state agency), when an external entity requests the use of personal identifiable data that is covered by the Privacy Act of 1974. The Agreement delineates the confidentiality requirements of the Privacy Act, security safeguards, and the federal agency's data use policies and procedures. The DUA serves as both a means of informing data users of these requirements and a means of obtaining their agreement to abide by these requirements. Additionally, the DUA serves as a control mechanism through which the Federal agency can track the location of its data and the reason for the release of the data. A DUA requires that a system of record notice be in effect, which allows for the disclosure of the data being used.

Req #	SOW Requirement
6.7.2-26 (existing)	The Contractor shall be responsible for defining, documenting, and maintaining authentication processes for various users based on role categories and access mechanisms.
6.7.2-27 (existing)	The Contractor shall ensure that all CalHEERS back-up files are encrypted. The key for encryption shall not be stored with the State backup files and Data. The encryption process shall be performed and verified prior to shipping the files and data backups off-site. The State reserves the right to audit the back-up process at its discretion.
6.7.2-28 (existing)	The Contractor shall not transmit over any public or private Network unencrypted files or messages containing System Data unless <u>coordinated with and approved</u> by the State.
6.7.2-29	<u>Intentionally Left Blank</u>
6.7.2-30 (existing)	The Contractor shall give read only access for independent analysis and verification.
6.7.2-31 (existing)	The Contractor shall, at a minimum, be responsible for: 1. Managing security of logging Data and Equipment used for security logging services 2. Routine monitoring of security logs and to identify threats and trends 3. Recommending and/or taking immediate remedial action based on the severity of the threat
6.7.2-32 (existing)	The Contractor shall be responsible for defining, configuring, and monitoring security events and System notifications.
6.7.2-33 (existing)	The Contractor shall be responsible for managing all security incidents through its standard lifecycle that includes, but is not limited to: 1. Identification 2. Collection and preservation of evidence 3. Containment 4. Eradication 5. Recovery 6. Follow-up
6.7.2-34 (modified)	<u>At a minimum, the Contractor shall conduct semi-annual <u>System security</u> audits in accordance with the <u>System Security Plan and</u> as requested by the State Project Director or designee.</u>
6.7.2-35 (new)	The Contractor shall develop and execute Corrective Action Plans (CAP) and Plan of Action Milestone (POAM) tasking resulting from security audit findings at no additional cost to the State and in accordance with the Configuration Management Plan.
6.7.2-36 (existing)	Every six (6) months the Contractor shall accurately prepare and deliver a semi-annual briefing (presentation) and written summary to the State on the overall security of the System.
6.7.2-37 (existing)	The Contractor shall complete the annual Information Technology Executive Committee (ITEC) security assessment.
6.7.2-38 (existing)	The Contractor shall monitor and maintain security and privacy standards to protect consumer privacy and continually add best practices to ensure consumer privacy is consistently maintained.
6.7.2-39 (new)	The Contractor shall execute the initial implementation, update, or replacement of any and all standards, regulations, or codes on the project, including all Deliverables and Services, under the SDMO Fixed Price.
6.7.2-40 (existing)	The Contractor shall take the lead role and responsibility for ensuring <u>processes and tools</u> ~~Business Associate Agreements~~ are in place in order to exchange Personally Identifiable Information (PII) and <u>Protected</u> Health Information (PHI), following <u>State, CalHEERS, and Sponsor</u> ~~DHCS~~ policies, best practices, and HIPAA regulations. The <u>DHCS-State</u> will function as the Subject Matter Expert support with this requirement.
6.7.2-41 (existing)	The Contractor shall design, document, and implement a CalHEERS Risk-Based Security & Privacy Framework.

Req #	SOW Requirement
6.7.2-42 (existing)	The Contractor shall maintain the Information Collection for Automated Mapping (ICAM) service principles. The information shall include but not be limited to: 1. Identity Proofing: Provide a minimum set of administrative controls and requirements for identity proofing (user proofing who they say they are) and for periodic management of authenticators. 2. Authorization: Users will be assigned roles to ensure that they have access to data that is needed to get the job done and nothing more (least privilege). 3. Authentication: Enabling increasing complexity of authentication as the sensitivity of the System and Data increases including but not limited to password policies, automatic password expiration policies, etc. 4. In addition to implementing ICAM services, the CalHEERS Security and Privacy Framework shall consider appropriate accountability and nonrepudiation requirements for most critical transactions.
6.7.2-43 (existing)	The Contractor shall provide a CalHEERS Security and Privacy Framework that must consider necessary security provisions and controls on the cloud (public, community and private) through a thorough evaluation of the System and Data classification for the exchange on the cloud, determine the level of risk the stakeholder will <u>tolerate and that the Contractor will manage</u>, <u>defining an</u> appropriate managed services model that will support the implementation of multi-zone architecture and a secure infrastructure on the cloud.
6.7.2-44 (modified)	The Contractor shall provide a CalHEERS Security and Privacy Framework that must implement a data encryption mechanism for all Equipment, workstations and laptops that process and/or store PHI or PII shall be encrypted using FIPS 140-2 validated Software. The encryption solution shall be full-disk unless otherwise approved by the ISO.
6.7.2-45 (modified)	The Contractor shall provide a CalHEERS Security and Privacy Framework with a data encryption mechanism for all electronic files that contain PHI or PII data shall be encrypted using FIPS 140-2 validated Software when stored on any removable media or portable device (e.g., USB thumb drives, mobile phone, floppies, CD/DVD, Blackberry, backup tapes).
6.7.2-46 (existing)	The Contractor shall provide a CalHEERS Security and Privacy Framework that provides a data encryption mechanism for all transmissions and data-links sending PHI or PII data between the System and the Database Management System shall be encrypted using FIPS 140-2 validated Software.
6.7.2-47 (existing)	The Contractor shall provide a CalHEERS Security and Privacy Framework that uses the Public Key Infrastructure (PKI) that follows standard practices such as the use of accepted Certification Authorities, documented Certificate Policies, and Certificate Practice Statements which will include key escrow strategy. Implementation shall use fundamental technical standards such as X.509 certificate format and Public Cryptographic Standards. The PKI used across entities shall address interoperability requirements.
6.7.2-48 (existing)	The Contractor shall provide a CalHEERS Security and Privacy Framework that includes but is not limited to the following information to minimize loss and facilitate effective technology recovery: 1. Systems shall be "fail-safe" to ensure that the System in failed state doesn't reveal any Sensitive Information or leave any access controls open for attack. 2. Fully redundant network and Equipment components 3. Use offsite storage in the event of physical disaster 4. Build in contingencies for the storage of transactions where there is dependency on availability of data from business partners that provide authoritative data (e.g., the IRS, DHS, and SSA). 5. Leverage virtualization to expedite technology recovery.

Req #	SOW Requirement
6.7.2-49 (modified)	The Contractor shall provide or maintain a CalHEERS Security and Privacy Framework that, at a minimum, must support the following baseline oversight activities: 1. CalHEERS Security and Privacy Framework, shall define and implement appropriate process, tools, and technologies to integrate compliance oversight activities with the Operations Governance extending to partners like Covered California, and DHCS. 2. Ensure risk management is performed in accordance with NIST SP 800-37 guidance. 3. Ensure secured coding practices are implemented in the SDLC best practices to avoid common Software weaknesses and vulnerabilities. 4. Ensure documentation of necessary and appropriate privacy artifacts. 5. Serve as approval authority for accreditation of Systems and interconnections. 6. Enforce ongoing monitoring and periodic compliance reporting and providing evidence on the compliance levels of security and privacy requirements, data exchange and usage agreements. 7. Conduct System assessment. As new versions of standards are available, adoption of the new standard will be considered through the change control process and approved by the State Project Director or designee.
6.7.2-50 (existing)	The CalHEERS Security and Privacy Framework shall adopt the following privacy principle in guidance with the Federal DHHS: 1. Individual Access 2. Correction 3. Openness and Transparency 4. Individual Choice 5. Collection 6. Use and Disclosure Limitation 7. Data Integrity 8. Accountability
6.7.2-51 (existing)	The Contractor shall provide a Business Capability Matrix and a transformation roadmap for each CalHEERS Business Process Model that describes the MITA Maturity Model.
6.7.2-52 (existing)	The CalHEERS shall have the ability to time-out users using the web portal after a period of inactivity. The period of time shall be defined by the State.
6.7.2-53 (existing)	The Contractor shall conduct monthly physical security audits of selected requirements to ensure HIPAA compliance.
6.7.2-54 (existing)	The Contractor shall ensure that the State's third-party auditors shall have security access at the Contractor's Project worksite as authorized in writing by the State.
6.7.2-55 (existing)	The Contractor shall conform to the Sponsors Security Policies, CalHEERS Policies , and other relevant OTSI policies to ensure adherence to all State security policies, standards, and guidelines.
6.7.2-56 (existing)	The Contractor shall provide administrative access to designated and approved CalHEERS stakeholders.
6.7.2-57 (existing)	The Contractor shall provide single sign-on access to the CalHEERS System and subprograms (e.g., BPM tools).
6.7.2-58 (existing)	The Contractor shall update, deliver, maintain, and execute processes and procedures for monitoring and reporting attempts at unauthorized access to the System and/or application, in accordance with the System Security Plan.
6.7.2-59 (existing)	The Data Use Agreement (DUA) shall be developed by the Contractor's business owner and project manager and initiated in the design phase, continued throughout the development phase and test phase, and completed in the implementation phase.
6.7.2-60 (existing)	The DUA will be a legal binding agreement between a federal agency and an external entity (e.g., Contractor, private industry, academic institution, other federal government agency, or State agency), when an external entity requests the use of personally identifiable data that is covered by the Privacy Act of 1974.

Req #	SOW Requirement
6.7.2-61 (existing)	The DUA shall delineate the confidentiality requirements of the Privacy Act, security safeguards, and the federal agency's data use policies and procedures.
6.7.2-62 (existing)	The DUA shall serve as both a means of informing data users of these requirements and a means of obtaining their agreement to abide by these requirements.
6.7.2-63 (existing)	The DUA shall serve as a control mechanism through which the federal agency can track the location of its data and the reason for the release of the data.
6.7.2-64 (existing)	The DUA shall document the requirement that a System of Record Notice be in effect, which allows for the disclosure of the data being used.
6.7.2-65 (modified)	All Contractor and Subcontractor networks used to access or transmit CalHEERS Data shall include Intrusion Detection Systems including inbound and outbound communications traffic as required in the current Acceptable Risk Controls for Affordable Care Act (ACA), Medicaid, and Partner Entities (ARC-AMPE) that provide alerts in the event of cyberattacks and attempts at unauthorized access, including but not limited to: 1. Unauthorized Network Intrusion 2. Unusual or unauthorized activities or conditions 3. Breach of Information, including ~~data~~Data, electronic devices, portable media and inadvertent transmission of confidential, sensitive or personal information
6.7.2-66 (new)	The Contractor shall collaborate with the State to develop and maintain any new Project Artifacts necessary to support this section. New artifacts shall be added to the Project Artifacts Repository and managed in accordance with the Project Artifact process.

6.7.2.2 System Security Briefing

Table 6-27: System Security Briefing

Req #	SOW Requirement
6.7.2-67 (modified)	The Contractor shall provide a System Security briefing (presentation) that includes, but is not limited to: 1. The current status of information security of the System. 2. New threats identified in the six (6) months prior. 3. Findings of the Contractor's Security and Confidentiality audits. 4. New information security-related laws, regulations or standards that shall accurately be met by the System. 5. Description of each information security incident that occurred in the prior six (6) months and what actions the Contractor has taken as a result of each incident.

6.7.2.3 Information Security Risk Assessment

The Information Security Risk Assessment is a key element of the overall CalHEERS enterprise security framework. The framework contains various security components that interact to achieve the core objectives of CalHEERS [security](#).

Table 6-28: Information Security Risk Assessment

Req #	SOW Requirement
6.7.2-68 (existing)	The Contractor shall accurately maintain an Information Security Risk Assessment Document that includes, but is not limited to: 1. Introduction 2. System Identification 3. Risks and Safeguards

6.7.2.4 Security Incident Report

The Security Incident Report is used to document any known, or suspected, lost or compromised Sensitive Information, as defined in the System Security Plan.

Table 6-29: Security Incident Report

Req #	SOW Requirement
6.7.2-69 (modified)	The Contractor shall provide a formal report to the State that describes the information security incident, the current status of the incident, and action taken within 24 hours of initial notification of an information security incident, including but not limited to: 1. What Data elements were involved, and the extent of the Data involved in the Breach; 2. A description of the unauthorized persons known or reasonably believed to have improperly used or disclosed Sensitive Information; 3. A description of where Sensitive Information is believed to have been improperly transmitted, sent, or used; 4. A description of the probable causes of the improper use or disclosure; and 5. Whether Civil Code Sections 1798.29 or 1798.82 or any other State or federal laws requiring individual notifications of Breaches are triggered.

6.7.2.5 Security Incident Reporting

Table 6-30: Security Incident Reporting

Req #	SOW Requirement
6.7.2-70	Intentionally Left Blank
6.7.2-71 (existing)	The Contractor shall immediately report to the State any and all unauthorized disclosures or uses of the State's Confidential Information of which it or its Staff is aware or has knowledge.
6.7.2-72 (existing)	The Contractor acknowledges that any publication or disclosure of the State's Confidential Information to others may cause immediate and irreparable harm to the State.
6.7.2-73 (existing)	If Contractor publishes or discloses such Confidential Information to others without authorization, the State shall immediately be entitled to injunctive relief or any other remedies to which it is entitled under law or equity without requiring a cure period.
6.7.2-74 (existing)	The State will immediately report to the Contractor any and all unauthorized disclosures or uses of Contractor's Confidential Information of which the State is aware or has knowledge.
6.7.2-75 (existing)	The State acknowledges that any publication or disclosure of the Contractor's Confidential Information to others may cause immediate and irreparable harm to the Contractor.
6.7.2-76 (existing)	If the State publishes or discloses such Confidential Information to others without authorization, the Contractor shall immediately be entitled to injunctive relief or any other remedies to which it is entitled under law or equity without requiring a cure period.
6.7.2-77 (existing)	The Contractor shall comply with State of California-required actions in response to a Breach that includes, but is not limited to: 1. Reporting timeframes 2. Reporting party 3. Research and investigation activities 4. Mitigation of the circumstances that resulted in the Breach

6.7.3 Safeguard Security Report

Table 6-31: Safeguard Security Report (CD-6.7-2)

Req #	SOW Requirement
6.7.3-01 (new)	The Contractor shall adopt, enhance, deliver, and maintain the CD-6.7-2 – Safeguard Security Report, which includes but is not limited to: 1. INTRODUCTION 1.1 Purpose 1.2 List of Reference Documents and Standards 1.3 Audience 2. SUMMARY 3. APPROACH 3.1 Backup Management 4. ASSUMPTIONS, CONSTRAINTS, AND RISKS 4.1 Assumptions 4.2 Constraints 4.3 Risks 5. REQUIREMENTS 6. ROLES AND RESPONSIBILITIES 7. XXX 8. GLOSSARY AND ACRONYMS 18.1 New Acronyms and Terms APPENDIX 1: SOW TO DELIVERABLE TRACEABILITY CHECKLIST APPENDIX 2: DELIVERABLE COMPLIANCE AND VALIDATION CHECKLIST APPENDIX 3: ASSOCIATED ARTIFACTS
6.7.3-02 (new)	The Contractor shall only alter or modify this Deliverable's structure or content with the approval of the State Project Director or designee.
6.7.3-03 (new)	The Contractor shall adopt and maintain all Project Artifacts that are associated with this Deliverable in the Project Artifact Inventory and manage them in accordance with the Project Artifact process.
6.7.3-04 (new)	The Contractor shall update the following appendices and attach them to the Data Retention, Backup and Recovery Plan: Appendix 1–SOW to Deliverable Traceability Checklist Description: A table where the Contractor identifies the SOW requirements for this Deliverable, as specified within SOW Section 8, DELIVERABLES, and includes but is not limited to: 1. SOW Requirement ID # 2. SOW Requirement Text 3. Requirement Traceability (Contractor identified traceability from the requirements to the Deliverable) 4. Requirement Fulfillment (Define how the Contractor has fulfilled the SOW requirements in the Deliverable) Appendix 2–Deliverable Compliance and Validation Checklist Description: A QA Checklist that includes, but is not limited to: 1. Deliverable Section Number and Title 2. Deliverable Requirement Statement(s) 3. Requirement Completion (How the Contractor has complied with or will comply with the requirement statements within the Deliverable) 4. Validation Method (The method the Contractor used to validate Deliverable compliance) 5. The Contractor's QA Manager sign-off on compliance

Req #	SOW Requirement
	Appendix 3—Associated Artifacts Description: An extract from the Project Artifact Inventory List of artifacts associated with this Deliverable, and will include but is not limited to the following examples: 1. Artifact Name 2. Associated Parent DEL 3. State Approver 4. SI Point of Contact 5. Review Frequency 6. Submission Frequency 7. Artifact File Format 8. Artifact Location (e.g., SharePoint breadcrumb) 9. Link to artifact

6.7.3.1 Safeguard Security Report Execution

Table 6-32: System Security Report Execution

Req #	SOW Requirement
6.7.3-05 (new)	The Contractor shall staff, manage, lead, and execute all System Security activities on CalHEERS as defined in the Statement of Work and in accordance with the CD-6.7-2 – Safeguard Security Report.
6.7.3-06 (new)	The Contractor shall collaborate with the State to develop and maintain the Safeguard Security Report in compliance with IRS Publication 1075 Safeguard Security Report.
6.7.3-07 (existing)	The Contractor shall support, review and respond to findings based on the IRS Publication 1075 Requirements. -These activities will include, at a minimum: 1. Response to Safeguard Review findings 2. Corrective Action Plan 3. 45 Day Notification of New Subcontractor handling of FTI

6.8 DATA RETENTION, BACKUP AND RECOVERY

The Contractor is responsible for developing, maintaining, and executing CalHEERS data retention, archive, and purge activities, as outlined in the Operations Plan and Capacity Management Plan, that ensure that these activities meet CalHEERS business and technical requirements, and the CalHEERS service level needs.

Additionally, the Contractor is responsible for executing backup and recovery activities, as described in the Operations Plan, that meet CalHEERS business and technical requirements, and CalHEERS service level needs. CalHEERS data files are to be backed up on a regular schedule. At a minimum, noncritical files are to be recoverable to the end of the prior Day. Critical files are journalized to allow restoration up to the last committed transaction. All System maintained files are backed up in such a manner that allows for recovery to the end of the prior Day.

6.8.1 Data Retention, Backup and Recovery Plan

Table 6-33: Data Retention, Backup and Recovery Plan (CD-6.8-1)

Req #	SOW Requirement
6.8.1-01 (new)	The Contractor shall adopt, enhance, deliver, and maintain the CD-6.8-1 - Data Retention, Backup and Recovery Plan, which includes but is not limited to: 1. INTRODUCTION 1.1 Purpose 1.2 List of Reference Documents and Standards 1.3 Audience 2. SUMMARY 3. APPROACH 3.1 Backup Management 4. ASSUMPTIONS, CONSTRAINTS, AND RISKS 4.1 Assumptions 4.2 Constraints 4.3 Risks 5. REQUIREMENTS 6. ROLES AND RESPONSIBILITIES 7. BACKUP AND RECOVERY PLAN 7.1 Production PostgreSQL Database 7.1.1 Automated Backups 7.1.2 Weekly DB Snapshot Backups 7.1.3 Cross Region Backups 7.1.4 Restore Management 7.2 Microsoft SQL Server Databases (ABE) 7.2.1 Backup Management 7.2.2 Restore Management 8. DATA WAREHOUSE (SNOWFLAKE) 9. TAPE BACKUPS AND RESTORATION 10. DATA RETENTION AND ARCHIVAL 11. DATA MANAGEMENT STRATEGY 11.1 Data Governance 11.1.1 Data Standards 11.1.2 Information Exchange Standards 11.1.3 Physical Data Design Standards 11.1.4 Data Management Standards for Security and Privacy 11.1.5 Data Governance Roles 11.1.6 Data Governance Processes 11.1.7 Data Governance Tools 11.2 Data Architecture 11.2.1 Data Movement 11.2.2 Storage Architecture 11.2.3 Master Data Management 11.2.4 Data Sharing Architecture 12. GLOSSARY AND ACRONYMS 12.1 New Acronyms and Terms APPENDIX 1: SOW TO DELIVERABLE TRACEABILITY CHECKLIST APPENDIX 2: DELIVERABLE COMPLIANCE AND VALIDATION CHECKLIST APPENDIX 3: ASSOCIATED ARTIFACTS APPENDIX 4: CALHEERS DATA RETENTION POLICY INPUTS
6.8.1-02 (new)	The Contractor shall only alter or modify this Deliverable's structure or content with the approval of the State Project Director or designee.

Req #	SOW Requirement
6.8.1-03 (existing)	The Contractor shall adopt, enhance, and maintain within the Operations Manual, an approach to backup and restoration of System Data and source code.
6.8.1-04 (modified)	The Contractor shall provide and/or maintain a System Backup and Restoration Plan that includes, but is not limited to: 1. Approach for System Backup and Restoration, and managing Data during and after Project execution 2. Contractor, State Project staff and State roles and responsibilities 3. Processes and procedures 4. Data archiving plan 5. Data retention plan
6.8.1-05 (existing)	The Contractor shall adopt, enhance and maintain documentation in the electronic library through the end of the term of the Contract.
6.8.1-06 (existing)	The Contractor shall define, document and implement process tools and technologies for a comprehensive Data Management Strategy that include but are not limited to the following topics: 1. Data Governance 2. Data Architecture 3. Storage Architecture 4. Master Data Management 5. Data Sharing Architecture 6. Data Warehouse and Business Intelligence
6.8.1-07 (existing)	The Contractor shall provide a CalHEERS Conceptual Data Model that is designed, built, and maintained in compliance with NIEM and HL7 reference models.
6.8.1-08 (new)	The Contractor shall update the CD-6.8-1 - Data Retention, Backup and Recovery Plan Deliverable with the following additional content pertaining to data retention: 1. Subsections documenting Contractor processes for facilitating: a. An annual collaborative review of any inputs that may change the CalHEERS data retention policy. b. Ad Hoc collaborative reviews of changes to the CalHEERS data retention policy, upon the State's request. c. The methodology and tools used in the identification of data to be purged based on the CalHEERS Data Retention Policy. 2. A new appendix identifying specific data elements/groups in the queue for a scheduled purge (based on the policy) and/or changes needed to the current or future data retention purge schedule. 3. A new appendix that documents all the applicable inputs to the CalHEERS Data Retention policy (e.g., OTSI Data Retention Policy, Inter Agency Agreements, etc.).
6.8.1-09 (existing)	The Contractor shall document the CalHEERS Technical Capability Matrix to various MITA 3. Maturity Levels (MITA Maturity Model, MMM).
6.8.1-10 (new)	The State identifies and associates the following artifacts to the Data Retention, Backup and Recovery Plan. The Contractor shall adopt, update, maintain, and deliver these artifacts in accordance with Appendix 3 of this Deliverable including, but not limited to: • 1Deloitte-CalHEERS Tape RaaS Solution Design • 2Deloitte-CalHEERS Tape RaaS Procurement and Build • 3 Tape Restore-as-a-Service Test Plan • 4Tape_Verification_Report • 5TRaaS Operational Runbook • 6NTT MS Patching Framework • 7Calheers Oracle 12c Documentation • AWS Aurora Backup and Recovery

Req #	SOW Requirement
	• CalHEERS Annual DR Test 2022_Timeline_Plan • CalHEERS Annual TRP Test 2024_Draft Plan • CalHEERS Overall Application Recovery Plan • DR Activity Capture Book • dr exercise rds screen shots • DR Simulation Test Report • dr-bcp-summary-salesforce-services • dr-testing-site-switching-summary • New Lambda Script_Prod2_HA_Validation_Screenshots • switcover_Version • UAT - DR_Testing
6.8.1-11 (new)	The Contractor shall adopt and maintain all Project Artifacts that are associated with this Deliverable in the Project Artifact Inventory and manage them in accordance with the Project Artifact process.
6.8.1-12 (new)	The Contractor shall update the following appendices and attach them to the Data Retention, Backup and Recovery Plan: Appendix 1—SOW to Deliverable Traceability Checklist Description: A table where the Contractor identifies the SOW requirements for this Deliverable, as specified within SOW Section 8, DELIVERABLES, and includes but is not limited to: 1. SOW Requirement ID # 2. SOW Requirement Text 3. Requirement Traceability (Contractor identified traceability from the requirements to the Deliverable) 4. Requirement Fulfillment (Define how the Contractor has fulfilled the SOW requirements in the Deliverable) Appendix 2—Deliverable Compliance and Validation Checklist Description: A QA Checklist that includes, but is not limited to: 1. Deliverable Section Number and Title 2. Deliverable Requirement Statement(s) 3. Requirement Completion (How the Contractor has complied with or will comply with the requirement statements within the Deliverable) 4. Validation Method (The method the Contractor used to validate Deliverable compliance) 5. The Contractor's QA Manager sign-off on compliance Appendix 3—Associated Artifacts Description: An extract from the Project Artifact Inventory List of artifacts associated with this Deliverable, and will include but is not limited to the following examples: 1. Artifact Name 2. Associated Parent DEL 3. State Approver 4. SI Point of Contact 5. Review Frequency 6. Submission Frequency 7. Artifact File Format 8. Artifact Location (e.g., SharePoint breadcrumb) 9. Link to artifact

6.8.2 Data Retention, Backup and Recovery Execution

Table 6-34: Data Retention, Backup and Recovery Execution

Req #	SOW Requirement
6.8.2-01 (new)	The Contractor shall staff, manage, lead and execute all Data Retention, Backup and Recovery activities on CalHEERS as defined in this Statement of Work and in accordance with the CD-6.8-1 – Data Retention, Backup and Recovery Plan.
6.8.2-02 (new)	The Contractor shall execute the annual and ad hoc collaborative reviews of the inputs that could change the CalHEERS data retention policy, and how the data retention policy is implemented .
6.8.2-03 (existing)	The CalHEERS System shall have the ability to backup, recover, restart, and cancel jobs.
6.8.2-04 (existing)	The Contractor shall restore Data from backup media within 24 hours or sooner if requested by State Project Director or designee.
6.8.2-05 (modified)	The Contractor shall encrypt the backup Data.
6.8.2-06 (modified)	The Contractor shall provide secure storage and transportation of the backup Data .
6.8.2-07 (existing)	The Contractor shall verify and validate that the moveable backup media are functional by testing the backup and restoration processes on a quarterly basis.
6.8.2-08 (modified)	In the event of a System outage , the Contractor shall recover all databases and transactions to the last fully processed transaction as they were before the loss of the System(s).
6.8.2-09 (modified)	In the event of a System outage and Data recovery , the Contractor shall support the State with validating the transactions.
6.8.2-10 (existing)	The Contractor shall ensure the Restoration of Databases must automatically process all possible transactions completed prior to the loss of the System.
6.8.2-11 (existing)	The Contractor shall ensure that all Backup Operations support the critical and essential business function identified by the State and shall allow for noncritical functions to be postponed or rescheduled.
6.8.2-12 (existing)	The Contractor shall ensure the System shall provide for all Databases to be completely restored as they were before the loss of the System.
6.8.2-13 (existing)	The Contractor shall be responsible for all System backups and restoration processes.
6.8.2-14 (existing)	The Contractor shall perform backups of the System without impacting the System Production environment's performance and/or availability.
6.8.2-15 (existing)	The Contractor shall utilize automated backup and restoration processes that require minimal human intervention.
6.8.2-16 (existing)	The Contractor shall deploy a secure backup and restoration solution to prevent unauthorized access to System data.
6.8.2-17 (modified)	The Contractor shall provide a backup Availability Zone that replicates the primary Availability Zone via continuous configuration management.
6.8.2-18 (modified)	The Contractor shall retain and manage complete copies of System software backups of the two most recent major versions at the backup Availability Zone.
6.8.2-19 (modified)	The Contractor shall develop and maintain a business resumption plan for recovering from a service outage at the primary Availability Zone and/or backup Availability Zone.
6.8.2-20 (modified)	The Contractor shall configure all network services to automatically failover to backup network service locations when an outage occurs.
6.8.2-21 (modified)	In accordance with the Data Retention, Backup and Recovery Plan , the Contractor shall keep current the System documentation, user documentation, and all program libraries related to technology recovery/business continuity planning and execution.
6.8.2-22 (modified)	The Contractor shall agree and adhere to the conditions of all applicable State and federal regulations which are incorporated herein by this reference, regarding retention and access requirements relating to all financial and programmatic records supporting documents, statistical records, and other records of this Contract.

Req #	SOW Requirement
6.8.2-23	<u>Intentionally Left Blank</u>
6.8.2-24	<u>Intentionally Left Blank</u>
6.8.2-25 (existing)	The Contractor shall keep all Records involving matters in litigation related to this Contract shall be kept for one (1) year following the resolution of any litigation, claim, financial management review or audit, including all appeals if the litigation has not terminated within ten (10) years from date of expiration of this Contract.
6.8.2-26 (existing)	The Contractor shall keep Records required to be maintained under HIPAA for ten (10) years from the date of creation or date when the action, activity or designation documented in the record was last in effect, whichever is later. All such records shall be subject at reasonable times and upon prior Notice to examination, inspection, copying, or audit by personnel so authorized by the State Project Director, or designee, and/or state and federal officials so authorized by law, rule regulation or Contract, when applicable.
6.8.2-27 (existing)	During the term of this Contract, access to these items will be provided within Sacramento County, California at all applicable State Project facility(ies).
6.8.2-28 (modified)	During the four (4) year period, after the final payment under the Contract or, after such four (4) year period, one (1) year following the resolution of any litigation, claim, financial management review or audit, delivery of and access to view these items at a site in Sacramento, California will be at no cost to the State.
6.8.2-29 (existing)	The Contractor shall be responsible for any audit exceptions or disallowed costs incurred by the Contractor or any of its Subcontractors, subject to the State's or the federal government's review and approval of such audit finding or exceptions, as applicable, and the Contractor's right to pursue the dispute resolution process in this Contract.
6.8.2-30 (existing)	The records retention and review requirements of this section shall be included by the Contractor in any of its subcontracts with Subcontractors.
6.8.2-31 (existing)	The State's personnel shall be accompanied by the Contractor's personnel at all times during any examination, inspection, review or audit.
6.8.2-32 (modified)	The Contractor shall <u>provide audit services and other support</u> in connection with an audit <u>at no additional cost to</u> the State.
6.8.2-33 (modified)	<u>The Contractor shall provide, upon the State's request, a copy of those nonconfidential portions of Contractor's and its Subcontractor's internal audit reports relating to the Services provided to the State under this Contract.</u>
6.8.2-34 (modified)	<u>In the event of a System outage and Data recovery,</u> the Contractor shall identify in process and last fully processed transactions and make the data available to designated State staff, who will validate the transactions.
6.8.2-35 (existing)	The Contractor shall maintain records and supporting documentation under audit or involved in litigation for a period of three (3) years, or as directed the State following the conclusion of the litigation or audit and the date that the State submits the last expenditure report to the Federal DHHS. The Contractor shall verify this period with the State prior to storing any Confidential Information.
6.8.2-36 (modified)	<u>When proposing a Data Retention, Backup and Recovery solution,</u> the Contractor shall <u>comply</u> with hosting and Data Center architecture requirements, standards, federal, <u>and</u> State regulations.
6.8.2-37 (existing)	The Contractor shall provide consultation and technical assistance on data analysis and methodology.
6.8.2-38 (existing)	The Contractor shall store all Data files that are transitioned to the Contractor. These files shall be stored in the back-end once the Data has been converted.
6.8.2-39 (existing)	The Contractor shall accurately retain backup copies in writing and on electronic media of all Deliverables until 180 days after termination or expiration of this Contract and shall accurately provide the State on its request with a copy thereof until that time.
6.8.2-40 (new)	The Contractor shall collaborate with the State to develop and maintain any new Project Artifacts necessary to support this section. New artifacts shall be added to the Project Artifacts Repository and managed in accordance with the Project Artifact process.

6.9 DATA MANAGEMENT

The Contractor is responsible for the maintenance and assurance of the accuracy and consistency of the data over its entire life cycle. The Contractor will be updating the Data Integrity Plan to become a Data Management Plan in support of the broadening of associated solutions and services.

6.9.1 Data Integrity Plan [to be retitled as the Data Management Plan]

Table 6-35: Data Integrity Plan (CD-6.9-1) [to be retitled as the Data Management Plan]

Req #	SOW Requirement
6.9.1-01 (modified)	The Contractor shall adopt, enhance, deliver, and maintain the CD-6.9-1 - Data Integrity Plan (Data Management Plan), which includes but is not limited to: 1. INTRODUCTION 1.1 Purpose 1.2 List of Reference Documents 1.3 Audience 1.4 Deliverable Hierarchy 2. SUMMARY 2.1 Scope 3. APPROACH 4. ASSUMPTIONS, CONSTRAINTS AND RISKS 4.1 Assumptions 4.2 Constraints 4.3 Risks 5. REQUIREMENTS 6. ROLES AND RESPONSIBILITIES 7. FUNCTIONAL DATA INTEGRITY 7.1 PCAP Data Integrity Report 7.2 Data Warehouse 7.3 Enroller Portal 7.4 FPACT 8. DATABASE INTEGRITY 8.1 Data Governance 8.2 Data Architecture 8.3 Data Sharing Architecture 8.4 Data Backup and Recovery 9. DATA SECURITY AND CONTROLS 10. GLOSSARY AND ACRONYMS 10.1 New Acronyms and Terms APPENDIX 1: SOW TO DELIVERABLE TRACEABILITY CHECKLIST APPENDIX 2: DELIVERABLE COMPLIANCE AND VALIDATION CHECKLIST APPENDIX 3: ASSOCIATED ARTIFACTS
6.9.1-02 (new)	The Contractor shall only alter or modify this Deliverable's structure or content with the approval of the State Project Director or designee.

Req #	SOW Requirement
6.9.1-03 (new)	The Contractor shall update the CD-6.9-1 - Data Integrity Plan, retitling it the Data Management Plan, developing a DED for the updates per SOW Section 8.2.1 - DELIVERABLE EXPECTATION DOCUMENT (DED), and adding the State desired content necessary to define how CalHEERS' Data is collected, stored, maintained, and is used. Updates should include Data Architecture Diagrams, as wells as subsections and topics including but not limited to: • Data Governance - o Roles, responsibilities, and policies. • Data and analytics lifecycle management - o Strategic evolution of the data and analytics program - o Evolution of the data platform - o Ad-hoc requests and analyses • Data collection and ingestion - o Alignment with source system changes through ongoing CR processes - o Sources, formats, and validation • Data storage and security - o Encryption - o Backup, archiving, retention periods, disposal - o Data usage constraints • Data quality, integrity and validation - o Extract, Transform & Load (ETL) Process and error handling • Data reporting and usage - o Tools and analytics frameworks • Metadata Management - o Cataloging and data lineage • Access control - o Role based access and permissions • Audit trails - o Monitoring of data modification • Validation Processes - o Ensuring Data accuracy and completeness • Error prevention, detection & correction • Change management and version control • Compliance & regulatory standard adherence
6.9.1-04 (new)	The Contractor shall collaborate with the State to align, integrate, and reference applicable guidance into the Data Management Plan from the following strategy documents: • CalHHS IT and Data Strategic Plan (latest version) • Covered California Strategic Plan & Data Strategy (latest versions) • DHCS Strategic Plan & Data Strategy (latest versions)
6.9.1-05 (new)	The State identifies and associates the following artifacts to the Data Integrity Plan (Data Management Plan). The Contractor shall adopt, update, maintain, and deliver these artifacts in accordance with Appendix 3 of this deliverable including, but not limited to: • AWS Aurora Backup and Recovery • Asset Management Tool Upgrade Maintenance Plan • Oracle FDW Setup between Postgres DB to Oracle DB
6.9.1-06 (new)	The Contractor shall update the CD-6.9-1 - Data Integrity Plan (Data Management Plan), with a new section that describes the Contractor's processes for ensuring Data Quality in reporting data, applicable to both core reporting and reporting related to systems like Google Analytics, including, but not limited to: • Data validation and cleansing • ETL • Monitoring & auditing • Data Governance

Req #	SOW Requirement
6.9.1-07 (new)	The State identifies and associates the following artifacts to the Data Integrity Plan. The Contractor shall adopt, update, maintain, and deliver these artifacts in accordance with Appendix 3 of this deliverable including, but not limited to: • Data Integrity Report
6.9.1-08 (new)	The Contractor shall update the following appendices and attach them to the Data Integrity Plan (Data Management Plan): Appendix 1—SOW to Deliverable Traceability Checklist Description: A table where the Contractor identifies the SOW requirements for this Deliverable, as specified within SOW Section 8, DELIVERABLES, and includes but is not limited to: 1. SOW Requirement ID # 2. SOW Requirement Text 3. Requirement Traceability (Contractor identified traceability from the requirements to the Deliverable) 4. Requirement Fulfillment (Define how the Contractor has fulfilled the SOW requirements in the Deliverable) Appendix 2—Deliverable Compliance and Validation Checklist Description: A QA Checklist that includes, but is not limited to: 1. Deliverable Section Number and Title 2. Deliverable Requirement Statement(s) 3. Requirement Completion (How the Contractor has complied with or will comply with the requirement statements within the Deliverable) 4. Validation Method (The method the Contractor used to validate Deliverable compliance) 5. The Contractor's QA Manager sign-off on compliance Appendix 3—Associated Artifacts Description: An extract from the Project Artifact Inventory List of artifacts associated with this Deliverable, and will include but is not limited to the following examples: 1. Artifact Name 2. Associated Parent DEL 3. State Approver 4. SI Point of Contact 5. Review Frequency 6. Submission Frequency 7. Artifact File Format 8. Artifact Location (e.g., SharePoint breadcrumb) 9. Link to artifact

6.9.2 Data Management Execution

Table 6-36: Data Management Execution

Req #	SOW Requirement
6.9.2-01 (new)	The Contractor shall staff, manage, lead and execute all Data Management activities on CalHEERS as defined in this Statement of Work and in accordance with the CD-6.9-1 – Data Integrity Plan (Data Management Plan).
6.9.2-02 (existing)	The System shall ensure data management and consistency through the life of the CalHEERS Data.
6.9.2-03 (existing)	The Contractor shall check critical databases and files for corruption and data integrity prior to backup.

Req #	SOW Requirement
6.9.2-04 (existing)	The System shall provide data retrieval tools enabling authorized users to retrieve archived records from the archive database and restore them to the database while preserving data integrity across the System's relational databases.
6.9.2-05 (existing)	The Contract shall conduct data processing audits to examine the controls within the CalHEERS IT infrastructure, via collection and evaluation of the systems, practices, and operations in place to properly safeguard assets, maintain data integrity, and operate effectively and efficiently.
6.9.2-06 (modified)	The Contractor shall ensure data integrity of the <u>Database Management System (DBMS)</u> , including, but not limited to, the use of appropriate integrity constraints for entity integrity, domain integrity, and referential integrity.
6.9.2-07 (new)	The Contractor shall develop and maintain detailed Data Governance Diagrams and related documentation for all of CalHEERS, identifying the transmission, sharing, or use of data between two or more agencies. These diagrams must clearly depict the following, but not limited to: • Data flow paths • Data ownership delineation • Data security responsibilities • Data classification (e.g., public, confidential, sensitive) • Data usage and storage locations • Data access permissions and controls
6.9.2-08 (new)	All Data Governance Diagrams and practices must comply with the latest State-mandated information security policies, federal data protection laws, and relevant industry best practices (e.g., NIST Cybersecurity Framework, ISO 27001).
6.9.2-09 (new)	Prior to any the implementation of inter-agency data exchanges, the Contractor shall submit all Data Governance Diagrams, and associated documentation, to the State Technical, Contracts, and Information Security teams for review and written approval. No inter-agency Data transmission may occur without formal State approval.
6.9.2-10 (new)	The Contractor shall collaborate with the State to develop and maintain any new Project Artifacts necessary to support this section. New artifacts shall be added to the Project Artifacts Repository and managed in accordance with the Project Artifact process.

6.10 TECHNOLOGY RECOVERY

The Contractor is responsible for developing, maintaining, and executing a Technology Recovery Plan (TRP) that meets CalHEERS technical requirements, business continuity and service level needs. Technology Recovery is required when there is a loss of an enterprise processing facility, (e.g., loss of the System function due to a major catastrophe such as fire, earthquake, explosion, or flood). Successful recovery requires that the System and application are available and that the users can perform the same business activities as before the disaster. Technology Recovery activities shall be maintained and executed in accordance with SIMM 5325-A, Technology Recovery Plan Instructions. As new versions of standards are available, adoption of the new standard will be considered through the change control process and approved by the State Project Director or designee.

6.10.1 Technology Recovery Plan

The Technology Recovery Plan (TRP) documents how, in the event significant loss of the enterprise environment, the operational System functions can be successfully recovered. Successful recovery assumes that the System is available and that end users can perform the same business activities as prior to the disaster.

A successful demonstration, as determined by the State, shall be considered a key decision criteria factor for Implementation/Go-Live. Failure to successfully demonstrate the procedures

may be considered grounds for termination of this Contract. The State reserves the right to waive or defer part or all of the demonstrations.

Table 6-37: Technology Recovery Plan (CD-6.10-1)

Req #	SOW Requirement
6.10.1-01 (modified)	The Contractor shall adopt, enhance, deliver, and maintain the CD-6.10-1 - Technology Recovery Plan, which includes but is not limited to: 1. INTRODUCTION 1.1 Purpose 1.2 List of Reference Documents 1.3 Audience 2. SUMMARY 2.1 Scope 3. APPROACH 4. ASSUMPTIONS, CONSTRAINTS, AND RISKS 4.1 Assumptions 4.2 Constraints 4.3 Risks 5. REQUIREMENTS 6. ROLES AND RESPONSIBILITIES 6.1 Roles and Responsibilities 6.2 Recovery Team Roles and Responsibilities 7. SYSTEMS MANAGEMENT 7.1 Network 7.2 Server 7.3 Backup and Restore 7.4 Data and Database 8. TECHNOLOGY RECOVERY PLAN 8.1 Notification Phase 8.1.1 Identification 8.1.2 Notification 8.1.3 Disaster Declaration 8.1.4 Declared Disaster 8.2 Activation Phase 8.3 Build Verification 8.3.1 Infrastructure Recovery Priority Sequencing 8.3.2 Infrastructure and Application/Tool Ranking 8.4 Functional Test 8.5 Turnover 8.5.1 Return to the Primary Availability Zone 8.6 Hosting Site Review Procedures 9. DAMAGE ASSESSMENT REPORT 9.1 Post Disaster Review 10. DATA RESTORATION/ASSESSMENT PLAN 11. MAINTAINING THE TECHNOLOGY RECOVERY PLAN 11.1 Yearly Updates 11.2 On Going Maintenance 11.3 Testing TRP - Exercise 12. GLOSSARY AND ACRONYMS 12.1 New Acronyms and Terms 13. APPENDICES 13.1 Appendix 6.11-1.1: SOW to Deliverable Traceability Checklist 13.2 Appendix 6.11-1.2: Disaster Recovery Contact List 13.3 Appendix 6.11-1.3: Associated Artifacts 13.4 Appendix 6.11-1.4: CMT Checklist

Req #	SOW Requirement
	13.5 Appendix 6.11-1.5: CMT Call Tree 13.6 Appendix 6.11-1.6: Initial Damage Assessment Checklist 13.7 Appendix 6.11-1.7: Damage Assessment Form 13.8 Appendix 6.11-1.8: Overall Application Recovery Plan 13.9 Appendix 6.11-1.9: Technology Recovery Exercise Packet 13.10 Appendix 6.11-1.10: Deliverable and IEEE Reference Standards 13.11 Appendix 6.11-1.11: CalHEERS AWS Architecture Diagram APPENDIX 1: SOW TO DELIVERABLE TRACEABILITY CHECKLIST APPENDIX 2: DELIVERABLE COMPLIANCE AND VALIDATION CHECKLIST APPENDIX 3: ASSOCIATED ARTIFACTS
6.10.1-02 (new)	The Contractor shall only alter or modify this Deliverable's structure or content with the approval of the State Project Director or designee.
6.10.1-03 (modified)	The Contractor shall successfully recover, also documenting within the TRP the details on how this is to be tested and accomplished, upon complete or significant loss of the enterprise environment, the critical operational application functions to the end of business on the prior Business Day within four (4) calendar days, and noncritical application functions within six (6) calendar days, of a disaster.
6.10.1-04 (existing)	The Contractor shall provide a TRP or a reasonable summary thereof to enable the State to verify the sufficiency of such Plan and shall be made available to the State for review upon the State's request.
6.10.1-05 (modified)	The Contractor shall prepare the Technology Recovery Plan Results Deliverable in accordance with ISO/IEC/IEEE 15289 – Systems and software engineering – Content of life cycle information items (documentation), second edition (10.69 - Service continuity and availability plan) pertaining to Technology Recovery Planning and Testing. As new versions of standards are available, adoption of the new standard will be considered through the change control process and approved by the State Project Director or designee.
6.10.1-06 (new)	The State is consolidating a number of Deliverable(s) under the Technology Recovery Plan and reclassifying them as <u>artifacts</u>. The Contractor shall adopt, update, maintain, and deliver these artifact(s) in association with this Deliverable, as defined in Appendix 3. The artifacts will be submitted in the following format at the request and frequency indicated by the State: • Damage Assessment Report • Technology Recovery Plan Results • Adding comp and env in LaunchPad • Adding Deleting Recipients in Outage email • Batch Modernization Roadmap • Batch_Categorization • Bi Annual Password Change Activity • Build and deployment Lifecycle • CalHEERS OSS Sustaining Existing Platform SOP • CalHEERS OSS Sustaining Existing Platform SOP (DLT rev IVV Cmts) • component vs domain deployment • components vs prod servers • Create and delete label in LP • Damage Assessment Report • Data Refresh in Non Prod Environments • DATA RESTORATION/ASSESSMENT PLAN • Deployment to non-prod environment • Deployment to prod environment • Deployment-step-config in LP • Disaster Recovery Contact List • Enroller Portal SF environment details

Req #	SOW Requirement
	• How To create a Branch in Gitlab • How to create a merge request • How To create a Tag • How to Set up MINGW64 (Git bash) and Generate an SSH Key • LP components - Inventory - Updated • Reverting Deployment in Launchpad • Running Queries in EWM • SOP- Salesforce Env Process • Technology Recovery Plan Test Results • Tools Integration • Tools Restart • Updating the environment in Jenkins Build Validation job • Web hook configuration details • WebLogic_Patching_JanCPU
6.10.1-07 (new)	The Contractor shall adopt and maintain all Project Artifacts that are associated with this Deliverable in the Project Artifact Inventory and manage them in accordance with the Project Artifact process.
6.10.1-08 (new)	The Contractor shall develop the following appendices and attach them to the Technology Recovery Plan: Appendix 1—SOW to Deliverable Traceability Checklist Description: A table where the Contractor identifies the SOW requirements for this Deliverable, as specified within SOW Section 8, DELIVERABLES, and includes but is not limited to: 1. SOW Requirement ID # 2. SOW Requirement Text 3. Requirement Traceability (Contractor identified traceability from the requirements to the Deliverable) 4. Requirement Fulfillment (Define how the Contractor has fulfilled the SOW requirements in the Deliverable) Appendix 2—Deliverable Compliance and Validation Checklist Description: A QA Checklist that includes, but is not limited to: 1. Deliverable Section Number and Title 2. Deliverable Requirement Statement(s) 3. Requirement Completion (How the Contractor has complied with or will comply with the requirement statements within the Deliverable) 4. Validation Method (The method the Contractor used to validate Deliverable compliance) 5. The Contractor's QA Manager sign-off on compliance Appendix 3—Associated Artifacts Description: An extract from the Project Artifact Inventory List of artifacts associated with this Deliverable, and will include but is not limited to the following examples: 1. Artifact Name 2. Associated Parent DEL 3. State Approver 4. SI Point of Contact 5. Review Frequency 6. Submission Frequency 7. Artifact File Format 8. Artifact Location (e.g., SharePoint breadcrumb) 9. Link to artifact

6.10.2 Technology Recovery Execution

Table 6-38: Technology Recovery Execution

Req #	SOW Requirement
6.10.2-01 (new)	The Contractor shall staff, manage, lead, and execute all technology recovery activities on CalHEERS as defined in this Statement of Work and in accordance with the CD-6.10-1 – Technology Recovery Plan.
6.10.2-02 (modified)	At least annually or more frequently as may be conducted, the Contractor shall provide <u>a report</u> to the State <u>to include, but not be limited to:</u> 1. <u>With the details of the work performed in the review, including the Contractor's auditors' report or any other findings</u> applicable to the State's business; and ~~4.2.~~ <u>any other review conducted by a third party, including, without limitation, regulatory agencies, public or private certification entities such as the International Standards Organization, but excluding such reviews conducted by other customers of the Contractor.</u>
6.10.2-03 (new)	The Contractor shall include in the Technology Recovery Plan detailed steps to recover the entire CalHEERS System including interfaces to all external services ~~to a non-west coast cloud region.~~
6.10.2-04 (new)	The Contractor shall collaborate with the State to develop and maintain any new Project Artifacts necessary to support this section. New artifacts shall be added to the Project Artifacts Repository and managed in accordance with the Project Artifact process.
<u>6.10.2-05</u> (new)	<u>The Contractor shall design and maintain System architecture and Data protection mechanisms that ensure critical Data can be recovered to a point no greater than fifteen (15) minutes prior to any unplanned outage or System disruption. Backup and replication processes shall be sufficient to meet this recovery point and protect against data loss in accordance with State and federal security requirements.</u>
<u>6.10.2-06</u> (new)	<u>The Contractor shall ensure that critical System functionality can be restored and made operational within one (1) hour following an unplanned outage or declared disaster. The Contractor's disaster recovery and continuity plans shall demonstrate how System restoration within this timeframe will be achieved and verified through regular testing and documentation.</u>

6.10.3 Technology Recovery Plan Results

The Technology Recovery Plan Results documents the detailed results of the Technology Recovery Plan exercise.

Table 6-39: Technology Recovery Plan Results

Req #	SOW Requirement
6.10.3-01 (modified)	The Contractor shall adopt, enhance, deliver, and maintain a CalHEERS Technology Recovery Plan, which includes but is not limited to: 1. Executive Summary 2. Overview: 2.1 Simulation and Recovery Activities 2.2 TR Validation Activities 2.3 Switch Back Database to Primary Zone Activities 2.4 Goal and Objectives 2.5 Schedule 2.6 Outcome 2.7 Recovery Site Information 2.8 Risks, Issues and Concerns Prior to Exercise or Event 3. Action Items and Status 4. Goals and Objectives for the Next Technology Recovery Plan exercise 5. New Items included in current Technology Recovery Plan exercise

Req #	SOW Requirement
	6. New Items planned for the Next Technology Recovery Plan exercise 7. Technology Recovery Plan exercise procedures completion information 8. Risk Remediation and Mitigation 9. Lessons Learned 10. Glossary and Acronyms 10.1 New Acronyms and Terms

6.11 BUSINESS CONTINUITY

The Business Continuity Plan documents how, upon significant loss of the enterprise environment, the Contractor will support the CalHEERS Business Continuity activities. Successful recovery means that the System is available and that end users can perform the same business activities as prior to the disaster.

6.11.1 Business Continuity Plan

Table 6-40: Business Continuity Plan (CD-6.11-1)

Req #	SOW Requirement
6.11.1-01 (modified)	The Contractor shall adopt, enhance, deliver, maintain and execute the CD-6.11-1 - Business Continuity Plan, which includes but is not limited to: 1. INTRODUCTION 1.1 Purpose 1.2 List of Reference Documents 1.3 Audience 2. SUMMARY 2.1 Scope 3. APPROACH 4. ASSUMPTIONS, CONSTRAINTS, AND RISKS 4.1 Assumptions 4.2 Constraints 4.3 Risks 5. REQUIREMENTS 6. ROLES AND RESPONSIBILITIES 6.1 Roles and Responsibilities 6.1.1 Contractor Roles and Responsibilities 6.1.2 State Roles and Responsibilities 7. BUSINESS CONTINUITY PLAN AND SYSTEM RISK MANAGEMENT PLAN 7.1 Business Continuity Plan Phases and Activities 7.1.1 Initiation Phase 7.1.2 Notification Phase 7.1.3 Activation Phase 7.1.4 Return to Normal Operation 7.2 Assessment and Analysis 7.2.1 Risk Assessment 7.2.2 Business Impact Analysis 7.3 Business Continuity Plan Maintenance 8. GLOSSARY AND ACRONYMS 8.1 New Terms and Acronyms APPENDIX 1: SOW TO DELIVERABLE TRACEABILITY CHECKLIST APPENDIX 2: DELIVERABLE COMPLIANCE AND VALIDATION CHECKLIST APPENDIX 3: ASSOCIATED ARTIFACTS

Req #	SOW Requirement
	APPENDIX 4: STANDARDS MAPPING - ISO/IEC/IEEE 16085-2021 8.1-RISK MANAGEMENT PLAN
6.11.1-02 (new)	The Contractor shall only alter or modify this Deliverable's structure or content with the approval of the State Project Director or designee.
6.11.1-03 (<u>modified</u>)	The Contractor shall update the business continuity/technology recovery processes and procedures in the Operations Plan and present for review and Acceptance to the State Project Director or designee on annual basis.
6.11.1-04 (existing)	The Business Continuity Plan or a reasonable summary thereof to enable the State to verify the sufficiency of such Plan, will be made available to the State for review upon the State request. At least annually or more frequently as may be conducted, the Contractor shall provide to the State a copy: (i) to the extent they perform such review, the Contractor's auditors' report, or portions thereof applicable to the State's business; and (ii) any other review conducted by a third party, including, without limitation, regulatory agencies, public or private certification entities such as the International Standards Organization, but excluding such reviews conducted by other customers of the Contractor. The State acknowledges that such reports provided by Contractor under this Section shall be considered the Contractor's Confidential Information. Provided, however, the State may disclose such reports to the auditors and regulators having jurisdiction over the CalHEERS System.
6.11.1-05 (modified)	The Contractor shall include in the Business Continuity Plan a System Risk Management Plan. The System Risk Management Plan shall include, but not be limited to: 1. Risk analysis and risk mitigation for each core business process 2. Potential System failures for each core business process 3. Common-sense activities that reduce the risk of disruption to business unit operations, regardless of the likelihood of a disruptive event 4. Handling of critical business unit information (electronic or not) 5. Response team coordination 6. Integration with other continuity planning efforts
6.11.1-06 (existing)	The Contractor shall update the Risk Management Plan in accordance with current ISO/IEC 16085:2006, IEEE Std 16085-2006 – Systems and software engineering - Life Cycle Processes - Risk Management (Annex A-Risk Management Plan).
6.11.1-07 (new)	The State identifies and associates the following artifacts to the Business Continuity Plan. The Contractor shall adopt, update, maintain, and deliver these artifacts in accordance with Appendix 3 of this deliverable including, but not limited to: • CalHEERS Annual DR Test AI List • DR_UAT_Validations • DR activity 2024 - CloudOps Screenshots and Validations • DR_Activity_Network_Security • SysOps DR AZ validations • Update DW Configs to Use current end points
6.11.1-08 (new)	The Contractor shall adopt and maintain all Project Artifacts that are associated with this Deliverable in the Project Artifact Inventory and manage them in accordance with the Project Artifact process.
6.11.1-09 (new)	The Contractor shall update the following appendices and attach them to the Business Continuity Plan: Appendix 1–SOW to Deliverable Traceability Checklist Description: A table where the Contractor identifies the SOW requirements for this Deliverable, as specified within SOW Section 8, DELIVERABLES, and includes but is not limited to: 1. SOW Requirement ID # 2. SOW Requirement Text 3. Requirement Traceability (Contractor identified traceability from the requirements to the Deliverable)

Req #	SOW Requirement
	4. Requirement Fulfillment (Define how the Contractor has fulfilled the SOW requirements in the Deliverable) Appendix 2—Deliverable Compliance and Validation Checklist Description: A QA Checklist that includes, but is not limited to: 1. Deliverable Section Number and Title 2. Deliverable Requirement Statement(s) 3. Requirement Completion (How the Contractor has complied with or will comply with the requirement statements within the Deliverable) 4. Validation Method (The method the Contractor used to validate Deliverable compliance) 5. The Contractor's QA Manager sign-off on compliance Appendix 3—Associated Artifacts Description: An extract from the Project Artifact Inventory List of artifacts associated with this Deliverable, and will include but is not limited to the following examples: 1. Artifact Name 2. Associated Parent DEL 3. State Approver 4. SI Point of Contact 5. Review Frequency 6. Submission Frequency 7. Artifact File Format 8. Artifact Location (e.g., SharePoint breadcrumb) 9. Link to artifact

6.11.2 Business Continuity Execution

Table 6-41: Business Continuity Execution

Req #	SOW Requirement
6.11.2-01 (new)	The Contractor shall staff, manage, lead, and execute all Business Continuity activities on CalHEERS as defined in this Statement of Work and in accordance with the CD-6.11-1 – Business Continuity Plan.
6.11.2-02 (modified)	<u>In accordance with the Business Continuity Plan,</u> the Contractor shall successfully <u>execute</u> a complete test of the business continuity/technology recovery procedures once every two (2) years.
6.11.2-03 (existing)	The Contractor shall conduct a desktop simulation of the business continuity/technology recovery procedures once every two (2) years alternating with the complete test.
6.11.2-04 (existing)	The Contractor shall administer business continuity/technology recovery procedures through the Term of the Contract in the event of a disaster.
6.11.2-05 (modified)	The Contractor shall demonstrate <u>and report</u> to the State Project Director or designee on an annual basis that all business continuity/technology recovery components, procedures and activities described in the <u>Business Continuity Plan and</u> Operations Plan have been fully tested.
6.11.2-06 (modified)	The Contractor shall conduct <u>business continuity</u> tests and demonstrations <u>of the alternate facility</u> and shall include but not be limited to: 1. Procedures and activities to support <u>backup site facility</u> becoming functional 2. Procedures and activities to support the <u>alternate facility</u> becoming functional
6.11.2-07 (existing)	The Contractor shall have System application and Data available at all times for production use at the <u>backup facility</u> .
6.11.2-08 (new)	The Contractor shall collaborate with the State to develop and maintain any new Project Artifacts necessary to support this section. New artifacts shall be added to the Project Artifacts Repository and managed in accordance with the Project Artifact process.

6.12 SYSTEM ENVIRONMENTS

The Contractor is responsible for managing and maintaining the CalHEERS architecture and environments, which include the Production, Test, Training and Development environments, to meet CalHEERS business and technical requirements and System service level needs. The Contractor is responsible for ensuring that the CalHEERS architecture and environments support the CalHEERS data processing needs and provides a stable and flexible System to meet the ever-changing program needs.

6.12.1 System and Training Environments

The Contractor shall perform the Training Environment services described in this section.

Table 6-42: Training Environment

Req #	SOW Requirement
6.12.1-01 (existing)	The Contractor shall provide the Training and UAT environments accessible via the internet.
6.12.1-02 (modified)	The Contractor shall ensure that the Training Environment User's Guide shall be prepared in accordance with ISO/IEC 14764 IEEE Std 14764-2006 - Software Engineering – Software Life Cycle Processes - Maintenance (7.3.3 -Maintenance Plan Topics) and ISO/IEC/IEEE 15289, Second Edition 2015-05-15 (10.38 - Installation Plan) pertaining to end user training. As new versions of standards are available, adoption of the new standard will be considered through the change control process and approved by the State Project Director or designee.
6.12.1-03 (modified)	The Contractor shall maintain the Training Environment Technical Guide in accordance with ISO/IEC 14764 IEEE Std 14764-2006 – Software Engineering – Software Life Cycle Processes – Maintenance (7.3.3 - Maintenance Plan Topics) and ISO/IEC/IEEE 15289, Second Edition 2015-05-15 (10.38 - Installation Plan) pertaining to end user training. As new versions of standards are available, adoption of the new standard will be considered through the change control process and approved by the State Project Director or designee.
6.12.1-04 (existing)	The Contractor shall provide on-line testing environments that support unit, System, integration, regression and parallel testing, prototype development and that replicate the full functionality of the production environment.
6.12.1-05 (existing)	The Contractor shall ensure and demonstrate that the test environments meet Production capability but do not affect Production performance or Data.
6.12.1-06 (modified)	The Contractor shall be responsible for hosting and providing technical support for the required quantity and specifications of State UAT environments, as directed by the State Project Director or designee.
6.12.1-07 (existing)	All environments shall operate independently allowing for maintenance or any administrative operations on any environment to not impact or be impacted upon by other environments.
6.12.1-08 (existing)	The Contractor shall maintain the UAT environments with at least the Production version of the System code unless requested otherwise by the State Project Director or designee.
6.12.1-09 (existing)	The Contractor shall manage and support batch schedules for UAT environments which may be different from the Production environment batch schedules. Specific requests from the State Project Director or designee for the UAT batch scheduler run cycles shall be executed within two (2) hours.
6.12.1-10 (existing)	The Contractor shall be responsible for hosting and providing technical support for a State training environment.
6.12.1-11 (existing)	The Contractor shall make training environments accessible to designated State Project staff.
6.12.1-12 (existing)	The Contractor shall maintain training environments with at least the Production version of the System code or one version earlier unless requested otherwise by the State Project Director or designee.

Req #	SOW Requirement
6.12.1-13 (existing)	The Contractor shall manage and support batch schedules for Training environment. Specific requests from the State Project Director or designee for the training batch scheduler run cycles shall be executed within two (2) hours.
6.12.1-14 (existing)	The Contractor shall continue to provide a Production loaded test environment that includes CalHEERS System data to support testing of data fixes prior to their deployment in Production.
6.12.1-15 (existing)	The Contractor shall provide a copy of full Production Data, partial Production Data, and/or Data sets representative of operational complexity in the UAT environments as determined by the State.
6.12.1-16 (existing)	The Contractor shall maintain the test data within the UAT environments and utilize strict and consistent configuration management practices in support of UAT Data management.
6.12.1-17 (existing)	The Contractor shall have the ability to copy and restore UAT data and code as requested by the State.
6.12.1-18 (existing)	The Contractor shall synchronize, and clean-out, the reference tables within the UAT environments with Production reference tables, as requested by the State Project Director or designee.
6.12.1-19 (modified)	The CalHEERS System shall provide an operational environment to run the batch for Ops Copy segmented from Production.

6.13 SYSTEM PERFORMANCE

The Contractor is responsible for monitoring, tuning, and applying corrections to CalHEERS, in accordance with SLAs, the Capacity Management Plan, and the Operations Plan, to ensure that CalHEERS performance meets CalHEERS business and technical requirements, and System service level agreements.

Refer to Attachment A-2.3, SERVICE LEVEL AGREEMENTS AND LIQUIDATED DAMAGES for liquidated damages associated with these requirements.

6.13.1 System Performance Plan

Table 6-43: System Performance Plan (CD-6.13-1)

Req #	SOW Requirement
6.13.1-01 (modified)	The Contractor shall adopt, enhance, deliver, and maintain the CD-6.13-1 - System Performance Plan, which includes but is not limited to: 1. INTRODUCTION 1.1 Purpose 1.2 List of Reference Documents 1.3 Audience 2. SUMMARY 2.1 Scope 3. APPROACH 3.1 Introduction to System Performance Management 3.2 Overview of Responsibilities 3.3 Overview of Performance Management 4. ASSUMPTIONS, CONSTRAINTS AND RISKS 4.1 Assumptions 4.2 Constraints 4.3 Risks 5. REQUIREMENTS 6. ROLES AND RESPONSIBILITIES 6.1 Roles and Responsibilities

Req #	SOW Requirement
	6.1.1 Contractor Performance Team Roles and Responsibilities 6.1.2 Performance Management Stakeholders Roles and Responsibilities 7. TOOLS IN SUPPORT OF PERFORMANCE MANAGEMENT 8. PERFORMANCE TESTING PLAN 8.1 Define Performance Scope and Objectives 8.1.1 Detailed Process 8.2 Assess Roles and Responsibilities 8.2.1 Detailed Process 8.3 Execute Performance Plan 8.3.1 Detailed Process 9. PERFORMANCE TEST EXECUTION 9.1 Detailed Process 10. PRODUCTION MONITORING 10.1 Approach to Production Monitoring 10.2 Overview of Responsibilities 10.3 Key Objectives of Production Monitoring 10.4 Tools and Dashboards in Support of Production Monitoring 10.5 Production Monitoring Standard Operating Procedure 11. PROCEDURAL APPENDICES 12. GLOSSARY AND ACRONYMS 12.1 New Acronyms and Terms APPENDIX 1: SOW TO DELIVERABLE TRACEABILITY CHECKLIST APPENDIX 2: DELIVERABLE COMPLIANCE AND VALIDATION CHECKLIST APPENDIX 3: ASSOCIATED ARTIFACTS
6.13.1-02 (new)	The Contractor shall only alter or modify this Deliverable's structure or content with the approval of the State Project Director or designee.
6.13.1-03 (modified)	The Contractor shall develop the System Performance Plan to include a description of the Contractor's approach for meeting all performance requirements and SLAs.
6.13.1-04 (modified)	The Contractor shall accurately document and provide, within the System Performance Plan, the processes and procedures the Contractor will utilize to manage the availability of the System.
6.13.1-05 (existing)	The Contractor shall provide server monitoring tools and shall monitor vital statistics that include but is not limited to: 1. Request times and errors 2. User wait times, user hits 3. Request hierarchy 4. User wait spectrum 5. Volume and bandwidth 6. Open requests
6.13.1-06 (new)	The State identifies and associates the following artifacts to the CD-6.13-1 - System Performance Plan. The Contractor shall adopt, update, maintain, and deliver these artifacts in accordance with Appendix 3 of this deliverable including, but not limited to: • Awareness Unplanned Event CMS Federal Data Services Hub - Operations Notice - (RIDP Service) Unavailable.msg • CalHEERS Planned Maintenance Notification.msg • CalSAWS - Initial - P3 INC##### - Connectivity issues with CalSAWS interface.msg • CalSAWS - Initial Unplanned Event - P1 - INC##### - .msg • CalSAWS Initial Unplanned Event - P2 or P3- INC##### - .msg • CMS not RIDP FARS - Initial Unplanned Event - P1 INC##### - .msg • CMS not RIDP FARS - Initial Unplanned Event - P2 or P3 - INC##### - .msg • CMS Notifications • CMS RIDP FARS - Initial Unplanned Event - P1 INC##### - .msg • CMS RIDP FARS Initial Unplanned Event - P2 or P3 - INC#####.msg

Req #	SOW Requirement
	• DHS Services Intermittently Unavailable.msg • DHS Services Unavailable.msg • DIVS - Initial Unplanned Event - P1 - INC##### - .msg • DIVS - Initial Unplanned Event - P2 or P3 INC#####.msg • EDD Initial - Unplanned Event - P1 INC ##### - .msg • EDD Initial Unplanned Event - P2 or P3 INC#####.msg • EDD Service Unavailable.msg • Enroller Portal - Awareness Planned Maintenance Activities on Salesforce.msg • Enroller Portal - Awareness Unplanned Event Connectivity Issues with Enroller Portal .msg • Enroller Portal - Initial Unplanned Event - P1 - INC##### - .msg • Enroller Portal - Initial Unplanned Event - P2P3 INC#####.msg • Equifax Services Intermittently Unavailable.msg • FTB - Initial Unplanned Event - P1 - INC##### - .msg • FTB - Initial Unplanned Event - P2 or P3 INC#####.msg • FTB Connectivity Issues.msg • Initial Impact Analysis Notification.msg • Interface Partner Outage Impact • IRS Services Intermittently Unavailable.msg • IRS Services Unavailable.msg • IVR - Initial Unplanned Event - P1 - INC##### - .msg • IVR - Initial Unplanned Event - P2 or P3 INC#####.msg • Maximus AIM - Initial Unplanned Event - P1 - INC##### - .msg • Maximus AIM - Initial Unplanned Event - P2 or P3 INC#####.msg • MEDS - Initial Unplanned Event - P1 - INC##### - .msg • MEDS - Initial Unplanned Event - P2 or P3 INC#####.msg • MEDS Connectivity Issues.msg • OE 2023 Maintenance Activities • Open Market OTP - Initial Unplanned Event - P1 - INC##### - .msg • Open Market OTP - Initial Unplanned Event - P2 or P3 INC#####.msg • Open Market OTP Services.msg • Operations - Notification process_V1.1 • P1 Notification.msg • P2 Notification.msg • P3 Notification.msg • Partner_Contacts_Updated • Planned Partner Maintenance Notification.msg • Process Flow Diagrams for all the Interfaces.pptx • Resolved Notification.msg • RIDP Service Intermittently Unavailable.msg • Salesforce - Initial Unplanned Event - P1 - INC##### - .msg • Salesforce - Initial Unplanned Event - P2 or P3 INC#####.msg • Salesforce Connectivity Issues.msg • SOP - Monitoring • Splunk_headless_Legend (004) • SSA Services Intermittently Unavailable.msg • SSA Services Unavailable.msg • TRICARE Services Intermittently Unavailable.msg • TRICARE Services Unavailable.msg • Unplanned CalHEERS Maintenance Notification.msg • VA Services Intermittently Unavailable.msg • VA Services Unavailable.msg

Req #	SOW Requirement
6.13.1-07 (new)	The Contractor shall adopt and maintain all Project Artifacts that are associated with this Deliverable in the Project Artifact Inventory and manage them in accordance with the Project Artifact process.
6.13.1-08 (new)	The Contractor shall update the following appendices and attach them to the System Performance Plan: Appendix 1—SOW to Deliverable Traceability Checklist Description: A table where the Contractor identifies the SOW requirements for this Deliverable, as specified within SOW Section 8, DELIVERABLES, and includes but is not limited to: 1. SOW Requirement ID # 2. SOW Requirement Text 3. Requirement Traceability (Contractor identified traceability from the requirements to the Deliverable) 4. Requirement Fulfillment (Define how the Contractor has fulfilled the SOW requirements in the Deliverable) Appendix 2—Deliverable Compliance and Validation Checklist Description: A QA Checklist that includes, but is not limited to: 1. Deliverable Section Number and Title 2. Deliverable Requirement Statement(s) 3. Requirement Completion (How the Contractor has complied with or will comply with the requirement statements within the Deliverable) 4. Validation Method (The method the Contractor used to validate Deliverable compliance) 5. The Contractor's QA Manager sign-off on compliance Appendix 3—Associated Artifacts Description: An extract from the Project Artifact Inventory List of artifacts associated with this Deliverable, and will include but is not limited to the following examples: 1. Artifact Name 2. Associated Parent DEL 3. State Approver 4. SI Point of Contact 5. Review Frequency 6. Submission Frequency 7. Artifact File Format 8. Artifact Location (e.g., SharePoint breadcrumb) 9. Link to artifact

6.13.2 System Performance Execution

Table 6-44: System Performance Execution

Req #	SOW Requirement
6.13.2-01 (new)	The Contractor shall staff, manage, lead and execute all System Performance activities on CalHEERS as defined in this Statement of Work and in accordance with the CD-6.13-1 – System Performance Plan.
6.13.2-02 (modified)	Following receipt of Notice from the Contractor that Confirmation has occurred for the System and Hosting Services, the State shall perform all necessary Acceptance Tests to determine whether the System and Hosting Services perform without Deficiency.
6.13.2-03 (existing)	The Contractor shall assist the State as reasonably requested by the State in writing (including e-mail) in performing such acceptance tests at no additional cost to the State.

Req #	SOW Requirement
6.13.2-04 (modified)	The Contractor shall be responsible for tuning and optimizing the performance of the System, as directed by the State Project Director or designee, including but not limited to, efficiencies and system performance based on: - Updated industry standards - Updated security standards - Best practices as defined within the CalHEERS Project
6.13.2-05 (existing)	The Contractor shall conduct periodic and on-request performance tests, analyze issues and take corrective actions to operate the System at optimal levels of performance through the term of the Contract.
6.13.2-06 (modified)	The Contractor shall monitor CPU utilization, network bandwidth consumption, Data storage usage and all other factors and resources that impact System performance for all Contractor and Contractor managed hosting and Equipment on a continuous basis during the term of the Contract and shall provide additional System resources.
6.13.2-07 (existing)	The Contractor shall make available to the State all data gathered for CPU utilization, network bandwidth consumption, Data storage usage and all other factors and resources that impact System performance.
6.13.2-08 (modified)	The Contractor shall deploy and utilize performance monitoring and failure alert tools.
6.13.2-09 (modified)	The Contractor's performance monitoring tools shall also be made available to designated State Project staff to allow unrestricted access to the performance monitoring and failure alert data.
6.13.2-10 (existing)	The Contractor shall make the performance monitoring and failure alert tool available to additional parties for independent analysis and verification as requested by the State Project Director or designee.
6.13.2-11 (existing)	The Contractor's performance monitoring and failure alert tools shall not adversely impact the CalHEERS System and/or Network performance and availability.
6.13.2-12 (modified)	The Contractor shall be responsible for strategic and tactical planning of hosting services, data (including but not limited to Data storage and Data synching among CalHEERS elements), access, access security, port management, and Network device configurations to meet performance requirements.
6.13.2-13 (new)	The Contractor shall collaborate with the State to develop and maintain any new Project Artifacts necessary to support this section. New artifacts shall be added to the Project Artifacts Repository and managed in accordance with the Project Artifact process.

6.14 SYSTEM HARDWARE/SOFTWARE

The Contractor has the responsibility for purchasing, hosting, installing, maintaining, refreshing, and/or tracking the assets that make up the CalHEERS. The State retains the option of purchasing Hardware and Software external to the Contract, to be determined at the time of purchase.

6.14.1 Hardware and Software Inventory Management

The CalHEERS Hardware and Software Inventory Management Plan documents the inventory of all CalHEERS and Software purchased by the Contractor.

Table 6-45: Hardware and Software Inventory Management Plan (CD-6.14-1)

Req #	SOW Requirement
6.14.1-01 (modified)	The Contractor shall adopt, enhance, deliver, and maintain the CD-6.14-1 - Hardware and Software Inventory Management Plan, which includes but is not limited to: 1. INTRODUCTION

Req #	SOW Requirement
	1.1 Purpose 1.2 List of Reference Documents 1.3 Audience 2. SUMMARY 2.1 Scope 3. APPROACH 3.1 Introduction to Asset Management 3.1.1 Introduction to Asset Management Tools 3.1.2 Introduction to Procurement Overview 3.1.3 Introduction to Staffing in the Asset Management Process 3.2 Overview of Responsibilities 4. ASSUMPTIONS, CONSTRAINTS, AND RISKS 4.1 Assumptions 4.2 Constraints 4.3 Risks 5. REQUIREMENTS 6. ROLES AND RESPONSIBILITIES 6.1 Roles and Responsibilities 6.1.1 Contractor Roles and Responsibilities 6.1.2 State Roles and Responsibilities 7. ASSET TRACKING 7.1 Overview 7.2 Equipment Management 7.3 Audit Processes 8. PROCUREMENT PROCESSES 8.1 Procurement Process Review 8.1.1 Submit Request Via Email or Verbal Communication 8.1.2 Confirm and Review Request + State Alerted 8.1.3 Submit RFQ to Vendors 8.1.4 GPS Submits Quotes to Asset Management 8.1.5 AM Reviews Quoted Specs with Original Requestor(s) 8.1.6 AM Reviews Purchase Detail and EULA Questionnaire in State Contract, Finance, and Tech Mtg. 8.1.7 Contractor Processing Order 8.2 Receive and Verify Assets 8.2.1 Receive Hardware and Software Asset 8.2.2 Verify Asset Reception, Hardware Asset, and/or Software Asset 8.2.3 Tag and Scan Hardware Asset – CalHEERS Campus 8.2.4 Store Hardware Asset 8.3 Input an Asset 8.3.1 Upload Asset Data 8.3.2 Check Assets 8.4 Disposing of an Asset 8.4.1 Collect Assets Ready for Disposal and Destroy Data 8.4.2 Scan Tags of Disposed Assets 8.4.3 Update Asset Management Tool 8.4.4 Facilities Coordinates Pickup of Assets 8.5 Equipment Moves Within Facilities 8.5.1 Moving/Deploying Assets: CalHEERS Campus 8.5.2 Change Location in Asset Management Tool 8.6 Cost Payment Methodology for HW/SW 8.6.1 Fixed Budget Pricing 8.6.2 Payment for HW/SW Bill of Material (BOM) 8.6.3 Determination of Actual Cost

Req #	SOW Requirement
	8.6.4 Other Considerations 9. SOFTWARE LICENSE MANAGEMENT AND COMPLIANCE 9.1 Managing Software Assets 9.1.1 Run A License in Breach Report 9.1.2 Confirm Software Need 9.1.3 Generate Software Compliance Report 9.2 Software Maintenance Management 9.2.1 Software/Maintenance Procurement 9.2.2 Software Maintenance Receipt and Verification 9.2.3 Software/Maintenance Data Uploading 9.2.4 Software Upgrade and Maintenance Renewal 9.2.5 Data Collection 9.3 Total Compliance Reconciliation 9.3.1 Hardware Asset Recognition 9.3.2 Contractor Processing Order 9.3.3 License Reconciliation 9.3.4 Software Compliance 9.3.5 Discovery Inventory 9.3.6 Managing N-1 Compliance 10. END USER LICENSE AGREEMENT APPROVAL PROCESS 10.1 End User License Agreement Approval Process 10.1.1 AM Requests EULA from Manufacturer 10.1.2 Contractor CM Review and Document Preparation of Informal Correspondence 10.1.3 State Legal, Tech, and Contracts Management Teams Review EULA Document(s) 10.1.4 Informal Correspondence Received from State Legal: Formal Correspondence Package Prepared 10.1.5 Formal Correspondence Request Received and Reviewed by State Teams 10.1.6 Official Correspondence Document Package Received from State Legal 10.1.7 Document Uploaded 11. E-WASTE PROCESS AND LOST/STOLEN ASSET PROCESS 11.1 E-Waste Process and Lost/Stolen Asset Process 11.1.1 E-Waste – CalHEERS Campus 11.1.2 Handling Lost and Stolen Assets – CalHEERS Campus 12. CONTRACT MANAGEMENT 12.1 Contract Management Process 12.1.1 Contract Management 13. HARDWARE AND SOFTWARE INVENTORY MANAGEMENT TOOL 13.1 Asset Management Tool Management Process 14. MANAGEMENT OF OUT-OF-SCOPE / PERIPHERAL ASSETS 14.1 Managing Peripherals 15. OPEN-SOURCE SOFTWARE (FREEWARE) MANAGEMENT 15.1 Open-Source Software Governance 15.1.1 Submit a Request for Quote Form 15.1.2 Submit OPEN-SOURCE SOFTWARE Legal Approved OPEN-SOURCE SOFTWARE Package for Project CM Approval 15.1.3 Submit OPEN-SOURCE SOFTWARE Package to State's Legal Team for Review and Approval 15.1.4 Update Asset Management Tool 16. AMS TRAINING 16.1 CalHEERS - Asset Management Tool Project Training

Req #	SOW Requirement
	16.2 Asset Management Tool Operational Documentation 17. GLOSSARY AND ACRONYMS 17.1 New Acronyms and Terms APPENDIX 1: SOW TO DELIVERABLE TRACEABILITY CHECKLIST APPENDIX 2: DELIVERABLE COMPLIANCE AND VALIDATION CHECKLIST APPENDIX 3: ASSOCIATED ARTIFACTS
6.14.1-02 (new)	The Contractor shall only alter or modify this Deliverable's structure or content with the approval of the State Project Director or designee.
6.14.1-03 (modified)	The Contractor shall include an approach to change management support for State and Contractor and Software upgrades, Change Requests (CRs) and System releases.
6.14.1-04 (modified)	The Contractor shall accurately document the description of all Services and Service elements needed to support CalHEERS in the cloud. The Plan must include but not be limited to: 1. Configuration schematic showing all equipment, facilities, locations. 2. Description of all storage and available capacity and owner. 3. Projected response times using the Production environment and associated calculations. 4. Contingency plans for acquisition and installation of all elements in case of schedule delay. 5. The detailed maintenance contracts for all cloud accounts and elements (where applicable).
6.14.1-05 (modified)	The Contractor shall provide all details in the format requested by the State of ongoing inventory and asset management activities in the Hardware and Software Inventory Management Plan and associated work products.
6.14.1-06 (modified)	The Contractor shall provide inventory and asset management services from procurement through disposal or destruction of all CalHEERS assets based on federal and State requirements, including, but not limited to, all data retention media, laptops, monitors, and other data processing and storage devices.
6.14.1-07 (existing)	The Contractor shall develop the processes required to conduct inventory and asset management.
6.14.1-08 (existing)	The Contractor shall adopt, enhance and maintain specified documentation and reports for Software inventory management and Software license compliance.
6.14.1-09 (new)	The Contractor shall update the CD-6.14-1 - Hardware and Software Inventory Management Plan to identify the process and procedures for addressing Hardware or Software that approaches an end-of-life state, including the necessary reporting, current and historical tracking (of hard drive destruction, inventory kept on hand, and final disposition of each item in inventory), and storage of surplus items for use as backup inventory for project team use as defined by the State.
6.14.1-10 (modified)	The Contractor shall provide periodic reporting, detailing updates to the Hardware and Software asset base in the format requested by the State. Reporting of the asset base must be automated to provide customizable levels of detail. For example, there may be ten lines for an item in the system of record (one to indicate maintenance costs and another specific to license costs). The reporting must allow a high-level version of the report, listing simply each individual item (vendor or product title) with total counts currently in use, currently available, and current costs.
6.14.1-11 (modified)	The Contractor shall update and maintain the CalHEERS Hardware and Software Inventory System Documentation in accordance with ISO/IEC 12207, IEEE Std 12207-2008 - Systems and software engineering – Software life cycle processes (6 - System Life Cycle, 7-Software Specific Processes), ISO/IEC/IEEE 15289 - Systems and Software Engineering – Content of life cycle information items (documentation), Second Edition (10.5- Asset management plan), and NIST SP 800-37, Rev. 2 – Risk management framework for information systems and organizations (destruction). As new versions of standards are available, adoption of the new standard will be considered through the change control process and approved by the State Project Director or designee.

Req #	SOW Requirement
6.14.1-12 (new)	The Contractor shall, in collaboration with the State, update the Hardware and Software Inventory Management Plan (CD-6.14-1) to include an additional subsection that addresses the pricing and payment approach for the HW/SW Bill of Material (BOM). This new subsection shall be titled as Cost Payment Methodology for HW/SW, and include but not be limited to the following topics: • Cost Payment Methodology for HW/SW 1 Fixed Budget Pricing 2 Payment for HW/SW Bill of Material (BOM) 3 Determination of <u>True Cost</u> ~~Actual Cost~~ 4 Tools and Reporting of HW/SW BOM Costs 5 Other Considerations
6.14.1-13 (new)	The State identifies and associates the following artifacts to the CD-6.14-1 - Hardware and Software Inventory Management Plan. The Contractor shall adopt, update, maintain, and deliver these artifacts in accordance with Appendix 3 of this deliverable including, but not limited to: • Technical Asset Inventory Reports (modified) • 6.15-F1 - Request for Quote Form • 6.15-F2 - EULA Questionnaire Form • 6.15-F2 - EULA Template Form • 6.15-F3 - Purchase Detail Form • 6.15-O1 - FlexNet Manager Suite System Operations Manual • 6.15-O2 - 2021 FlexNet Operations Manual • 6.15-O5 - CalHeers Campus Rack Diagram As of 11.1.2021 • 6.15-P1 - CA State Administrative Manual Section 5900 - Disposal of IT Equipment and Supplies Process Guide • 6.15-P2 - Equipment Moves Within Facility Process Guide • 6.15-P3 - Desktop Support Annual Audit Process Guide • 6.15-P4 - Desktop Support Flexera Actions Process Guide • 6.15-P5 - Flexera Daily Backup and Recovery Process Guide • 6.15-P6 - Flexera Pre-Implementation Checklist Process Guide • 6.15-P6 - FNMP Pre-Implementation Checklist Process Guide • 6.15-P7 - Lost and Stolen Assets Process for CalHEERS Campus Process Guide • 6.15-T1 - Flexera Accessing Reports Process Training Guide • 6.15-T2 - Flexera Building Custom Views Process Training Guide • 6.15-T3 - Flexera Application Management Process Training Guide • 6.15-T4 - Flexera License Reconciliation Process Training Guide • 6.15-T5 - Flexera Hardware Asset Management Process Training Guide • 6.15-T6 - Flexera Contract Management Process Training Guide • 6.16-F3 - Purchase Detail Form • 6.16-T7 - Flexera Training Agenda Process Guide • 6.19-P1 - Pulling Reports from Flexera Process Guide • AM Invoicing Process Guide • AM Quote Process Guide • AM role inEWM Process Guide • Appendix A 2.0 - CalHEERS OSS Inventory Tracker • ARIN renewal Process Guide • CalHEERS O365 & SP Password Reset Guide • Flexera Database Change Process Guide • Flexera Management Process Guide for Desktop Support Team • Flexera Training Agenda Process Guide • HWSW RFQ Template • Microsoft Distribution List Process Guide

Req #	SOW Requirement
	• Microsoft Licensing Admin Process Guide • Microsoft Volume Activation Licensing Process guide • N-1 Compliance Maintenance • Posting AM Documents Process Guide • Process Guide • Pulling Reports from Flexera Process Guide • Reserving a Conference Room Using Outlook- StepByStep • SOP- Installing Global Protect Client
6.14.1-14 (modified)	The Contractor shall update the CD-6.14-1 – Hardware and Software Inventory Management Plan Deliverable with the process for development and maintenance of the Technical Asset Inventory Report (Hardware & Software).
6.14.1-15 (new)	The Contractor shall develop, adopt and maintain a new Project Artifact, that will support the maintenance of all Software in the CalHEERS in compliance with the N-1 requirement defined within this SOW section 6.14.1, HARDWARE AND SOFTWARE INVENTORY MANAGEMENT.
6.14.1-16 (new)	The Contractor shall adopt and maintain all Project Artifacts that are associated with this Deliverable in the Project Artifact Inventory and manage them in accordance with the Project Artifact process.
6.14.1-17 (new)	The Contractor shall collaborate with the State to develop and maintain any new Project Artifacts necessary to support this section. New artifacts shall be added to the Project Artifacts Repository and managed in accordance with the Project Artifact process.
6.14.1-18 (new)	The Contractor shall update the following appendices and attach them to the Hardware and Software Inventory Management Plan: Appendix 1—SOW to Deliverable Traceability Checklist Description: A table where the Contractor identifies the SOW requirements for this Deliverable, as specified within SOW Section 8, DELIVERABLES, and includes but is not limited to: 1. SOW Requirement ID # 2. SOW Requirement Text 3. Requirement Traceability (Contractor identified traceability from the requirements to the Deliverable) 4. Requirement Fulfillment (Define how the Contractor has fulfilled the SOW requirements in the Deliverable) Appendix 2—Deliverable Compliance and Validation Checklist Description: A QA Checklist that includes, but is not limited to: 1. Deliverable Section Number and Title 2. Deliverable Requirement Statement(s) 3. Requirement Completion (How the Contractor has complied with or will comply with the requirement statements within the Deliverable) 4. Validation Method (The method the Contractor used to validate Deliverable compliance) 5. The Contractor's QA Manager sign-off on compliance Appendix 3—Associated Artifacts Description: An extract from the Project Artifact Inventory List of artifacts associated with this Deliverable, and will include but is not limited to the following examples: 1. Artifact Name 2. Associated Parent DEL 3. State Approver 4. SI Point of Contact 5. Review Frequency 6. Submission Frequency

Req #	SOW Requirement
	7. Artifact File Format 8. Artifact Location (e.g., SharePoint breadcrumb) 9. Link to artifact

6.14.2 System Hardware/Software Execution

This section includes the requirements for the [Hardware and Software Inventory Management Plan](#).

Table 6-46: System Hardware/Software Execution

Req #	SOW Requirement
6.14.2-01 (new)	The Contractor shall staff, manage, lead and execute Hardware and Software planning, procurement, installation, configuration, maintenance, and tracking via HW/SW Inventory activities on CalHEERS as defined in this Statement of Work and in accordance with the CD-6.14-1 – Hardware and Software Inventory Management Plan.
6.14.2-02 (existing)	The Contractor shall connect the Equipment of State's Sites and Facilities to the Network in accordance with the Specifications and work plan.
6.14.2-03 (modified)	As part of requirements to keep CalHEERS Software at most one version level lower than the latest available version from its manufacturer, the Contractor shall maintain: 1. An Asset Management Software (AMS) platform that enables the real-time discovery and management of Software assets across the CalHEERS Project and platform. 2. A tool that provides real-time data on the latest version available from each Software's manufacturer, identifying the iterative changes in recent years. 3. AMS tool reports which provide the current version of all installs on all environments and equipment across the project and the associated current version available from the manufacturer, identifying the number of iterative changes between. 4. Tracking of plans and dates for updates and justifications for items that are not compliant. 5. All reporting shall be done on items in a uniform way that allows simple-as-possible traceability from AMS to reports to tracking systems for change requests and related tracking and Tech Refresh reporting to detail documents to invoices, etc. Often vendors use different naming for a product than the project uses, so traceability is important for consolidation and review of the big picture in an AMS tool and reports.
6.14.2-04 (existing)	The Contractor shall maintain an AMS platform that provides desktop to datacenter Software asset management functionality, including surveys of Software installations and usage.
6.14.2-05 (existing)	The Contractor shall maintain an AMS platform that provides purchased versus installed license reconciliation.
6.14.2-06 (new)	The Contractor shall provide license reconciliation reporting to the State with any purchase requests for additional licenses.
6.14.2-07 (existing)	The Contractor shall maintain an AMS platform that enables the Contractor to identify and evaluate areas of compliance concern and take required actions when warranted.
6.14.2-08 (existing)	The Contractor shall maintain an AMS platform that integrates with the Information Technology Systems Management platform's Configuration Management Database application.
6.14.2-09 (existing)	The Contractor shall provide a data file from the AMS to the State and IV&V as requested.
6.14.2-10 (existing)	The Contractor shall manage the procurement, licensing, configuration, implementation, maintenance and disposal of the assets for the duration of the Contract.

Req #	SOW Requirement
6.14.2-11 (existing)	The Contractor shall provide inventory and asset management services from procurement through disposal of the asset based on federal and state requirements.
6.14.2-12 (existing)	The Contractor shall configure the AMS platform to support the defined processes.
6.14.2-13 (existing)	The Contractor shall load asset management data including maintenance, warranty, and Contract data into the AMS platform.
6.14.2-14 (existing)	The Contractor shall verify received Equipment against orders and affix asset control tags per specifications.
6.14.2-15 (existing)	The Contractor shall track installation, moves, additions and changes of Hardware and update the AMS data as they happen, or at most, on a daily basis.
6.14.2-16 (existing)	The Contractor shall answer questions and reconcile discrepancies identified.
6.14.2-17 (existing)	The Contractor inventory and asset management Staff shall interact with and support the State staff or designees.
6.14.2-18 (existing)	The Contractor shall support annual inventory audits by providing reports detailing the current status and location of State assets, coordinating site visits to the Project facilities and storage.
6.14.2-19 (modified)	The Contractor shall define, track, monitor, maintain, all assets used or required on the Project (State-owned or not, State-purchased or not) through their lifecycle (procurement through to destruction, uninstall, or end of life) using an AMS platform which allows State to self-serve using real-time reporting.
6.14.2-20 (existing)	The Contractor shall define a lost/stolen asset process.
6.14.2-21 (existing)	The Contractor shall track and define a process for inventory of peripherals (all equipment and accessories in support of other inventoried items, such as power cords, computer mice, and keyboards).
6.14.2-22 (existing)	The Contractor shall track and define a process for Equipment and Software purchases and ongoing maintenance and support, including Software license agreements, and financial information required for asset and inventory management, and audit purposes.
6.14.2-23 (existing)	The Contractor shall install all cables, adapters, and connectors necessary for interconnection and proper operation of all Equipment.
6.14.2-24 (modified)	The Contractor shall install all Network wiring supporting CalHEERS devices with industry best practice level infrastructure (e.g., Category 5e).
6.14.2-25	<u>Intentionally Left Blank</u>
6.14.2-26	<u>Intentionally Left Blank</u>
6.14.2-27	<u>Intentionally Left Blank</u>
6.14.2-28 (existing)	The Contractor shall procure and manage the licenses for all Software components and renew them as needed through the Term of the Contract.
6.14.2-29 (modified)	The Contractor shall procure, configure, test, update associated APIs, and implement all Software components of the CalHEERS (including all enterprise tools and System Software and operating system Software elements of project or System hardware) through the Term of the Contract to be at most one version level lower than the latest available version (not just versions considered major, but all versions) from its manufacturer (also known as “N minus one,” written “N-1”) unless otherwise Accepted by the State. The latest available version includes platform changes, such as when a manufacturer tool upgrade converts a tool from a Contractor-installed instance to a cloud-based Software as a Service or other general upgrades across platforms, product name changes, restarting of versioning numbers, tool or vendor name changes, sale of a tool to a new vendor and the like.

Req #	SOW Requirement
6.14.2-30 (new)	Upon completion of the Transition phase of this Contract to primary System Integrator, the Contractor shall be responsible as part of the fixed cost to bring all items into compliance with the Hardware, Software, and cloud-based requirements. The fixed cost bid, for example, applies to all items making up the CalHEERS whether installed by the current or a past System Integrator.
6.14.2-31 (existing)	The Contractor shall advise the State of the impact of any Software upgrade to the operations of the System and/or interface partners 90 Days prior to upgrading the Software.
6.14.2-32 (existing)	The Contractor shall provide Services required for upgrading the Software components of the System that includes, but is not limited to: 1. Impact analysis 2. Planning 3. Testing 4. Implementation
6.14.2-33 (modified)	The Contractor shall be responsible for making application programming changes to the System (including implementation and testing and updates to System code, Application Programming Interfaces, etc.) required to support all new installs (in support of keeping System current and upgrades to best practices and standards) and upgrades to third-party Software components.
6.14.2-34 (existing)	The Contractor shall request Acceptance of any open-source Software implementation from the State 30 Days prior to implementation.
6.14.2-35 (existing)	The Contractor shall procure and manage maintenance contracts for all Software components and renew them as needed throughout the term of the Contract.
6.14.2-36 (existing)	The Contractor shall provide justification for proposed maintenance support levels for each Software component to the State.
6.14.2-37 (existing)	The Contractor shall notify the State if there is no commercially available maintenance support for any Software component.
6.14.2-38 (existing)	Through structured quality assurance and testing processes, the Contractor shall certify Software upgrades and security patches for any Third-Party Software to support the System.
6.14.2-39 (existing)	The Contractor shall procure, install, configure, and operate ~~Hardware, Cloud Services,~~ and Software to the CalHEERS Project and System.
6.14.2-40 (existing)	The Contractor shall provide a comprehensive Network infrastructure which leverages automatic notifications.
6.14.2-41 (existing)	The Contractor shall provide the necessary industry standard tools and technologies to support deployment, runtime operations, administration, monitoring, alerting and on-demand provisioning of resources.
6.14.2-42 (existing)	The Contractor shall provide all the necessary industry standard tools and technologies to support all storage requirements including, but not limited to: 1. File storage 2. Content management 3. Data warehouse 4. Business intelligence and reporting 5. Relational database 6. Business rules repository 7. Identity storage 8. Certificate storage
6.14.2-43 (existing)	The CalHEERS Data Layer shall include industry standard tools and technologies to support design, development, testing (e.g., functional, load and performance), runtime management and monitoring of all information Systems.

Req #	SOW Requirement
6.14.2-44 (existing)	The Contractor shall maintain CalHEERS Physical Data Model (PDM) based in NIEM and HL7 reference mode that includes, but is not limited to: 1. Persistent Data Model 2. Core XML Schema Model 3. Message XML Schema Model
6.14.2-45 (existing)	The Contractor shall design and implement Technical Services that comply with principles and standards from the most current MITA Technical Services specification, Part III Chapter 6-Technical Services Specification. As new versions of standards are available, adoption of the new standard will be considered through the change control process and approved by the State Project Director or designee.
6.14.2-46 (existing)	The Contractor shall implement service access patterns (e.g., "External Gateway Pattern", "Electronic Data Interface (EDI) Gateway" etc.) to provide unique access points to the CalHEERS services from various access channels.
6.14.2-47 (existing)	The Contractor shall procure, install, configure, and operate the System (e.g., Equipment, Software, Network, and database management system).
6.14.2-48 (new)	The Contractor shall develop, document, and implement a terms and End-User License Agreement (EULA) process to track all terms accepted by the CalHEERS.
6.14.2-49 (new)	The Contractor technical, security, and legal teams shall review all terms (e.g., EULAs) for known or new risks to the State, tracking and alerting the State when terms include risks or pain points that the State would prefer to avoid. The Contractor shall renegotiate those terms whenever possible to meet State needs and track all accepted, rejected, deviations from State needs, and renegotiated terms.
6.14.2-50 (new)	When new or updated (since previously accepted by the CalHEERS) terms are implemented by the manufacturer, the Contractor shall provide a comparison document along with the new terms to show in track change format the changes that have occurred since previous version.
6.14.2-51 (new)	When submitting terms (e.g., EULAs) the Contractor shall point out areas that do not apply to the CalHEERS within the terms. For example, if the terms are for ten products and CalHEERS uses only four of the ten, call out terms that are not relevant or needing review to aid in State review. The Contractor shall also, if there are links (URLs) or references to relevant terms not provided in the terms document, obtain those terms and include them in the text of the terms package for State review.
6.14.2-52 (new)	The Contractor shall notify State of any changes to terms (e.g., EULAs) within 14 days of vendor publication of any terms changes that are known State concerns, may degrade functionality or security, pose unacceptable level of risk to the State, or amend or modify any clauses of this Contract. The Contractor shall make all attempts to amend these changed terms with the vendor and then seek State approval of the resulting final changes.
6.14.2-53 (new)	The Contractor shall archive the terms documents (e.g., EULAs) for State to access the signed and final versions (all signatures and date fields completed) of these terms. Signed copies may require multiple copies, which would include both the accepted by the CalHEERS, signed copy and the Contractor-signed copy (where applicable).
6.14.2-54 (new)	The Contractor shall execute the <u>cost payment methodology</u> as defined in the Hardware and Software Inventory Management Plan (CD-6.14-1), <u>cost payment methodology</u> for HW/SW subsection. The Contractor shall provide to the State at a minimum but not limited to: • A tracking of total HW and total SW costs for the year against the fixed annual budgets established by the State so the remaining balance of funds is clearly identifiable. • Any updates needed to the invoicing tool to allow for the implemented cost model.
6.14.2-55 (new)	The Contractor shall share their True Costs with the State for all (including all known, planned, or unplanned) Hardware, ~~Cloud Services~~ , and Software costs under this Contract, identifying the True Cost of the item.

Req #	SOW Requirement
6.14.2-56 (new)	When the Contractor is the manufacturer of a given Hardware, ~~Cloud Services~~ , or Software item, the Contractor shall not markup, but charge an agreed upon, discounted rate with the State based on the standard industry rates or the standard published rate, as appropriate.
6.14.2-57 (new)	The Contractor shall not include any mark-up on assets procured by the State <u>and shall perform all required activities as part of fixed cost just as they would when procured by Contractor.</u>
6.14.2-58 (new)	The Contractor shall provide ~~Hardware, Cloud Services, and Software~~ assets at the True Cost, no more than industry standard <u>best available</u> prices and avoid the use of resellers or other middle markup scenarios unless it is to obtain lower rates. Contractor shall not use a reseller that is an affiliated/partner, including marketplace alliances/business relationships, that add any additional cost to the State.
6.14.2-59 (new)	The Contractor shall pay the best possible rate for ~~Hardware, Cloud Services, and Software~~ . The State reserves the right to shop for a better rate and, if one is found, the Contractor will charge no more than that rate.
6.14.2-60 (existing)	The Contractor shall provide Asset Management Software (AMS) reporting of all Software, Hardware, ~~Cloud Services elements~~ , and other assets making up the System. The documentation shall include but not be limited to: 1. Reports to be provided. 2. Exportability 3. Time frame for compliance reporting 4. Ability for ad hoc reports

6.14.3 Technical Asset Inventory Reports

Table 6-47: Technical Asset Inventory Reports

Req #	SOW Requirement
6.14.3-01 (existing)	The Contractor shall develop, or takeover and update, maintain and provide Asset Inventory Reports for all Project Worksites throughout the term of the Contract, providing the State with Asset Inventory Reports as follows: 1. Technical Asset Inventory Report (Hardware & Software) - provided quarterly

6.15 PROBLEM MANAGEMENT

The Contractor shall identify, determine the root cause, and document operational problems, potential problem areas, and recommended solutions. The Contractor shall work closely and cooperatively with the State Project Director or designee, Covered California, DHCS, and all others necessary to resolve issues accurately, quickly, efficiently, and effectively.

6.15.1 Problem Management Plan

Table 6-48: Problem Management Plan (CD-6.15-1)

Req #	SOW Requirement
6.15.1-01 (modified)	The Contractor shall adopt, enhance, deliver, and maintain a CD-6.15-1 - Problem Management Plan, which includes but is not limited to: 1. INTRODUCTION 1.1 Purpose 1.2 List of Reference Documents 1.3 Audience 2. SUMMARY

Req #	SOW Requirement
	2.1 Scope 3. APPROACH 4. ASSUMPTIONS, CONSTRAINTS, AND RISKS 4.1 Assumptions 4.2 Constraints 4.3 Risks 5. REQUIREMENTS 6. ROLES AND RESPONSIBILITIES 6.1 Roles and Responsibilities 6.1.1 Contractor Roles and Responsibilities 6.1.2 State Roles and Responsibilities 7. PROBLEM MANAGEMENT 7.1 ServiceNow Case/Incident/Problem Processes and Procedures 7.1.1 Incoming Call Management 7.1.2 Problem Identification 7.1.3 Problem Analysis 7.1.4 Documentation 7.1.5 Monitoring 7.1.6 Problem Quality Control 7.2 Escalation 7.2.1 Escalation Protocol 7.2.2 Escalation Matrices 7.3 Problem Prioritization 7.4 Severity/Impact/Priority Definition 7.5 Problem Resolution 7.5.1 ServiceNow Problem Record Resolution 7.5.2 ServiceNow Incident Record Resolution 7.5.3 ServiceNow Case Record Resolution 7.6 Communication 7.6.1 Major Incident Communication 7.6.2 Defect Resolution Communication 7.6.3 End User Notification 7.6.4 Communication Templates and Standards 7.7 Problem Reporting 7.7.1 Aging Reports 7.7.2 Metrics and Reports 7.8 Production Triage Meetings 8. GLOSSARY AND ACRONYMS 8.1 New Acronyms and Terms APPENDIX 1: SOW TO DELIVERABLE TRACEABILITY CHECKLIST APPENDIX 2: DELIVERABLE COMPLIANCE AND VALIDATION CHECKLIST APPENDIX 3: ASSOCIATED ARTIFACTS APPENDIX 4: STANDARD OPERATING PROCEDURE
6.15.1-02 (new)	The Contractor shall only alter or modify this Deliverable's structure or content with the approval of the State Project Director or designee.
6.15.1-03 (existing)	The Contractor shall accurately develop and document an approach to Problem Management within the Operations manual.
6.15.1-04 (new)	The Contractor shall adopt and maintain all Project Artifacts that are associated with this Deliverable in the Project Artifact Inventory and manage them in accordance with the Project Artifact process.

Req #	SOW Requirement
6.15.1-05 (new)	The Contractor shall update the following appendices and attach them to the Problem Management Plan: Appendix 1—SOW to Deliverable Traceability Checklist Description: A table where the Contractor identifies the SOW requirements for this Deliverable, as specified within SOW Section 8, DELIVERABLES, and includes but is not limited to: 1. SOW Requirement ID # 2. SOW Requirement Text 3. Requirement Traceability (Contractor identified traceability from the requirements to the Deliverable) 4. Requirement Fulfillment (Define how the Contractor has fulfilled the SOW requirements in the Deliverable) Appendix 2—Deliverable Compliance and Validation Checklist Description: A QA Checklist that includes, but is not limited to: 1. Deliverable Section Number and Title 2. Deliverable Requirement Statement(s) 3. Requirement Completion (How the Contractor has complied with or will comply with the requirement statements within the Deliverable) 4. Validation Method (The method the Contractor used to validate Deliverable compliance) 5. The Contractor's QA Manager sign-off on compliance Appendix 3—Associated Artifacts Description: An extract from the Project Artifact Inventory List of artifacts associated with this Deliverable, and will include but is not limited to the following examples: 1. Artifact Name 2. Associated Parent DEL 3. State Approver 4. SI Point of Contact 5. Review Frequency 6. Submission Frequency 7. Artifact File Format 8. Artifact Location (e.g., SharePoint breadcrumb) 9. Link to artifact

6.15.2 Problem Management Execution

Table 6-49: Problem Management Execution

Req #	SOW Requirement
6.15.2-01 (new)	The Contractor shall staff, manage, lead and execute all Problem Management activities on CalHEERS as defined in this Statement of Work and in accordance with the CD-6.15-1 – Problem Management Plan.
6.15.2-02 (existing)	If the Contractor fails to deliver Deliverables or to provide Services which satisfy Contractor's obligations hereunder, the State may provide Notice to the Contractor of such failure. If the Contractor fails to correct such failure within 30 Days of the date of such Notice, the State shall have the right to withhold payments due hereunder for the Deliverables or Services which the Contractor has failed to deliver or provide as required in the Contract, respectively, in the State's reasonable judgment.

Req #	SOW Requirement
6.15.2-03 (existing)	The Contractor shall be responsible to proactively provide reports on problems, including statistics on total number of problems, outstanding problems, and resolution time. Investigate, verify, record, and report Hosting, Hardware, and System nonperformance or downtime, and Software errors.
6.15.2-04	~~Intentionally Left Blank~~
6.15.2-05 (existing)	The Contractor shall be responsible to promptly document reported problems upon receipt, and monitor, control, communicate, and report on each problem until it is resolved and/or completely corrected.
6.15.2-06 (existing)	The Contractor shall maintain appropriate and timely communications with the State and affected users on all problems through resolution.
6.15.2-07 (modified)	The Contractor shall expedite handling of problems that are of high business priority as defined in the Problem Management Plan and the Defect Management Plan.
6.15.2-08 (modified)	The Contractor shall work with the State to prioritize and resolve problems.
6.15.2-09 (modified)	The Contractor shall correct all problems. A problem will not be considered corrected until the Contractor receives validation from the State that the issue is resolved to the State's satisfaction (confirmation from the individual that first reported or owns the problem or an appropriate State designee).
6.15.2-10 (new)	The Contractor shall collaborate with the State to develop and maintain any new Project Artifacts necessary to support this section. New artifacts shall be added to the Project Artifacts Repository and managed in accordance with the Project Artifact process.

6.16 HELP DESK SERVICES

The Contractor will perform the Help Desk activities described in this section.

Table 6-50: Help Desk Ticket Resolution Process (CD-6.16-1)

Req #	SOW Requirement
6.16-01 (modified)	The Contractor shall adopt, enhance, deliver, and maintain a CD-6.17-1 - Help Desk Ticket Resolution Process, which includes but is not limited to: 1. INTRODUCTION 1.1 Purpose 1.2 List of Reference Documents 1.3 Audience 2. SUMMARY 2.1 Scope 2.2 Out of Scope 3. APPROACH TO DESKTOP SUPPORT 4. ASSUMPTIONS, CONSTRAINTS, AND RISKS 4.1 Assumptions 4.2 Constraints 4.3 Risks 5. REQUIREMENTS 6. ROLES AND RESPONSIBILITIES 6.1 Roles and Responsibilities 6.1.1 Contractor Roles and Responsibilities 6.1.2 State Roles and Responsibilities 7. DESKTOP TICKET PROCESSING 7.1 Process 7.1.1 Ticket Request Received 7.1.2 Assignment and Prioritization 7.1.3 Investigation and Diagnosis

Req #	SOW Requirement
	7.1.4 Resolution, Communication, and Closure 7.1.5 Post-Resolution Review 7.2 Ticket Types 7.2.1 Case Tickets 7.2.2 Task Ticket 7.2.2.3 Ticket Creation - CAB Tickets (Change Request) 8. DESKTOP SUPPORT KEY TASK AREAS 8.1 Process Guides 8.2 Deployment 8.3 Troubleshooting 8.3.1 Repair 8.3.2 Replacement 8.4 Equipment Return Process 8.5 E-Waste 8.6 Maintenance and Updates 9. ONBOARDING/OFFBOARDING PROCESS AND MANAGEMENT 9.1 Process 9.2 Other Activities 9.2.1 Licensing 9.2.2 Groups and Permissions 9.2.3 Equipment Rollout 9.2.4 Desktop Orientation 10. DESKTOP SUPPORT MANAGEMENT TOOLS 10.1 GoToAssist 10.2 ServiceNow 10.3 Asset Management Tool 11. MICROSOFT O365 11.1 O365 Admin Center 11.2 Exchange 11.2.1 Mail Flow Rules 11.3 Security and Compliance 11.3.1 DLP Policy 12. GLOSSARY AND ACRONYMS 12.1 New Acronyms and Terms APPENDIX 1: SOW TO DELIVERABLE TRACEABILITY CHECKLIST APPENDIX 2: DELIVERABLE COMPLIANCE AND VALIDATION CHECKLIST APPENDIX 3: ASSOCIATED ARTIFACTS
6.16-02 (new)	The Contractor shall staff, manage, lead and execute Help Desk activities on the CalHEERS as defined in this Statement of Work and in accordance with the CD-6.16-1 – Help Desk Ticket Resolution Process.
6.16-03 (new)	The Contractor shall only alter or modify this Deliverable's structure or content with the approval of the State Project Director or designee.
6.16-04 (existing)	The Contractor shall intake, prioritize, manage and resolve desktop support issues, submitted via an IT service management issue tracking system, including but not limited to: 1. Initial imaging and reimaging of laptops 2. Hardware & Software installation and updates, access (e.g., password resets), maintenance, and support 3. Wi-Fi and VPN access issues 4. Maintenance of Contractor-managed distribution list
6.16-05 (existing)	The Contractor shall intake, prioritize, manage, and resolve the desktop support issues, not submitted via phone, email, or in person if staff are unable to log into their laptop or access the IT service management issue tracking system.

Req #	SOW Requirement
6.16-06 (existing)	The Contractor shall provide asset destruction services, including: 1. The identification of assets that should be decommissioned 2. Provide information and options to help facilitate the State's decision to destroy, transfer ownership, or place into a State reuse program 3. Coordinate the facilitation of the State's decision 4. Update the asset management tracking system, as appropriate
6.16-07 (existing)	The Contractor shall conduct roll-on support services, which include at a minimum, the following activities: 1. Equipment preparation, including: a. Laptop imaging with current Software and Hardware peripherals b. Installation of monitors and docking stations in their workspace or office c. Installation of State-approved non-standard Software and Hardware as identified on their roll-on form 2. Clean work area prior to use, wiping down work surfaces, cleaning chairs, removing any trash/debris, ensuring name plates are level, and providing roll-on documentation 3. First day support, including: a. Logon verification b. Outlook password setup c. SharePoint access verification d. Other access as required for their duties e. Printer set-up f. Provide CalHEERS building badge/access. g. CalHEERS Equipment Check-in/Check-out form completion
6.16-08 (existing)	The Contractor shall conduct roll-off support services, which include at a minimum, the following activities: 1. Removal of all access required, including: a. System/Server/VPN access b. Email account c. CalHEERS building badge/access 2. Blocking account sign-in 3. Removal of email contacts 4. Removal of licenses from the Microsoft Exchange 5. Equipment retrieval, including: a. Laptops b. Monitors c. Docking stations d. Other computer accessories 6. Equipment Check-in/Check-out form completion 7. Clean work area prior after use, wiping down work surfaces, cleaning chairs, removing any trash/debris, ensuring name plates are level 8. Laptop drive wipe and reuse preparation 9. Placement of equipment in storage
6.16-09 (existing)	The Contractor shall manage an email inbox that collects all blocked spam emails, confirming with the CalHEERS Project staff the spam designation.
6.16-10 (<u>modified</u>)	The Contractor shall provide security patching via Microsoft System Center Configuration Manager (SCCM) monthly <u>or current tool</u> , when <u>requested</u> by the State Project Director or designee.
6.16-11 (existing)	The Contractor shall conduct print server management, including reviewing Network monitoring reports to identify printer/print server outages.
6.16-12 (existing)	The Contractor shall execute Data Loss Protection (DLP) services weekly, monitoring staff file transmissions for excessive file upload/downloads, and take follow-on action if necessary.

Req #	SOW Requirement
6.16-13 (existing)	The Contractor shall update the Access Control Log Report quarterly (January, April, July, and October) and deliver to the State Project Director or designee.
6.16-14 (modified)	The Contractor shall provide the following <u>components</u> at the Project Worksites, or as requested by the State: - State staff laptops configured with the following Software, <u>or most current configuration</u>, at a minimum: - Windows - Office 365 (including Project and Visio) - Teams - Chrome - Symantec VIP - Adobe Acrobat (Professional or Reader, determined by the State) - MS Silverlight - Oracle Java - VPN Global Protect Software - Laptops with copies of all Software and Software licenses used in development, testing and maintenance. - Servers and all Software to support administration, development, testing and maintenance and additional servers as needed. - Current number of networked printers located throughout the Project Worksite(s) and any additional network printers as needed.
6.16-15 (existing)	The Contractor Desktop Support Team shall, upon the State's identification of an IT scenario that calls for collaboration with the State's IT Support Team, interact and assist the State in resolving the issue.
6.16-16 (new)	The State identifies and associates the following artifacts to the Desktop Ticket Resolution Process. The Contractor shall adopt, update, maintain, and deliver these artifacts in accordance with Appendix 3 of this <u>Deliverable</u> including, but not limited to: - CalHEERS Getting Help from Service Desk - CalHEERS Support Request Guide - Desktop Support Annual Audit Process guide - Desktop Support Flexera Actions Process Guide - Desktop Support Management of Active Directory (AD) Process Guide - Job Aid: Using CalHEERS ServiceNow for Fulfillers - Job Aid: Using CalHEERS ServiceNow for Requesters - Job Aid: CalHEERS ServiceNow MFA Quick Reference Guide (QRG) - Job Aid: Reset the CalHEERS ServiceNow Password - SOP on Automated Call Distribution System. Amazon Connect - Submitting a Support Ticket Step by Step - The Service Now (SNOW) Ticket Management System <u>UserCreation_SalesforceSOP</u> <u>Access Control Log Report</u>
6.16-17 (new)	The Contractor shall adopt and maintain all Project Artifacts that are associated with this Deliverable in the Project Artifact Inventory and manage them in accordance with the Project Artifact process.
6.16-18 (new)	The Contractor shall collaborate with the State to develop and maintain any new Project Artifacts necessary to support this section. New artifacts shall be added to the Project Artifacts Repository and managed in accordance with the Project Artifact process.

Req #	SOW Requirement
6.16-19 (new)	The Contractor shall update the following appendices and attach them to the Desktop Ticket Resolution Process: Appendix 1—SOW to Deliverable Traceability Checklist Description: A table where the Contractor identifies the SOW requirements for this Deliverable, as specified within SOW Section 8, DELIVERABLES, and includes but is not limited to: 1. SOW Requirement ID # 2. SOW Requirement Text 3. Requirement Traceability (Contractor identified traceability from the requirements to the Deliverable) 4. Requirement Fulfillment (Define how the Contractor has fulfilled the SOW requirements in the Deliverable) Appendix 2—Deliverable Compliance and Validation Checklist Description: A QA Checklist that includes, but is not limited to: 1. Deliverable Section Number and Title 2. Deliverable Requirement Statement(s) 3. Requirement Completion (How the Contractor has complied with or will comply with the requirement statements within the Deliverable) 4. Validation Method (The method the Contractor used to validate Deliverable compliance) 5. The Contractor's QA Manager sign-off on compliance Appendix 3—Associated Artifacts Description: An extract from the Project Artifact Inventory List of artifacts associated with this Deliverable, and will include but is not limited to the following examples: 1. Artifact Name 2. Associated Parent DEL 3. State Approver 4. SI Point of Contact 5. Review Frequency 6. Submission Frequency 7. Artifact File Format 8. Artifact Location (e.g., SharePoint breadcrumb) 9. Link to artifact

6.17 HOSTING SERVICES

6.17.1 Hosting Services Plan

The Hosting Services Plan provides operational and cloud-based service requirements for CalHEERS.

Table 6-51: Hosting Services Plan (CD-6.17-1)

Req #	SOW Requirement
6.17.1-01 (modified)	The Contractor shall adopt, enhance, deliver, and maintain the CD-6.17-1 - Hosting Service Plan, which includes but is not limited to: 1. INTRODUCTION 1.1 Purpose 1.2 List of Reference Documents 1.3 Audience

Req #	SOW Requirement
	2. SUMMARY 2.1 Scope 3. APPROACH 3.1 Cloud Environments Terminology 4. ASSUMPTIONS, CONSTRAINTS, AND RISKS 4.1 Assumptions 4.2 Constraints 4.3 Risks 5. REQUIREMENTS 6. ROLES AND RESPONSIBILITIES 6.1 Cloud Services (AWS, Google, etc.) 6.1.1 AWS Regions and Availability Zones 6.1.2 Software as a Service (SAAS) tools (Salesforce, etc.) 6.2 Cloud System Updates and Maintenance 6.2.1 Resource Provisioning 6.2.2 Image management 6.2.3 Resource Orchestration 6.2.4 Monitoring pattern 6.2.5 Tagging Pattern 6.3 Processes, Procedures and Best Practices 7. GLOSSARY AND ACRONYMS 7.1 New Acronyms and Terms APPENDIX 1: SOW TO DELIVERABLE TRACEABILITY CHECKLIST APPENDIX 2: DELIVERABLE COMPLIANCE AND VALIDATION CHECKLIST APPENDIX 3: ASSOCIATED ARTIFACTS APPENDIX 4: AWS DATA CENTER CONTROLS
6.17.1-02 (new)	The Contractor shall staff, manage, lead, and execute Hosting Services activities on the CalHEERS as defined in this Statement of Work and in accordance with the CD-6.17-1 – Hosting Services Plan.
6.17.1-03 (new)	The Contractor shall only alter or modify this Deliverable's structure or content with the approval of the State Project Director or designee.
6.17.1-04 (new)	The Contractor shall ensure that the Cloud Hosting Solution for CalHEERS includes a multi-region recovery capability <u>(or other option as approved by the Project Director or designee), that includes at least one non-west coast region.</u>
6.17.1-05 (new)	The State identifies and associates the following artifacts to the CD-6.178-1 - Hosting Service Plan. The Contractor shall adopt, update, maintain, and deliver these artifacts in accordance with Appendix 3 of this deliverable including, but not limited to: • ABE Service Account Password Change • Add Domain to EM12c • Add_Remove Servers from OTD_SOP • Akamai_Purging • Analyse_OHS_Logs • Autosys Service Account Password Change • Autosys Service Account Password Change for PROD_Nonprod_DR • Batch Incident Management Document • CalHEERS - AWS Mgmt Console Access Setup Guide • Cannot Start Agent Out of Memory Error • Change Metric Thresholds in EM13c • Change the EM Password • Change_threads_sbconsole_SOP • Check EHIT EDR Processing Times in EM • Check for hogging threads • Checking_Weblogic_Patching_Versions_12c • Create Backout in EM12c

Req #	SOW Requirement
	• Disable Specific Pollers Using EM13c • Downloading Agent Logs • EHIT Event Response • EnableDisable Pollers on OSB Console • Executing Batch Job from Batch Server • Failure Resolution Document • Headless Dashboard - Start_Stop the Dashboard Server • How to change service account passwords • How to Collect and Process Monthly Operations Metrics • How to Configure Incident Management Ruleset • How to create Alerts in RUEI • How to Diagnose Oracle API Gateway (OAG) Manager Errors • How to download agent logs • How to find the count for ahbx_errors • How to find the highest failing pages in RUEI • How to Fix Template Syncing Failures • How to Install and Configure OPA_OPM • How to Manage blackouts in Enterprise • How to Mitigate Application Contention due to Database Resource Contention • How to Push Akamai WAF (Web Application Firewall) Deployments • How to schedule a job to disable all Pollers • How to setup Named Credentials in EM12c • How to start OAG services • How To StartStop Autosys servers • How to use LogRhythm tool • JAWS-Job Access With Speech • KA-ChangeEMPASSWORD • Linux Patching • Log Ingestion- Splunk - Add a New Input OR App and Server Class • Monitoring • Named Credentials in EM12c • OAM Policy deployment failure leads to failed deployment of oam_server and few other components • OS patching on Windows_SOP • Password Change for eiamadmin in Autosys • PCR Process Document • PROD Service Account Password Change Run book • Production Splash Configuration • Production Start and Stop Procedure • ProductionPre-PostDeployment • Refresh Domains in EM13c • SOP - 150 CR Server Provisioning • Special Batch Cycles Handling Document • Start_Restart_Stop Agent within EM12c • Start_Stop Autosys Servers • Update the Splunk Security Incident Log • WebLogic Admin Console Password change • Windows Patching_On-Prem
6.17.1-06 (new)	The Contractor shall adopt and maintain all Project Artifacts that are associated with this Deliverable in the Project Artifact Inventory and manage them in accordance with the Project Artifact process.

Req #	SOW Requirement
6.17.1-07 (new)	The Contractor shall collaborate with the State to develop and maintain any new Project Artifacts necessary to support this section. New artifacts shall be added to the Project Artifacts Repository and managed in accordance with the Project Artifact process.
6.17.1-08 (new)	The Contractor shall update the following appendices and attach them to the Hosting Service Plan: Appendix 1—SOW to Deliverable Traceability Checklist Description: A table where the Contractor identifies the SOW requirements for this Deliverable, as specified within SOW Section 8, DELIVERABLES, and includes but is not limited to: 1. SOW Requirement ID # 2. SOW Requirement Text 3. Requirement Traceability (Contractor identified traceability from the requirements to the Deliverable) 4. Requirement Fulfillment (Define how the Contractor has fulfilled the SOW requirements in the Deliverable) Appendix 2—Deliverable Compliance and Validation Checklist Description: A QA Checklist that includes, but is not limited to: 1. Deliverable Section Number and Title 2. Deliverable Requirement Statement(s) 3. Requirement Completion (How the Contractor has complied with or will comply with the requirement statements within the Deliverable) 4. Validation Method (The method the Contractor used to validate Deliverable compliance) 5. The Contractor's QA Manager sign-off on compliance Appendix 3—Associated Artifacts Description: An extract from the Project Artifact Inventory List of artifacts associated with this Deliverable, and will include but is not limited to the following examples: 1. Artifact Name 2. Associated Parent DEL 3. State Approver 4. SI Point of Contact 5. Review Frequency 6. Submission Frequency 7. Artifact File Format 8. Artifact Location (e.g., SharePoint breadcrumb) 9. Link to artifact
6.17.1-09 (new)	The Contractor shall accurately document the description of all <u>Services</u> and service elements needed to support the CalHEERS in the cloud. The Plan must include but not be limited to: 1. Configuration schematic showing all elements. 2. Description of all storage and available capacity and owner. 3. Projected response times using the production environment and associated calculations. 4. Contingency plans for acquisition and installation of all elements in case of schedule delay. 5. The detailed maintenance contracts for all cloud accounts and elements (where applicable). 6. Forecasted growth and current usage on all hosting service elements.

Req #	SOW Requirement
6.17.1-10 (new)	The Contractor shall collaborate with the State to update the Hosting Services Plan to incorporate similar asset management processes as described for the Hardware/Software components (Section 6.14) for things such as but not limited to: 1. Reporting of cloud services components 2. Mechanisms for providing cohesive summary of component information 3. Mechanisms for keeping track of the fixed budget and summary of information useful for managing costs and communicating variances accurately. 4. Tracking and management of EULAs.

6.17.2 Hosting Services Requirements

Table 6-52: Hosting Services Requirements

Req #	SOW Requirement
6.17.2-01 (existing)	The Contractor shall provide to the State Hosting Services through the System for 24 hours per day, 7 days per week throughout the term of this Contract. The System and Hosting Services shall be available 24 hours a day except during scheduled System maintenance as agreed in advance. Such maintenance shall not be during the hours of 8:00 a.m. to 9:00 p.m. Pacific time (PT).
6.17.2-02 (existing)	The Contractor shall provide at least 48 hours advance notice to the CalHEERS Management in the event of a scheduled downtime in excess of 15 minutes except in the case of an emergency where immediate action by the Contractor is required. The Contractor shall minimize any disruption, inaccessibility and/or inoperability of the Hosting Services. For the avoidance of doubt, this scheduled System maintenance does not apply to the Contractor's core network maintenance which is performed on the System between 9:00 p.m. and 8:00 a.m. PT during which the Contractor may perform scheduled maintenance of the core network and the expected actual duration of which the Contractor will give the State reasonable prior written notice.
6.17.2-03 (existing)	The Contractor shall represent to the State that it has covenants and that it shall maintain a: - Technology Recovery (TR) plan and the necessary resources and capabilities covering the data center facilities used by Contractor to fully perform the Services under this Contract, such that Contractor' performance under this Contract would not be adversely affected if Contractor's hosting environment or data center facilities were rendered inoperable or inaccessible ("TR Plan"); and - Business Continuation (BC) plan and the necessary resources and capabilities required to fully perform the Services under this Contract, such that the Contractor' performance under this Contract would not be adversely affected if the Contractor's facilities where the Services are performed became inoperable or inaccessible ("BC Plan"). The TR Plan and the BC Plan, or reasonable summaries thereof to enable the State to verify the sufficiency of each such Plan, will be made available to the State for review upon the State request. At least annually or more frequently as may be conducted, the Contractor shall provide a copy to the State that includes but is not limited to: - The extent they perform such review, the Contractor's auditors' report, or portions thereof applicable to the State's business; and - Any other review conducted by a third party, including, without limitation, regulatory agencies, public or private certification entities such as the International Standards Organization, but excluding such reviews conducted by other customers of the Contractor. The State acknowledges that such reports provided by Contractor under this Section shall be considered the Contractor's Confidential Information. Provided, however, the State may disclose such reports to the auditors and regulators having jurisdiction over the CalHEERS System.

Req #	SOW Requirement
6.17.2-04 (modified)	<u>The Contractor shall provide the State with an isolated Hardware, Cloud Services, and Software environment.</u> The Contractor shall procure and maintain the Hardware, <u>Cloud Services, and System Software</u> and other <u>Third-Party</u> Software, data feeds, telecommunications, networks, peripherals and other items and services (collectively referred to as "Third Party Products"), which comprise the specified configuration ("Specified Configuration") required at the hosting site and for updating the Specified Configuration in accordance with Contractor's published updates.
6.17.2-05	<u>Intentionally Left Blank</u>
6.17.2-06 (existing)	The Contractor shall <u>support System monitoring functions to include but not be limited to:</u> 1. Monitor systems for alerts, alarms, and events, including all alerts, alarms, and events that are handled through all of the in-scope monitoring tools. Alarms and alerts may be added or removed by the State any time, as they are needed, following standard TCMP or CR procedures. 2. Respond to alerts per standard trouble shooting and resolution procedures and escalate where required to the appropriate support group to ensure expeditious problem resolution. 3. Manage service interruption notification processes. Ensure the appropriate levels of leadership and technical personnel are aware at all times of problems that are impacting <u>System</u> availability. 4. Provide an operations interface into change management functions to ensure that proper operations and validation procedures are in place to implement scheduled changes. 5. Manage and maintain ownership of all server-related problems, including break fix activities such as the Contractor management, the Contractor escalation and coordination of technical operations support groups to expedite problem resolution and recovery activities. 6. Monitor interface architecture error logs for situations where alerts and events are not captured by automated tools due to inconsistencies in message formats. 7. Maintain operations documentation in all critical areas. This documentation will include checklists for critical functions such as server reboots and monitoring the successful completion of server backups (checking for tape <u>or other</u> errors and restarting backups as needed). Documentation will be kept current and will reflect changes as a result of new business and technical requirements.
6.17.2-07 (new)	The Contractor shall maintain FedRAMP Moderate Impact industry standard for cloud infrastructures.
6.17.2-08 (new)	The Contractor shall share all their true and actual costs with the State for all (including all known, planned, or unplanned) Cloud Service costs under this Contract identifying the True Cost of the service <u>and associate elements</u> .
6.17.2-09 (new)	The Contractor shall <u>invoice the State for hosting components at the True Cost.</u> The State reserves the right to shop for a better rate using other State-owned instances and other discounted rates, and if a better rate is found, the Contractor must charge no more than that rate.
6.17.2-10 (new)	The Contractor shall not charge a mark-up on assets procured by the State. For example, if the State decides to move to a State-procured hosting option due to better rates, the Contractor cannot charge any mark-up on those rates.
6.17.2-11 (new)	The Contractor shall provide the State access to view and customize all existing cloud-provider real-time reporting and shall provide (using self-serve option for the State, pulled from real-time data) additional custom reports and related data points, including but not limited to Contractor's True Costs, projected growth, planning data, savings plan in use (options for optimization), true and projected utilization, or other data as requested by the State.

Req #	SOW Requirement
6.17.2-12 (new)	The Contractor shall implement and maintain industry best practices to maximize System availability in the event of an unexpected outage or event (e.g., a disaster), ensuring there are a minimum of two (a primary and alternate) Data Centers in two separate regions <u>(or other option as approved by the Project Director or designee)</u>, established for the CalHEERS Production environments, according to the following conditions: • <u>The Alternate Data Center shall be in a geographically separate region (or other option as approved by the Project Director or designee), at a distance of 100 miles or more from the primary Data Center (ensuring that a major disaster impacting the primary location would not impact the alternate location).</u> • The CalHEERS Production environments shall be setup and maintained in a high-availability failover mode that utilizes the alternate Data Center to minimize any downtime if the primary location is impacted by a disaster. — Each of the primary and alternate locations shall be ready (with as little time as possible) to be used to implement a comp_ • lete CalHEERS Production environment recovery to a prior point in time if requested by the State (ranging from just prior to 14 calendar days prior to the disaster event). • If a prior point in time recovery is undertaken, the Contractor shall have a plan to avoid competing against (or being impacted by) other entities who also might be impacted by a disaster and are moving data to and/or from the same primary or alternate locations.
<u>6.17.2-13 (new)</u>	<u>The Contractor shall share their True Costs with the State for all (including all known, planned, or unplanned) Cloud Services costs under this Contract, identifying the True Cost of the item.</u>
<u>6.17.2-14 (new)</u>	<u>The Contractor shall not include any mark-up on assets procured by the State and shall perform all required activities as part of fixed cost just as they would when procured by Contractor.</u>
<u>6.17.2-15 (new)</u>	<u>The Contractor shall provide Cloud Services at the True Cost, no more than industry standard best available prices and avoid the use of resellers or other middle markup scenarios unless it is to obtain lower rates. Contractor shall not use a reseller that is an affiliated/partner, including marketplace alliances/business relationships, that add any additional cost to the State.</u>
<u>6.17.2-16 (new)</u>	<u>The Contractor shall pay the best possible rate for Cloud Services. The State reserves the right to shop for a better rate and, if one is found, the Contractor will charge no more than that rate.</u>

6.18 PROJECT SUPPORT SERVICES

The set of requirements below focus on the Project Worksites where the CalHEERS staff are located and other project support services which the State requires the Contractor to provide.

6.18.1 Project Worksite Maintenance Plan

Table 6-53: Project Worksite Maintenance Plan (CD-6.18-1)

Req #	SOW Requirement
6.18.1-01 (modified)	The Contractor shall adopt, enhance, deliver, and maintain the CD-6.18-1 - Project Worksite Maintenance Plan, which includes but is not limited to: 1. INTRODUCTION 1.1 Purpose 1.2 List of Reference Documents 1.3 Audience 2. SUMMARY

Req #	SOW Requirement
	2.1 Scope 3. APPROACH 4. ASSUMPTIONS, CONSTRAINTS, AND RISKS 4.1 Assumptions 4.2 Constraints 4.3 Risks 5. REQUIREMENTS 6. ROLES AND RESPONSIBILITIES 6.1 Roles and Responsibilities 6.1.1 Contractor Roles and Responsibilities 6.1.2 State Roles and Responsibilities 7. CALHEERS PROJECT WORKSITE FACILITIES 7.1 General approach to acquisition, preparation, and installation of existing CalHEERS Project Worksites 7.2 General approach to securing, preparing, modifying, and maintaining CalHEERS Project Worksites upon request by State 7.3 Defined Supply List 7.4 Tools and components 7.5 Workspace Blueprints, planned leasehold improvements, and hardware component footprints 7.6 Project Worksites' Checklist of Requirements 8. WORK PLAN FOR PROJECT WORKSITE ACQUISITION, PREPARATION, AND INSTALLATION TASKS AND MILESTONES 9. PROCESS GUIDES FOR PROJECT SUPPORT SERVICES 10. ROLL ON INFORMATION 11. GLOSSARY AND ACRONYMS 11.1 New Acronyms and Terms APPENDIX 1: SOW TO DELIVERABLE TRACEABILITY CHECKLIST APPENDIX 2: DELIVERABLE COMPLIANCE AND VALIDATION CHECKLIST APPENDIX 3: ASSOCIATED ARTIFACTS
6.18.1-02 (new)	The Contractor shall only alter or modify this Deliverable's structure or content with the approval of the State Project Director or designee.
6.18.1-03 (new)	The State identifies and associates the following artifacts to the Project Worksite Maintenance Plan The Contractor shall adopt, update, maintain, and deliver these artifacts in accordance with Appendix 3 of this deliverable including, but not limited to: • Facility Asset Inventory Reports • Access Requests Standard Operating Procedure (SOP) • Access your email with CalHEERS Outlook Web Access (OWA)_StepbyStep • AD Password Reset Instructions • AV Room Placemat • Badge Process and IRS Guidelines.doc • Building Access and Bathroom Codes_QuickReference.doc • CalHEERS - ALM User Guide • CalHEERS - AWS Management Console Access Setup Guide.doc • CalHEERS Email Password Change Guide • CalHEERS Email QRG • CalHEERS Emergency Procedures Quick Reference • CalHEERS External Badge Request SOP_SI • CalHEERS Getting Help from Service Desk • CalHEERS GlobalProtect Setup QRG • CalHEERS High Level Roll On Process Guide • CalHEERS MFA ServiceNow FAQs • CalHEERS MFA ServiceNow QRG • CalHEERS Microsoft Anti-Virus SCCM Process Guide

Req #	SOW Requirement
	• CalHEERS Monthly Printer Usage Meter 2022 • CalHEERS MS Teams Initial Setup_State Team Members • CalHEERS O365 SP Password Reset Guide • CalHEERS Password Reset • CalHEERS Printer Set Up Process Gude • CalHEERS Project - New Joiner Security Awareness Orientation • CalHEERS Roll Off Process Guide • CalHEERS Roll-On Cheat Sheet • CalHEERS Security Best Practices Primer • CalHEERS ServiceNow Login-Troubleshooting • CalHEERS Support Team Responsibilities • CalHEERS Vendor Contact List • CalHEERS Virtual Private Network Step-by-Step • CalHEERS VPN Installation User Process Guide • CalHEERS Web Printing Set Up Process Guide • CalHEERS Wipe Drive Processs Guide • CalHEERS_BeyondTrust_Standard_Operating_Procedure • CalHEERS_Facilities_Challenge Tracker • CampusPrintService • CCURE Badge In Report • Deloitte Facilities Badging Process Guide • Desk Phone Setup • Desk Quick Reference Guide.pptx • Desktop Support Annual Audit Process Guide • Desktop Support Flexera Actions Process Guide • Desktop Support Ticket Resolution Flow • Emergency Fire Drill Coordination_StepbyStep • Facilities Badging Process Guide • Facilities BRIVO System Process Guide • Facilities CCURE Process Guide • Facilities CDP Report Process Guide • Facilities Overview • Facilities Transition FAQs • Fax Machine Process Guide • Monthly Badge Log Review • Flexera Training Agenda Process Guide • Global Protect Deployment • GMT20230719-140306_Recording.m4a • GMT20230719-140306_Recording.transcript (1).vtt • GMT20230719-140306_Recording_2042x1200.mp4 • Guide to Creating a HP-ALM Process Analysis View • Guide to Creating a HP-ALM Summary Analysis View • Half Dome_EI Cap_AV Process Guide • How to configure a shared mailbox_StepbyStep • How to grant Permission to a Shared Mailbox_StepbyStep • HP Universal Printer Driver Install • Install and Use the CalHEERS Virtual Private Network Client_Step-by-Step • Job Aid - Reset the CalHEERS ServiceNow Password • Job Aid - Using CalHEERS ServiceNow for Requesters • Job Aid – Using CalHEERS ServiceNow for Fulfillers • KeePass Setup_2022_StepByStep • Making Appointments Private_StepbyStep

Req #	SOW Requirement
	• Making your Calendar Editable by Others_StepByStep • Microsoft O365 E5 License Upgrade SOP • Microsoft Teams • Microsoft Teams Quick Reference Guide • Office Etiquette Guidelines • Ordering Notice 129-B IRS Labels • Outlook Process Guide • Panic Alarm Button Semi-Annual Test Procedure • Panic Button Process Guide • Pano (No Tablet) Process Guide • Password Management and Security Best Practices • Poly G7500 BYOD Reference Guide • Polycom Conference Unit • Pulling Reports from Flexera Process Guide • Raising a Support Ticket in Flexera Community Process Guide • Roles and Responsibilities • Roll Off • RTC - How to submit a Service Ticket • Run_a_custom_report • Scan to Email • Sending an Encrypted CalHEERS email_StepbyStep • Service Level Management (SLM) Process • Setting up AD & VPN Overview • SharePoint Password Guide • Sharing Calendars_StepByStep • SOP -Installing Global Protect Client • Submitting a Support Ticket Step by Step • Symantec VIP Authentication_StepbyStep • TEMPLATE Visitor Log_Temp Badge • Tools and Password Support Guide • Use of Tools (EWM, Ad Hoc Reporting (OBIEE) , ALM, Flexera) • Verizon Troubleshooting Process Guide • Verizon user Setups and Reset Process Guide • Verizon User Setups and Resets Process Guide • Video Conferencing Quick Reference Guide • Video Intercom Process Guide • Web Printing Set Up Process Guide
6.18.1-04 (new)	The Contractor shall update the CD-6.18-1 – Project Worksite Maintenance Plan <u>Deliverable</u> with the process for development and maintenance of the Facility Asset Inventory Report (non-technical).
6.18.1-05 (new)	The Contractor shall adopt and maintain all Project Artifacts that are associated with this Deliverable in the Project Artifact Inventory and manage them in accordance with the Project Artifact process.
6.18.1-06 (modified)	The Contractor shall update the following appendices and attach them to the Project Worksite Maintenance Plan: Appendix 1–SOW to Deliverable Traceability Checklist Description: A table where the Contractor identifies the SOW requirements for this Deliverable, as specified within SOW Section 8, DELIVERABLES, and includes but is not limited to: 1. SOW Requirement ID # 2. SOW Requirement Text

Req #	SOW Requirement
	3. Requirement Traceability (Contractor identified traceability from the requirements to the Deliverable) 4. Requirement Fulfillment (Define how the Contractor has fulfilled the SOW requirements in the Deliverable) Appendix 2—Deliverable Compliance and Validation Checklist Description: A QA Checklist that includes, but is not limited to: 1. Deliverable Section Number and Title 2. Deliverable Requirement Statement(s) 3. Requirement Completion (How the Contractor has complied with or will comply with the requirement statements within the Deliverable) 4. Validation Method (The method the Contractor used to validate Deliverable compliance) 5. The Contractor's QA Manager sign-off on compliance Appendix 3—Associated Artifacts Description: An extract from the Project Artifact Inventory List of artifacts associated with this Deliverable, and will include but is not limited to the following examples: 1. Artifact Name 2. Associated Parent DEL 3. State Approver 4. SI Point of Contact 5. Review Frequency 6. Submission Frequency 7. Artifact File Format 8. Artifact Location (e.g., SharePoint breadcrumb) 9. Link to artifact

6.18.2 Project Worksite Maintenance Execution

The Contractor is responsible for providing the project worksites required to maintain and operate CalHEERS. The State would like to house staff in the Gateway Oaks Campus, throughout the term of the Contract, to reduce potential impact to administering the CalHEERS.

Table 6-54: Project Worksite Maintenance Execution

Req #	SOW Requirement
6.18.2-01 (new)	The Contractor shall staff, manage, lead and execute all Project Worksite Maintenance activities on CalHEERS as defined in this Statement of Work and in accordance with the CD-6.18-1 – Project Worksite Maintenance Plan.
6.18.2-02 (modified)	The Contractor shall acquire, equip, provide, manage and operate the appropriate number and types of Project Worksites needed to successfully operate CalHEERS, including at a minimum the following: 1. Gateway Oaks Campus (Primary Project Worksite) - located within 5 miles of the OTSI Headquarters located at 2870 Gateway Oaks, Sacramento, CA 95833 2. Offshore Development Facility 3. Print & Mail Facility (Contractor is responsible for Subcontractor facilities)
6.18.2-03 (existing)	The Contractor is responsible for the purchase, lease/rent, or subcontract, and operation of all Project Worksites necessary to administer the CalHEERS. The Contractor shall provide, at a minimum, the following goods and services for each Project Worksite, not part of a subcontract, in coordination with property management: 1. Utilities 2. Leasehold improvements (including State requests) 3. Insurance

Req #	SOW Requirement
	4. Janitorial Services 5. Lighting maintenance 6. Window Cleaning (interior/exterior) 7. Fire extinguisher checks 8. Telephone System, including communication lines with service providers 9. LAN/WAN & connectivity 10. Secured wireless and remote access 11. Office equipment installation and maintenance 12. HVAC services and maintenance 13. Plumbing maintenance 14. Security cameras and patrol services 15. Storage
6.18.2-04 (existing)	The Contractor shall be responsible for all costs related to the operation of all Project Worksites used to administer the CalHEERS, for the term of the Contract, providing detailed invoices and any supporting documentation requested by the State.
6.18.2-05 (modified)	The Contractor shall obtain a lease, takeover the existing lease from the previous contractor, or purchase the Gateway Oaks Campus (Primary Project Worksite) so that State staff, Contractor staff and other staff authorized by OTSI are able to effectively administer the CalHEERS. The Gateway Oaks Campus consists of the following: • 2329 Gateway Oaks Drive, Suites 100 & 250, Sacramento, CA 95833: - o Suite 100 (32,204 rentable sq. ft.) - o Suite 250 (5,763 rentable sq. ft.)
6.18.2-06 (modified)	The Contractor shall ensure the lease for the Gateway Oaks Campus (Primary Project Worksite) includes all services provided by Property Management under the current/previous contract, including but not limited to: 1. Utilities, (e.g., water & electrical power) at all Project Worksites 2. Leasehold Improvements (including State requests) 3. Insurance 4. Janitorial services, including but not limited to: a. vacuuming, damp mopping of hard floors, wipe down of common area surfaces and conference rooms, garbage removal, clean/restock restrooms, ad hoc requests and potential for extended support on weekends and late nights when requested. The Janitorial services shall also detail Project Worksites (cleaning carpet edges and dusting approximately 1/4 of each Project Worksite) weekly. 5. Lighting services (e.g., replacement of light bulbs when they go out) 6. Window cleaning services (interior/exterior) 7. Yearly inspection of Fire Extinguishers and updating of tags 8. Phone system/Communication Lines & Providers 9. LAN/WAN & Connectivity 10. Secured wireless & remote access 11. Office equipment 12. HVAC Services, (e.g., maintenance, repair, addressing when Project Worksites are too hot or too cold) a. Changing the server room air filter, checking air flow, and making sure the system is working properly on a quarterly basis. 13. Plumbing Services, (e.g., clogged drains in breakrooms or bathrooms) 14. Security cameras & Security patrol services, including: a. Security escorts between the buildings/suites, when requested b. Security escorts from buildings/suites to staff vehicles, when requested 15. Enough parking spaces (based on occupancy, potential visitors, and in compliance with ADA)

Req #	SOW Requirement
6.18.2-07 (existing)	The Contractor shall, in the event the Contractor is unable to provide the Gateway Oaks Campus as the Primary Project Worksite, provide similar facility(ies) that meet all applicable requirements within this statement of work, and are located within 15 miles of the OTSI Headquarters located at 2970 Gateway Oaks, Sacramento, CA 95833.
6.18.2-08 (existing)	The Contractor shall ensure the Gateway Oaks Campus (Primary Project Worksite) provides office space at least equal to that provided in the current Gateway Oaks Campus. This includes, at a minimum, work areas (e.g., cubicles, offices, shared spaces) for the following number of on-site project staff: 1. One hundred and forty (140) State staff 2. Contractor Staff (subject to space availability and Contractor need) The Contractor shall modify and/or reconfigure workspaces, at the direction of the State Project Director or designee, to meet specific job requirements and/or business needs of the Project.
6.18.2-09 (existing)	The Contractor shall ensure the Gateway Oaks Campus (Primary Project Worksite) provides the State with a State Secured Area, separate and distinct from the Contractor via badge access, configured and furnished (including office equipment) for up to fifteen (15) State or State Contractor Staff. The State Secured Area must have a minimum of two private offices with locking offices.
6.18.2-10 (existing)	The Contractor shall ensure the Gateway Oaks Campus (Primary Project Worksite) includes a minimum of twenty-two (22) individual locking offices dedicated for State use, allocation to non-State staff must be approved by the State Project Director, or designee.
6.18.2-11 (modified)	The Contractor shall ensure the Gateway Oaks Campus (Primary Project Worksite), includes at a minimum, the following: 2329 Gateway Oaks: 1. One (1) large conference room with the capacity to seat 65 people at or around tables and accommodate at least 125 people absent of tables 2. Two (2) large conference rooms with a capacity to seat 25 3. Three (3) conference rooms with a capacity to seat 16 4. Three (3) conference rooms with a capacity to seat 8
6.18.2-12 (existing)	The Contractor shall ensure the Gateway Oaks Campus (Primary Project Worksite) includes at least six (6) private areas/study booths, each providing enough space for two (2) individuals to work, facilitate confidential phone calls or discussions, or hold private one-on-one meetings.
6.18.2-13 (existing)	The Contractor shall ensure the Gateway Oaks Campus (Primary Project Worksite) includes, at a minimum, one (1) wellness/lactation room containing a lounge chair, refrigerator, and countertop surface with a sink.
6.18.2-14 (existing)	The Contractor shall ensure the Gateway Oaks Campus (Primary Project Worksite) provides a dedicated space or room for a minimum of 20 testing staff.
6.18.2-15 (existing)	All <u>project workspaces</u> that host <u>State servers</u> , <u>State Data</u> , and central print equipment ~~shall have, shall have~~ at a minimum, physical security measures including secured doors and entry mechanisms and locked <u>server</u> rooms with floor-to-ceiling walls. Site entrance doors and doors to <u>server</u> rooms must always be secured and shall have an <u>auditable</u> entry mechanism (e.g., card reader) that records all entries and departures.
6.18.2-16 (existing)	The Contractor shall ensure that all hosting environments and data centers comply with data center and architecture requirements, standards, as well as federal and <u>State</u> regulations.
6.18.2-17 (existing)	The <u>project workspaces</u> shall have a break room with furnishings to meet the capacity of full-time staff (tables and chairs so staff can sit down to eat), and trash/recycling receptacles.
6.18.2-18 (existing)	The Contractor shall provide additional offices, conference rooms, breakout rooms, workspaces and furnishings related to any alternate or additional Project Worksite approved by the State Project Director, or designee, to support the project.
6.18.2-19 (existing)	All <u>project workspace(s)</u> , identified at Contract Execution or thereafter, shall be subject to prior written acceptance by the State Project Director, or designee.

Req #	SOW Requirement
6.18.2-20 (existing)	The Contractor shall, in the event an alternate or additional Project Worksite becomes necessary, provide the facility, all furniture, Equipment , Hardware , Software , Network connectivity and office supplies to support all staff located at the worksite.
6.18.2-21 (existing)	The Contractor shall not commence work at any Project Worksite without prior written authorization from the State Project Director, or designee.
6.18.2-22 (existing)	The Contractor shall be responsible for ensuring the Gateway Oaks Campus (Primary Project Worksite), and any other project worksite in California, comply with all applicable requirements, as determined by the State, regarding Americans with Disabilities Act (ADA), Disabled Veterans Business Enterprise (DVBE), and California Environmental Quality Act (CEQA) requirements, as well as applicable asbestos and lead criteria. The State may adopt such additional requirements, procedures and guidelines as it deems necessary and appropriate to best meet the needs of the State and the efficient and effective accomplishment of its responsibilities.
6.18.2-23 (existing)	The Contractor shall be responsible for ensuring that all project worksite(s) , other than the Gateway Oaks Campus (Primary Project Worksite) or other California project worksite(s) , meet the applicable local, State , and federal laws, codes, and regulations, or any applicable laws, building codes, or regulations that are applicable to the project worksite(s) location.
6.18.2-24 (existing)	The Contractor shall ensure that all project worksites include an adequate number of parking spaces for the on-site CalHEERS Project staff and meeting attendees, adjacent to the project worksite .
6.18.2-25 (new)	The Contractor shall collaborate with the State to develop and maintain any new Project Artifacts necessary to support this section. New artifacts shall be added to the Project Artifacts Repository and managed in accordance with the Project Artifact process.

6.18.3 Office Setup & Maintenance Execution

The requirements that follow define how the Contractor will initially setup and furnish, then maintain the CalHEERS Project Worksites.

Table 6-55: Office Setup & Maintenance Execution

Req #	SOW Requirement
6.18.3-01 (existing)	The Contractor shall setup, maintain and operate all Project Worksites for the term of the Contract, including, but not limited to, the following: 1. Purchase, lease or rental of each Project Worksite 2. Leasehold improvements of each Project Worksite 3. Insurance for each Project Worksite 4. Utilities of each Project Worksite 5. Maintenance and repairs of each Project Worksite 6. Janitorial services for each Project Worksite 7. Furniture installation and maintenance for each Project Worksite 8. Telephone System, including communication lines with service providers, for each Project Worksite 9. LAN/WAN installation and maintenance of each Project Worksite 10. Secured wireless (Wi-Fi) and remote (VPN) connectivity and Access for each Project Worksite 11. Security measures for each Project Worksite 12. Printers, high-speed printer/copiers, fax machines (and related supplies) at the Project Worksites 13. Office equipment installation and maintenance for the Project Worksites 14. Storage space, including document storage at the Project Worksites

Req #	SOW Requirement
6.18.3-02 (existing)	The Contractor shall furnish and maintain each conference room at the Gateway Oaks Campus (Primary Project Worksite) with the following: 1. White boards sized for the space (the minimum being the current size) 2. Monitors for the smaller conference rooms, sized so all meeting attendees can see what's presented, that are maintained with the necessary adapters for presentation capabilities and maintained by the Contractor 3. Ergonomic table(s) and chairs to match the capacity of each conference room 4. Voice conferencing <u>Equipment</u>, including auxiliary microphones 5. Phone and data lines (data lines to accommodate LAN and SharePoint access for attendees) 6. An integrated projection device/system capable of audio/visual presentation for the large conference rooms, sized for conference room capacity. 7. A laptop imaged with the current software, network access and a locking cable 8. Conference room office supplies (e.g., white board markers and eraser, pens, tablets of post it notes, highlighters)
6.18.3-03 (existing)	The Contractor shall furnish and equip each private area/study booth at the Gateway Oaks Campus (Primary Project Worksite) with the following: 1. One (1) ergonomic desk or work surface 2. One (1) telephone 3. Two (2) data lines 4. Two (2) chairs 5. One (1) white board
6.18.3-04 (existing)	The Contractor shall provide all workspaces at the Gateway Oaks Campus (Primary Project Worksite) for on-site State staff (e.g., cubicles, offices, shared spaces) that shall be furnished and equipped with, at a minimum, the following: 1. One (1) ergonomic desk 2. One (1) ergonomic desk chair 3. One (1) bookcase in offices 4. One (1) locking file cabinet or equivalent 5. One (1) laptop imaged with current software, docking station, locking cable, dual monitors with an adjustable monitor stand, keyboard, mouse, and mouse pad 6. One (1) speaker telephone (with headset upon request)
6.18.3-05	<u>Intentionally Left Blank</u>
6.18.3-06 (existing)	The Contractor shall provide, at the Gateway Oaks Campus (Primary Project Worksite), one (1) or more spaces designated for State staff and equipped with print, copy, scan and fax equipment, including at a minimum of one (1) color, high-speed, networked copy/prINTER machine with "lock-print" functionality, and storage for the related supplies.
6.18.3-07 (existing)	The Contractor shall, at the State's request, make available and/or reconfigure seating space, workspaces, conference rooms, and office space to meet the needs of the State throughout the term of the Contract.
6.18.3-08 (existing)	All seating assignments at the Gateway Oaks Campus (Primary Project Worksite), including all Contractor and State staff, as well as designated shared areas shall be subject to the approval of the State Project Director, or designee.
6.18.3-09 (existing)	The Contractor shall provide the following, at a minimum, to support State staff visiting any Project Worksites other than the Gateway Oaks Campus (Primary Project Worksite): 1. Ergonomic office furniture 2. Ergonomic computer equipment 3. Laptops including current software 4. LAN/WAN Network Connectivity 5. Telephone (with headset upon request)
6.18.3-10 (existing)	The Contractor shall ensure the conference rooms within all Project Worksites can be made private through the application of blinds or privacy frosting to necessary glass panes.

Req #	SOW Requirement
6.18.3-11 (existing)	The Contractor shall not acquire any furnishings or <u>Equipment</u> for use on the CalHEERS Project, without approval of the State Project Director, or designee, prior to acquisition.
6.18.3-12 (existing)	Title to <u>all items purchased on behalf of the State in support of this Contract</u> shall remain in ownership of the State at the end of the Contract or upon <u>Contract termination and as directed through Special Provisions</u> .
6.18.3-13 (existing)	The Contractor shall facilitate the downsizing of any Project Worksite upon the State's request.
<u>6.18.3-14</u> <u>(new)</u>	<u>The Contractor shall staff, manage, lead and execute all Office Setup & Maintenance activities on CalHEERS as defined in this Statement of Work and in accordance with the CD-6.18-1 – Project Worksite Maintenance Plan.</u>

6.18.4 Business Maintenance & Support Execution

The requirements in this section define the Project Support Services the Contractor is to provide via subcontracted vendors, and the process to be utilized to do so.

Table 6-56: Business Maintenance & Support Execution

Req #	SOW Requirement
6.18.4-01 (existing)	The Contractor shall ensure that all Project Worksites, during non-working hours, are protected against intrusion by appropriate security measures (e.g., security system and security cameras). The level of security measures to be implemented, for each Project Worksite, shall be approved by the State Project Director, or designee.
6.18.4-02 (existing)	The Contractor shall provide hourly security patrols at all Project Worksite(s), seven (7) days a week, to monitor all Project Worksites and provide a security presence.
6.18.4-03 (existing)	The Contractor shall provide all subcontracted services of the existing contract, which are not included in the Gateway Oaks Campus (Primary Project Worksite) lease agreement, including but not limited to: 1. Monitoring and surveillance equipment: a. Security cameras at all interior exit doors, LTS Storage rooms, and server rooms b. Alarm system (for exterior windows) c. Reception desk panic button 2. Cleaning Maintenance Services, including periodic and spot cleaning, as needed for all conventional and modular system furniture 3. Weekly recycling services 4. Weekly confidential destruct services
6.18.4-04 (existing)	The Contractor shall, when subcontracting for a new service or alternate service vendor to fulfill a facility work order, acquire three (3) vendor estimates/bids, unless otherwise approved by the State Project Director, or designee. The Contractor shall provide the three (3) estimates along with the Contractor's recommendation/justification to the State Project Director or designee for approval prior to executing a contract with a vendor.
<u>6.18.4-05</u> <u>(new)</u>	<u>The Contractor shall staff, manage, lead and execute all Business Maintenance& Support activities on CalHEERS as defined in this Statement of Work and in accordance with the CD-6.18-1 – Project Worksite Maintenance Plan.</u>

6.18.5 CalHEERS Business Support Services

The requirements in this section describe the Project Support Services that Contractor staff provide.

Table 6-57: CalHEERS Business Support Services

Req #	SOW Requirement
6.18.5-01 (existing)	The Contractor shall provide an individual as the point of contact (POC) for each Project Worksite.
6.18.5-02 (existing)	The Contractor shall provide security badges and badge management services, at the Project Worksites.
6.18.5-03 (modified)	The Contractor shall provide security badges services at the Gateway Oaks Campus (Primary Project Worksite) including, but not limited to, the following: 1. Project staff badge – Provides external access to common building areas and internal access to the Primary Project Worksite suites within the building but does not provide access to State Secured Area (see rqmt 6.18.2-09) These badges shall include the staff member's photo 2. State Secured Area badge – Provides external access to common building areas and internal access to the Primary Project Worksite suites within the building, as well as provide access to State Secured Area (see rqmt 6.18.2-09). These badges shall include the staff member's photo 3. Temporary access badge – Provides the same access as the Project staff badge but are only active for a short, designated timeframe (e.g., one day, one week, etc.). These badges shall be visually different than the Project staff badge and will not include a photo 4. Visitor stickers – Provided with the following info: Visitor, the visitor's name, and the date
6.18.5-04 (existing)	The Contractor shall provide twenty (20) project staff badges to the State UAT Test Lead for use.
6.18.5-05 (existing)	The Contractor shall provide full time reception staff and services, including but not limited to the following: 1. Sign in of visitors, collecting the date, time, organization name, purpose for visit and conducting an ID check, as well as escort visitors to their meeting location 2. Mail distribution to project team members (e.g., USPS, FedEx, UPS, inter-office) 3. Project communications for: a. Outages (e.g., printers, phones, badge readers, doors) b. General building concerns (e.g., car lights left on, security concerns) 4. Audio visual equipment check-in/checkout (e.g. projectors) 5. Processing project staff roll-on requests 6. Processing project staff roll-off requests 7. Conduct monthly badge audits 8. Conduct monthly Visitor Log reviews 9. Conduct monthly Client Data Protection walkthroughs, looking for: a. Unattended laptops not wire-locked to a desk/table b. Unattended laptops with screens unlocked c. Test badge access readers and ensure physical doors latch properly d. Test security cameras at all interior exit doors, LTS storage rooms, and server rooms e. Test alarm system/reception desk panic button 10. Provide monthly updates to seating charts and phone lists
6.18.5-06 (existing)	The Contractor shall conduct the following daily business support tasks at the Gateway Oaks Campus (Primary Project Worksite): 1. Respond to, and resolve project business support requests, including but not limited to: a. Conference room reservations b. AV/Projector assistance

Req #	SOW Requirement
	c. Supply requests d. Voicemail PIN resets 2. Organization and management of keys for offices, secured rooms, storage rooms and locking drawers/cabinets 3. Printer maintenance and repairs 4. Reconfiguring of work areas, as requested 5. Refresh the breakroom three (3) times per day 6. Refresh conference rooms and breakout rooms each morning 7. Reconfigure layout of tables/chairs in conference rooms to meet specific meeting needs 8. Walk through of suites to ensure supplies are available and office equipment is working properly, and to identify facility-related issues, including but not limited to: a. Verify all door badge readers are working b. Identify any burned-out lights c. Check supply and printer areas/cabinets for low/missing supplies or paper, restock as needed d. Check for debris/trash on floors and common area counters e. Assess carpet cleaning needs (i.e., large spills/stains) 9. Clean and organize storage rooms, as needed 10. Resolve all issues identified in the daily walk-through by contacting the appropriate person and working with that person to ensure the issue is addressed.
6.18.5-07 (existing)	The Contractor shall takeover and update, or develop, and maintain all process guides that detail the procedures utilized to provide the Project Support Services of this <u>Statement of Work</u> .
6.18.5-08 (modified)	The Contractor shall provide training to all State staff, on the use of project <u>Equipment</u> , <u>Software</u> , processes and procedures, unless otherwise approved by the State.
6.18.5-09 (existing)	The Contractor shall conduct an inventory of office supplies at the Gateway Oaks Campus (Primary Project Worksite) on a weekly basis, placing an order once per month, at a minimum, that consists of: 1. Any needed supplies identified by the inventory findings 2. Requests of project staff that are approved by the State Project Director, or designee.
6.18.5-10 (existing)	The Contractor shall conduct a weekly test of all conference room audio and video equipment at the Gateway Oaks Campus (Primary Project Worksite) and place a work order for any repairs or defective equipment within two (2) Business Days.
6.18.5-11 (existing)	The Contractor shall check water level of the AC/dehumidifier in the server room at the Gateway Oaks Campus (Primary Project Worksite) on a weekly basis and empty as needed.
6.18.5-12 (existing)	The Contractor shall escort/assist subcontracted vendors in providing the following <u>Services</u> at the Gateway Oaks Campus (Primary Project Worksite) once per week: 1. Confidential destruct services (e.g., collection of confidential documentation and onsite destruction) 2. Recycling services (e.g., non-confidential documents, aluminum cans/plastic bottles, and used toner cartridges)
6.18.5-13 (existing)	The Contractor shall participate in State (OTSI) Emergency Evacuation planning activities at the Gateway Oaks Campus (Primary Project Worksite) and any other site designated by the State, as well as provide Safety Wardens at the request of the State. The Contractor-designated Safety Wardens will be responsible for, but not limited to, the following: 1. Knowing their role as a Safety Warden and the actions they should take in the event of an emergency 2. Assist in the coordination of, and attend all, project safety meetings 3. Verify Safety Warden emergency kits are stocked appropriately and in good working order

Req #	SOW Requirement
	4. Assist in the coordination of all-staff safety drills every six (6) months
6.18.5-14 (existing)	All Contractor staff shall participate in safety drills at the Gateway Oaks Campus (Primary Project Worksite), and any other site designated by the State.
6.18.5-15	<u>Intentionally Left Blank</u>
6.18.5-16 (existing)	The Contractor shall provide access for the State or designated auditors to inspect all Project Worksites and assets in accordance with security protocols and procedures; assisting with the identification of assets; providing resources to resolve discrepancies or issues generated by audit activity.
6.18.5-17 (existing)	The Contractor shall provide office supplies at Gateway Oaks Campus (Primary Project Worksite) over the duration of the Contract, presenting all office supply offerings to the State for approval, prior to initial acquisition. Office supplies include, at a minimum, but is not limited to: 1. Writing supplies 2. Dry erase supplies 3. Paper supplies 4. Folders/envelopes 5. Small desk items (e.g., stapler, tape dispenser, scissors) 6. Other desk items (e.g., binders, batteries, clip boards) 7. Toner supplies 8. Badge supplies
6.18.5-18 (existing)	The Contractor shall provide the following breakroom supplies at Gateway Oaks Campus (Primary Project Worksite) over the duration of the Contract: 1. Paper Towels 2. Hand Soap
<u>6.18.5-19 (new)</u>	<u>The Contractor shall staff, manage, lead and execute all CalHEERS Business Support Services activities on CalHEERS as defined in this Statement of Work and in accordance with the CD-6.18-1 – Project Worksite Maintenance Plan.</u>

6.18.6 Facility Asset Inventory Reports

Table 6-58: Facility Asset Inventory Reports

Req #	SOW Requirement
6.18.6-01 (modified)	The Contractor shall develop, or takeover and update, maintain and provide Asset Inventory Reports for all Project Worksites throughout the term of the Contract, providing the State with Asset Inventory Reports as follows: 1. Facility Asset Inventory Report (non-technical) - provided annually or upon State request

6.19 SERVICE CENTER SERVICES

The Contractor, at the direction of the State, provides Service Center services for CalHEERS. The Service Center services include hosting provider, day-to-day operational support, planning, execution, reporting, performance monitoring, capacity planning and sizing, technology recovery, and evaluating and resolving issues.

6.19.1 Service Center Management Plan

Table 6-59: Service Center Management Plan (CD-6.19-1)

Req #	SOW Requirement
6.19.1-01 (new)	The Contractor shall takeover, update, enhance, deliver, and maintain the CD-6.19-1 - Service Center Management Plan, which includes but is not limited to:

Req #	SOW Requirement
	1. INTRODUCTION 1.1 Purpose 1.2 List of Reference Documents 1.3 Audience 2. SUMMARY 2.1 Scope 3. APPROACH AND METHODOLOGY 4. ASSUMPTIONS, CONSTRAINTS, AND RISKS 4.1 Assumptions 4.2 Constraints 4.3 Risks 5. ROLES AND RESPONSIBILITIES 6. SYSTEM DEVELOPMENT 7. RELEASE MANAGEMENT 7.1 Release Management Overview 7.1.1 Resources (Tools, Documents and Sites) 7.2 Continued Improvement 7.2.1 Cross – Functional Responsibilities by Team 7.2.2 Principles of Agile Software Development 7.2.3 Overview of Scrum Roles 7.2.4 Key Scrum Ceremonies 7.2.5 Team Members and Roles 7.2.6 Build & Enhance Workflow for the Service Center 7.2.7 DevOps Process Alignment 8. SYSTEM ENVIRONMENTS 8.1 Overview 9. OPERATIONS MAINTENANCE 9.1 Operations Process and Procedures 9.2 Case/Incident Management 10. GLOSSARY AND ACRONYMS 10.1 New Acronyms and Terms APPENDIX 1: SOW TO DELIVERABLE TRACEABILITY CHECKLIST APPENDIX 2: DELIVERABLE COMPLIANCE AND VALIDATION CHECKLIST APPENDIX 3: ASSOCIATED ARTIFACTS
6.19.1-02 (new)	The Contractor shall only alter or modify this Deliverable's structure or content with the approval of the State Project Director or designee.
6.19.1-03 (new)	The Contractor shall adopt and maintain all Project Artifacts that are associated with this Deliverable in the Project Artifact Inventory and manage them in accordance with the Project Artifact process.
6.19.1-04 (new)	The Contractor shall update the following appendices and attach them to the Project Worksite Maintenance Plan: Appendix 1–SOW to Deliverable Traceability Checklist Description: A table where the Contractor identifies the SOW requirements for this Deliverable, as specified within SOW Section 8, DELIVERABLES, and includes but is not limited to: 1. SOW Requirement ID # 2. SOW Requirement Text 3. Requirement Traceability (Contractor identified traceability from the requirements to the Deliverable) 4. Requirement Fulfillment (Define how the Contractor has fulfilled the SOW requirements in the Deliverable) Appendix 2–Deliverable Compliance and Validation Checklist

Req #	SOW Requirement
	Description: A QA Checklist that includes, but is not limited to: 1. Deliverable Section Number and Title 2. Deliverable Requirement Statement(s) 3. Requirement Completion (How the Contractor has complied with or will comply with the requirement statements within the Deliverable) 4. Validation Method (The method the Contractor used to validate Deliverable compliance) 5. The Contractor's QA Manager sign-off on compliance Appendix 3—Associated Artifacts Description: An extract from the Project Artifact Inventory List of artifacts associated with this Deliverable, and will include but is not limited to the following examples: 1. Artifact Name 2. Associated Parent DEL 3. State Approver 4. SI Point of Contact 5. Review Frequency 6. Submission Frequency 7. Artifact File Format 8. Artifact Location (e.g., SharePoint breadcrumb) 9. Link to artifact

6.19.2 Service Center Services Execution

Table 6-60: Service Center Services Execution

Req #	SOW Requirement
6.19.2-01 (new)	The Contractor shall staff, manage, lead, and execute all activities defined in the CD-6.19-1 – Service Center Management Plan.
6.19.2-02	<u>Intentionally Left Blank</u>
6.19.2-03 (new)	The Contractor shall provide a Service Center Maintenance Support team to provide functional design solutions for the technology stack utilized by the Service Center (ACD and IVR currently utilizing the Amazon Connect system; Workforce Management and Quality Assurance through Verint; and other call center reporting and Operational support applications.).
6.19.2-04 (new)	The Contractor shall maintain the service center planning, execution, reporting, <u>real-time</u> performance monitoring <u>and</u> , <u>monthly performance reports</u> , capacity planning and sizing, technology recovery, and shall evaluate and resolve all issues.
6.19.2-05 (new)	The Contractor shall add, remove, maintain, implement, and operationalize all elements and <u>Services</u> for the CalHEERS Service Center.
6.19.2-06 (new)	The Contractor shall ensure that all existing or new Toll-Free Numbers (TFNs) are procured and implemented as directed by the State.
6.19.2-07 (new)	The Contractor shall analyze, manage, and optimize the mapping of TFNs to system flows as directed by the State.
6.19.2-08 (new)	The Contractor shall configure the list of TFNs to route to the precise flow as directed by the State.
6.19.2-09 (new)	The Contractor shall collaborate with the State to develop and maintain any new Project Artifacts necessary to support this section. New artifacts shall be added to the Project Artifacts Repository and managed in accordance with the Project Artifact process.
6.19.2-10 (new)	The <u>Contractor</u> shall <u>implement, manage, maintain and store</u> ten (10) years of <u>historical Service Center</u> audio recordings and one (1) year of <u>Service Center</u> screen recordings.
6.19.2-11 (new)	The Contractor shall <u>ensure</u> all call recordings <u>are</u> stored within the CalHEERS environment.

Req #	SOW Requirement
6.19.2-12 (new)	The Contractor shall make all <u>Service Center</u> recordings available upon the State's request.
6.19.2-13 (new)	The Contractor shall <u>implement and manage</u> configuration or platform changes to the Service Center technology stack <u>in support of</u> existing tools and <u>external interfaces</u> .
6.19.2-14 (new)	The Contractor shall evaluate the <u>Service Center</u> system upgrades and correct <u>all</u> regression issues <u>identified in accordance with the Special Provisions, Service Level Agreement</u> .
6.19.2-15 (new)	The Contractor shall evaluate and maintain <u>the</u> technology stack to meet the changing needs of the business. <u>The Contractor shall implement changes, at a minimum on a monthly basis, and</u> in the prioritized order determined <u>between the State and the Contractor</u> .
6.19.2-16 (new)	The Contractor shall acquire and configure any new tools used to support the Service Center operations <u>and at True Cost</u> .
6.19.2-17 (new)	The Contractor shall maintain a Service Center Maintenance Support team with a consistent number of core resources to address Service Center operational and business needs as defined by the State to ensure the Service Center SLAs as defined in Appendix A-2.3 SERVICE LEVEL AGREEMENTS (SLA) & LIQUIDATED DAMAGES.

6.20 WEBSITE MANAGEMENT

The Web Content Management Plan defines the processes and procedures for managing the content for the CalHEERS website. The plan defines the web content change management process, roles, responsibilities, formal communication requirements, and a Site Map for the current web portal solution. The Contractor shall perform the services described in this section.

6.20.1 Web Content Management Plan

Table 6-61: Web Content Management Plan (CD-6.20-1)

Req #	SOW Requirement
6.20.1-01 (new)	The Contractor shall develop, enhance, deliver, and maintain the CD-6.20-1 - Web Content Management Plan, which includes but is not limited to: 1. INTRODUCTION 1.1 Purpose 1.2 List of Reference Documents 1.3 Audience 2. SUMMARY 2.1 Scope 3. APPROACH 4. ASSUMPTIONS, CONSTRAINTS, AND RISKS 4.1 Assumptions 4.2 Constraints 4.3 Risks 5. REQUIREMENTS 6. ROLES AND RESPONSIBILITIES 7. OTHER Sections as needed 8. GLOSSARY AND ACRONYMS 8.1 New Acronyms and Terms APPENDIX 1: SOW TO DELIVERABLE TRACEABILITY CHECKLIST APPENDIX 2: DELIVERABLE COMPLIANCE AND VALIDATION CHECKLIST APPENDIX 3: ASSOCIATED ARTIFACTS
6.20.1-02 (new)	The Contractor shall only alter or modify this Deliverable's structure or content with the approval of the State Project Director or designee.

Req #	SOW Requirement
6.20.1-03 (existing)	The Web Content Management Plan shall meet the requirements of ISO/IEC/IEEE 23026-2015 – Systems and Software engineering - Engineering and management of websites for systems, Software, and services information (Section 10.1 - Website life cycle management) standards pertaining to Web Site Management.
6.20.1-04 (new)	The Web Content Management Plan shall ensure that all CalHEERS web content complies with the Web Content Accessibility Guidelines (WCAG) 2.1 AA and Section 508 requirements. The Contractor shall integrate accessibility best practices into content governance, validation processes, and the Deliverable Compliance Checklist to ensure ongoing compliance.
6.20.1-05 (new)	The Contractor shall adopt and maintain all Project Artifacts that are associated with this Deliverable in the Project Artifact Inventory and manage them in accordance with the Project Artifact process.
6.20.1-06 (new)	The Contractor shall update the following appendices and attach them to the Web Content Management Plan: Appendix 1—SOW to Deliverable Traceability Checklist Description: A table where the Contractor identifies the SOW requirements for this Deliverable, as specified within SOW Section 8, DELIVERABLES, and includes but is not limited to: 1. SOW Requirement ID # 2. SOW Requirement Text 3. Requirement Traceability (Contractor identified traceability from the requirements to the Deliverable) 4. Requirement Fulfillment (Define how the Contractor has fulfilled the SOW requirements in the Deliverable) Appendix 2—Deliverable Compliance and Validation Checklist Description: A QA Checklist that includes, but is not limited to: 1. Deliverable Section Number and Title 2. Deliverable Requirement Statement(s) 3. Requirement Completion (How the Contractor has complied with or will comply with the requirement statements within the Deliverable) 4. Validation Method (The method the Contractor used to validate Deliverable compliance) 5. The Contractor's QA Manager sign-off on compliance Appendix 3—Associated Artifacts Description: An extract from the Project Artifact Inventory List of artifacts associated with this Deliverable, and will include but is not limited to the following examples: 1. Artifact Name 2. Associated Parent DEL 3. State Approver 4. SI Point of Contact 5. Review Frequency 6. Submission Frequency 7. Artifact File Format 8. Artifact Location (e.g., SharePoint breadcrumb) 9. Link to artifact

6.20.2 Web Content Management Execution

Table 6-62: Web Content Management Execution

Req #	SOW Requirement
6.20.2-01 (new)	The Contractor shall staff, manage, lead and execute all Web Content Management activities on CalHEERS as defined in this Statement of Work and in accordance with the CD-6.20-1 - Web Content Management Plan.
6.20.2-02 (existing)	The Contractor shall develop and expose web services to consumers using the following open standards: 1. XML 2. WSDL 3. Simple Object Access Protocol (SOAP) 4. WS-I Web Services 5. WS-Security
6.20.2-03 (new)	The Contractor shall regression test all internal and external links in the CalHEERS System within each major release, reporting all broken internal/external links to the State.
6.20.2-04 (new)	Any internal link (where the linked-to location is within the Contractor's control), <u>as well as any external link (where the linked-to location is to an external location)</u> , that is not working shall be corrected at no additional cost to the State.
6.20.2-05 (new)	The Contractor shall collaborate with the State to develop and maintain any new Project Artifacts necessary to support this section. New artifacts shall be added to the Project Artifacts Repository and managed in accordance with the Project Artifact process.

SOW SECTION 7 TRANSITION REQUIREMENTS

SOW SECTION 7 – TRANSITION REQUIREMENTS

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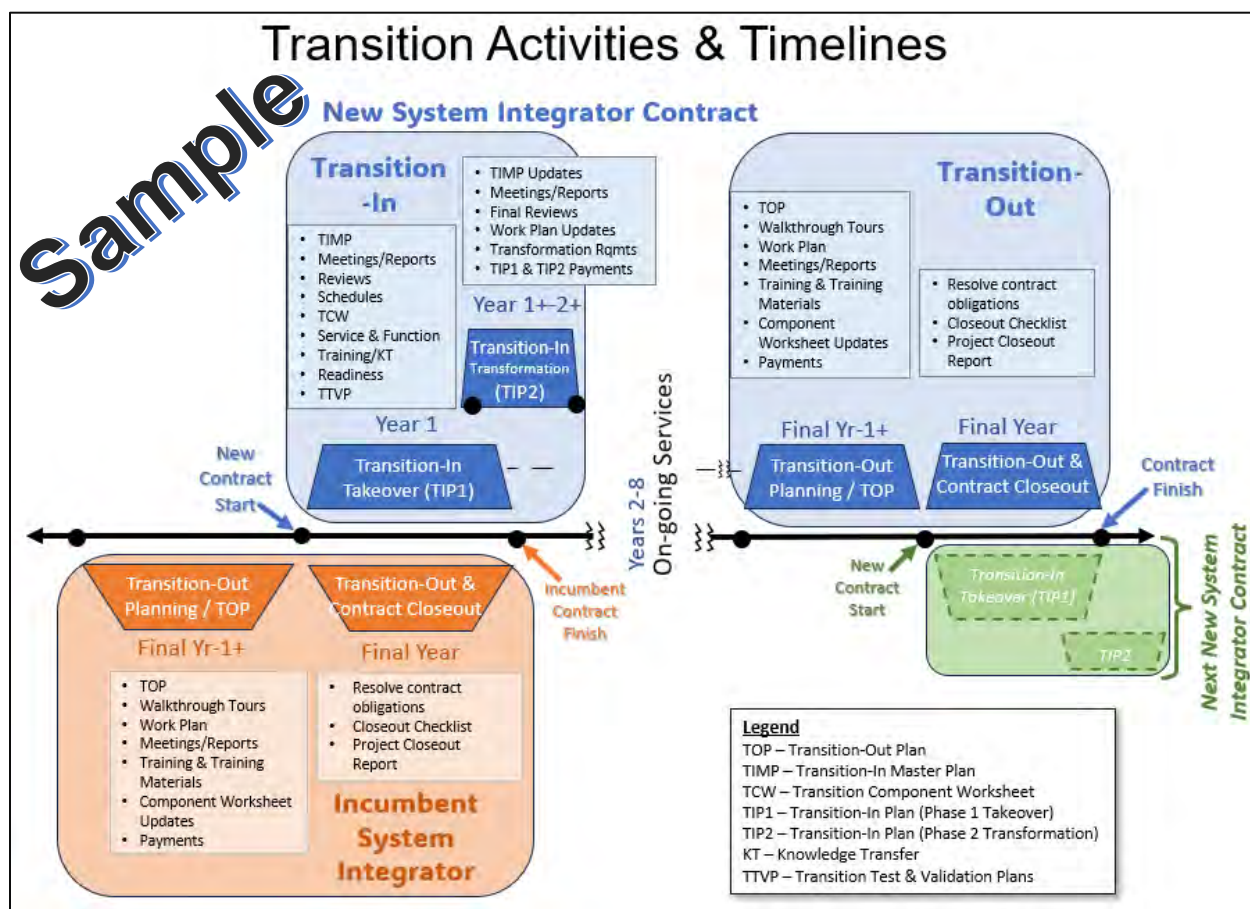
7 TRANSITION REQUIREMENTS

Transition for this Contract is the transfer of System Development, Maintenance and Operations (SDMO) to the selected Contractor or State and the contractual closeout with the incumbent Contractor. The State will work closely with the incumbent Contractor during this process and must approve all updates to the Contractor's Transition approach and plans. All data and information provided by the Contractor as required by this Contract shall be accompanied by letter, signed by the Contractor's authorized representative or their designee, attesting that the supplied material(s) is/are current, accurate, and complete.

Transition consists of a variety of overlapping activities between the incumbent contractor and the SI for the new contract as depicted in Figure 7-1 below. It will be important that both the incumbent and the winner of the new SI contract be in sync during the first year of the new contract.

Therefore, the State has already incorporated a similar transition set of requirements into the incumbent contract (called Transition Out). The incumbent already is aware of this expectation and is contractually obligated to participate and interact with the Transition-In contract as shown in the figure below.

Figure 7-1. Transition Activities and Timelines



Transition-In Phase 1 (Takeover)- This phase (hereafter referred to as TIP1) occurs in the first year of the new contract and involves identifying and executing all activities required to allow the Contractor to transition-in (onboard) and take over all services, functions, and responsibilities for operating and maintaining the California Healthcare Eligibility, Enrollment, and Retention

System (CalHEERS). This phase concludes with the SI of the new contract fully responsible for the system's operational baseline, and Service Level Agreement (SLA) conditions as well as the successful completion of the Sunrise-Sunset Agreement between the incumbent contractor and the contractor of the new contract. This agreement must be planned for TIP1 to mark the peaceful handover of SLA responsibility and liability from the incumbent (Sunset) and the winning SI contractor (Sunrise). The Contractor will utilize the Transition-In Master Plan (TIMP) to describe this effort for TIP1. TIP1 requirements mostly include SOW requirements which are marked as "existing" and "modified" in the requirements tables. The State and Contractor will work collaboratively in defining details of the TIP1 in the development of the TIMP.

Transition-In Phase 2 (Transformation)- This phase (hereafter referred to as TIP2) involves executing all transformative changes called for by the Contract. Transformation changes include innovations, and other more time-consuming changes from the new contract that are best deferred until after the first phase is completed. The planning for the second phase will occur during the first phase. The Contractor will also utilize the TIMP to include the TIP2 phase planning. TIP2 requirements mostly include SOW requirements which are marked as "modified" or "new" in the requirements tables. The State and Contractor will work collaboratively in defining details of the TIP2 in the development and updates to the TIMP.

Transition-Out- This final phase involves the Contractor executing all activities required to roll off the CalHEERS Project by transitioning out and turning over all the responsibilities for the State-owned resources, documentation, and knowledge to a successor contractor or the State. Transition-Out will occur during the final year of the Contract term. Transition-Out activities of the Contract will overlap with Transition-In activities of the SI under the new Contract. The Contractor will utilize the Transition-Out Plan (TOP) to include all Transition-Out planning.

Please note that this section of the Sstatement of Work (SOW) references multiple sets of standards, which are subject to change over time. Please refer to Appendix A-2, SPECIAL PROVISIONS, Section 7.7, UPDATES TO STANDARDS, REGULATIONS, AND CODES, regarding project processes around standard updates.

7.1 TRANSITION-IN PHASE 1 (TIP1) TAKEOVER

The Contractor has the overall responsibility for providing an orderly transition (takeover) that includes the onboarding of staff, system takeover, and baselining which is transparent and minimizes disruption of service to all users of the system.

NOTE: In the event that the incumbent is also the successor Contractor, TIP1 is minimal or not needed. The TIMP will still be required. However, it will be easier to implement.

During TIP1 the incumbent contractor and the successor Contractor shall coexist on the CalHEERS SDMO Project. A successful TIP1 transition results in the Contractor establishing a post transition operational baseline and assuming responsibility for providing SDMO support (e.g. services and functions) needed to maintain CalHEERS and support Sponsors without service disruption and inclusive of SLA responsibility.

The TIP1 operational baseline is met when the Contractor is providing SDMO support for all services and functions of CalHEERS, which includes meeting or exceeding each Service Level Agreement (SLA), as identified in the SOW.

The Transition-In Master Plan (TIMP) will initially be created during TIP1 and updated for the TIP2 activities. The TIMP will establish what must be initially transitioned, the approach to be utilized for transitioning, and the processes and procedures needed to carry out the transition and Cutover. Cutover is defined as multiple events whereby responsibility for an SDMO service, function, or component is transferred from the incumbent contractor to the Contractor or to the State. The Contractor's TIMP is the contractual governing document. The Contractor is

expected to implement a transition approach that is realistic and achievable (e.g., phased in some fashion, single Cutover period – “big-bang”) and manage TIP1 and TIP2 from both an overall perspective as well as at an individual transition component level within each transition area.

The Contractor will collaborate with the incumbent contractor to plan for and carry out transition activities. After Contract execution and upon receipt of the Contractor’s TIMP, the incumbent contractor is required to update (within 30 calendar days) their Project Closeout Plan to conform to the Contractor’s TIMP. During the initial project planning period, the Contractor and incumbent contractor discuss and clarify transition activities and timelines and ensure both plans are in alignment. Transition planning must consider the approach to transition the CalHEERS Application including CalHEERS component subsystems and services.

A Transition-In Work Plan (Including both TIP1 and TIP2) is required from the Contractor to first identify and manage all Transition-In activities and tasks required by the TIMP to allow for successful Cutover to the new Contract under TIP1, and then updated to include TIP2 activities.

The Contractor must demonstrate that they are ready to take over and run CalHEERS and deliver services to the Program, the end users, and business partners before assuming control and responsibility.

As part of TIP1, the Contractor must also define within the Transition Training and Knowledge Transfer Plan:

- What knowledge transfer activities the Contractor requires to obtain knowledge from the incumbent contractor, and
- What training the Contractor will provide State staff and those affected on transition activities/tools and any changes to how services and functionality will be delivered.

As part of TIP1, the Contractor must conduct readiness reviews for each group of identified transition components. During this review the Contractor provides their concurrence that the incumbent contractor has completed closeout, results from testing and/or validation, the activities and tasks required to implement Cutover, and confirm they are prepared to assume control and responsibility for delivering SDMO support.

Upon a successful transition readiness review, the State authorizes the Contractor to schedule and implement Cutover to establish a post transition operational baseline associated with the transition components included in the readiness review. Once Cutover is achieved the Contractor assumes full control and responsibility for the SDMO support related to the transition components that were implemented.

There is an initial operations period that begins immediately after Cutover. During this period, the incumbent contractor provides technical advice and assistance to the successor Contractor. The duration of the initial operational period and nature of incumbent contractor support is identified and agreed to by the State and incumbent contractor and included as part of Cutover activities.

The Contractor conducts a final review with the State prior to the end of the initial operations period to provide operational status and to determine if technical advice and assistance is still required. Once all transition components have been transitioned, the Contractor schedules a review with the State to show that all activities required by the Transition-In Work Plan have been completed and seeks State approval to end TIP1 activities.

The State requires an orderly Transition-In (new contract) and Transition-Out (incumbent contract) that is transparent and does not negatively impact:

- Project sponsors
- Interface partners
- Program partners
- System stakeholders

- End users
- Consumers/customers

The activities during the TIP1 phase and the outgoing incumbent contractor's Transition-Out phase must be collaboratively coordinated and synchronized to the greatest extent possible. The successor Contractor must work with all identified and/or referenced stakeholders, program partners and project sponsors under the incumbent contractor's current Transition-Out requirements, milestones and Deliverables and determine how they interface with the successor Contractor's Transition-In activities and project schedule. Best efforts will be made both by the successor and incumbent contractors to coordinate all Transition-In and Transition-Out activities. The figures below identify the relationship between the Deliverables for Transition-In (Takeover) and the logical progression of how they work in concert with one another.

Figure 7-2: The Deliverables Hierarchy for Transition-In (Takeover) TIP1

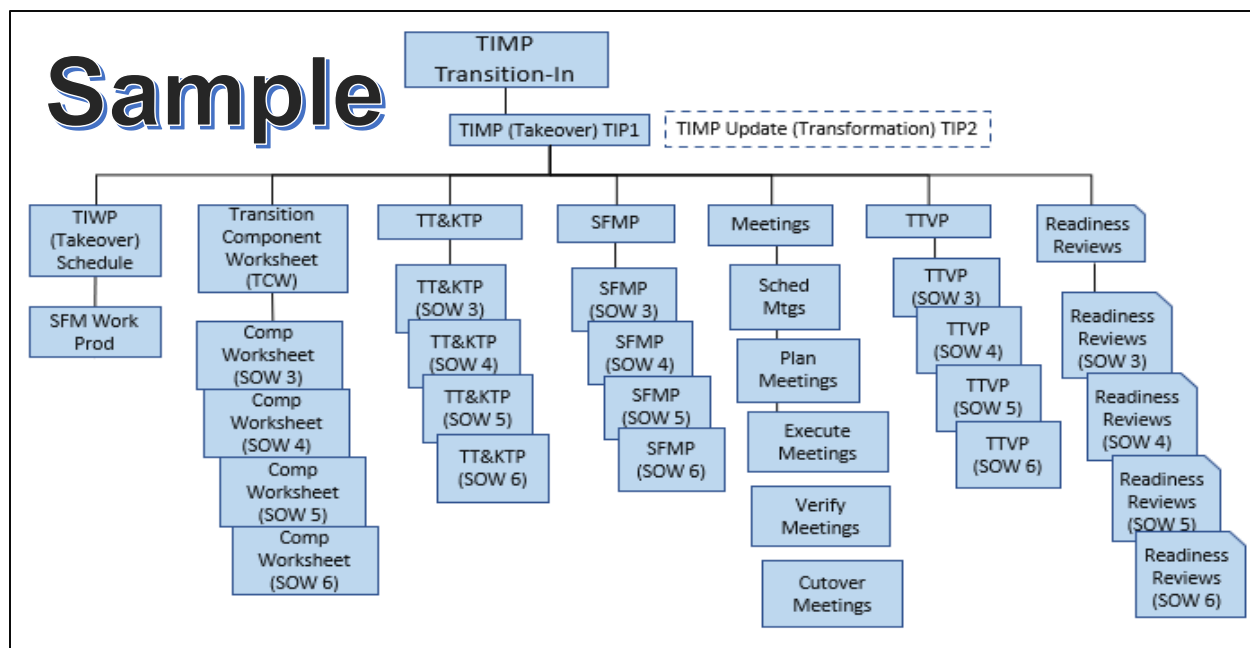
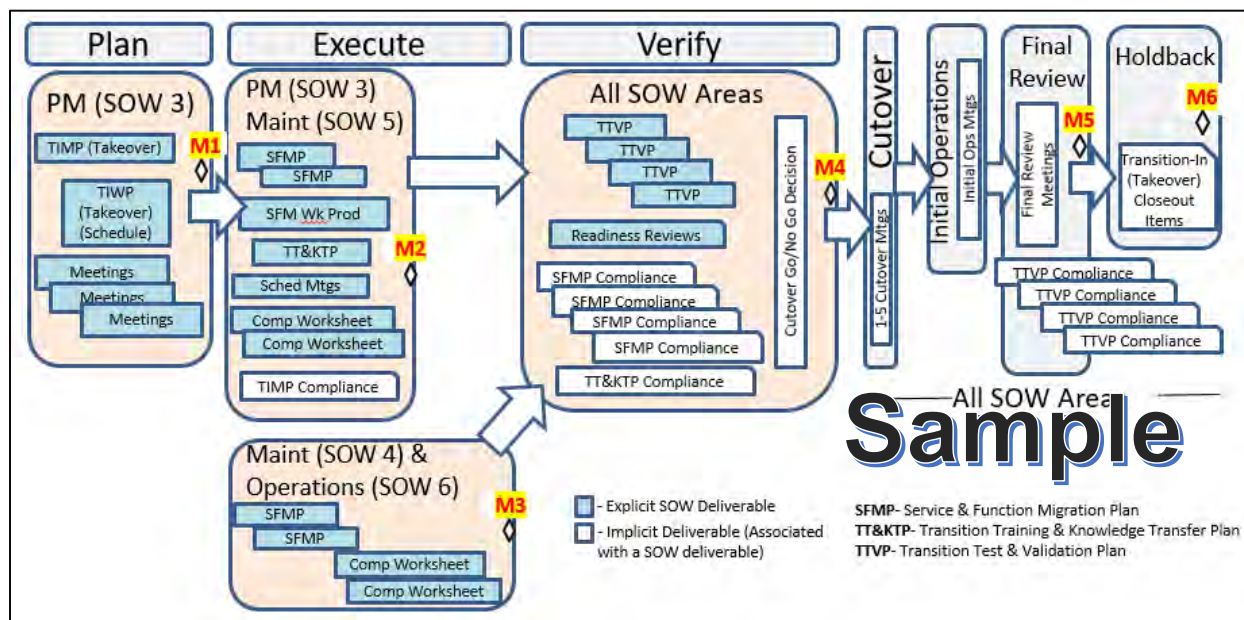


Figure 7-3: The Transition-In (Takeover) TIP1 Deliverable Relationship Diagram



7.1.1 Transition-In Master Plan (TIMP)

The TIMP will serve as a draft controlling document detailing the incoming Contractor's Transition-In approach for TIP1 and expected approach and activities for TIP2. TIP1 will include processes and procedures, timeline, and deliverables for the duration of the Transition-In phase. The incumbent Contractor's Project Closeout Plan shall conform to the Contractor's TIMP. Requirements of the TIMP will also address how and when transition components will be transitioned and tracked as part of TIP2.

Requirements in this section also address the plans, communication, and reporting mechanisms needed to support management and implementation of the Transition-In activities.

Refer to SOW Section 8, DELIVERABLES for more information on each of the Transition-In Deliverables required.

Table 7-1: Transition-In Master Plan (CD-7.1-1)

Req #	SOW Requirement
7.1.1-01 (new)	The Contractor shall review the currently approved DEL CD-7.1-1 Transition-In Master Plan dated 06/11/2020 as a guide to create, in collaboration with the State, a new Transition-In & Transformation Master Plan DED for review. The DED will then be the baseline for a new Transition-In & Transformation Master Plan deliverable, which includes but is not limited to: 1. TRANSITION-IN MASTER PLAN (TIMP) EXECUTIVE SUMMARY 1.1 Purpose of the TIMP 1.2 Transition Timeline 1.3 Transition Areas 1.4 Team Organization – Workstream Mapping to Transition Areas 2. TRANSITION APPROACH 2.1 Transition-In Scope 2.2 Transition-In Approach 2.3 Transition-In Work Plan 2.4 Transition-Out Approach 3. TRANSITION-IN ROLES AND RESPONSIBILITIES 4. TRANSITION-IN ACTIVITIES 4.1 Project Management 4.2 System Change & Enhancement 4.3 Program Support 4.4 Operations 5. TRANSITION DELIVERABLES & WORK PRODUCTS 5.1 Transition Deliverables (SOW Section 7) 5.2 Transition Work Products (SOW Sections 3 through 6) 6. TRANSITION PROCESSES 6.1 Collaboration with Incumbent SI 6.2 Organizational Change Management 6.3 Quality Management 6.4 Quality Assurance Team 6.5 Transition QA Process 6.6 QA Readiness Reviews 6.7 Communication Management / Weekly Meeting Cycle 6.8 Risk Management 6.9 Change Control Management 7. APPROACH TO MANAGING OTHER TRANSITION REQUIREMENTS 8. ASSUMPTIONS 9. CONSTRAINTS APPENDIX 1: SOW TO DELIVERABLE TRACEABILITY CHECKLIST

Req #	SOW Requirement
	APPENDIX 2: DELIVERABLE COMPLIANCE AND VALIDATION CHECKLIST APPENDIX 3: ASSOCIATED ARTIFACTS APPENDIX 4: STATE AND CONTRACTOR COUNTERPART CHART APPENDIX 5: STAFFING HISTOGRAM – TRANSITION (FROM BAFO) APPENDIX 6: MAJOR ACTIVITIES CONTRACTOR IS TRACKING
7.1.1-02 (new)	The Contractor shall only alter or modify this Deliverable's structure or content with the approval of the State Project Director or designee.
7.1.1-03 (modified)	The Contractor shall update the Transition-In Master Plan (TIMP) to reflect the Contractor's increased knowledge of the CalHEERS environment.
7.1.1-04 (modified)	The Contractor shall develop, deliver, maintain, and execute a TIMP and Transition-In phase that includes, but is not limited to, identifying and implementing all the activities, work flows, contracts, warranties and Deliverables (i.e., during the first year of the Contract term) required to allow the Contractor to transition in and take over all services, functions, and responsibilities for operating and maintaining the CalHEERS and its subsystems and databases.
7.1.1-05 (modified)	The Contractor shall create a TIMP that determines what must be transitioned, the approach to be utilized for transitioning, the processes and procedures needed to carry out the transition and Cutover, and a time schedule for all activities.
7.1.1-06 (modified)	The Contractor shall develop, deliver, maintain, and execute a Transition-In Work Plan that identifies and manages all Transition-In activities and tasks required by the TIMP to allow for successful Cutover to the new Contract.
7.1.1-07 (existing)	The Contractor shall provide a TIMP that includes, but not be limited to the following: 1. Compliance with the latest version of the Project Management Institute (PMI ®), A Guide to the Project Management Body of Knowledge (PMBOK ® Guide) for project management 2. Addresses Transition-In activities for all transition components and SDMO responsibilities as defined in the Contract 3. Acts as the Master Transition-In document by which the other transition documents are referred and traceable
7.1.1-08 (existing)	The Contractor shall develop, deliver, maintain, and execute a Transition Implementation Document that includes, but is not limited to, the following information: 1. Methodology 2. Schedule including task start and end dates 3. Roles and responsibilities of Contractor and State teams 4. Implementation Readiness and Checklists, including readiness criteria metrics 5. Entry and Exit Criteria for beginning and completion of Implementation. 6. Proven Practices (demonstrate that the plan is based upon proven practices) 7. Cutover Processes and Procedures 8. Implementation Support Plans 9. Contingency Plan 10. Recovery Plan

Req #	SOW Requirement
7.1.1-09 (existing)	The Contractor shall develop, deliver, maintain, and execute an Organizational Change Management Document. This Deliverable must include, but not be limited to the following information: 1. Approach and Schedule 2. Roles and Responsibilities of the Contractor and the State 3. Process and role gap analysis of existing workflow and procedures (As Is/To Be Analysis) which must include "a day in the life of" study of people in the roles that will be impacted by the new System 4. Gap Analysis between the existing environments and the new CalHEERS environment 5. Change Readiness Plan that must accurately include details regarding the change readiness process, inputs and outputs; readiness criteria; assessment methods; and change readiness tools utilized 6. Communications Strategies 7. Tasks and Expected Results 8. Method for Documenting and Dealing with Issues
7.1.1-10 (modified)	The Contractor shall provide a section in the TIMP for Quality Management that will guide the Contractor, the State, and the incumbent Contractor in managing quality during Transition-In & Transformation.
7.1.1-11 (modified)	The Contractor shall provide a TIMP that guides the efforts of the Transition-In activities. The TIMP must include, but not be limited to, the following information: 1. Description of the overall Transition-In Takeover (TIP1) approach and process to be used to transition all components identified in the four (4) Transition Areas detailed within SOW Sections 3, 4, 5 and 6. 2. Description of the Transition-In (Takeover) (TIP1) approach and processed to be used to take over the SOW requirements that are identified as 'modified' and 'existing' as well as how they will be addressed by the close of the Transition-In (Takeover) period. 3. Description of the Transition-In (Transformation) (TIP2) approach and processes to be used to transform the SOW requirements that are identified as "modified" or "new" as well as how they will be addressed by the close of the Transition-In (Transformation) period. 4. The transition approach shall include the Contractor activities to plan, execute, verify, Cutover, implement initial operations and conduct the final review, along with assumptions and constraints that are inherent with the proposed approach. 5. Description of the rationale for selecting this approach. 6. Planned transition activities and tasks that includes, but are not limited to, the planning, implementing, executing, tracking, and reporting of the overall transition effort as well as for each transition component. 7. Roles and responsibilities for implementing transition activities to include those for the State and incumbent Contractor. For planning purposes, the Contractor shall work with designated State staff subject matter experts from Sponsors, CalHEERS and State Project Office for issue resolution and coordination of activities required to support the transition. 8. Description of how the Contractor will collaborate with the incumbent Contractor to plan for and carry out transition activities as well as what the Contractor requires of the incumbent Contractor regarding knowledge transfer, data/information, and support for mitigating risk. 9. Risks inherent with the overall transition (e.g., risks related to duration and transition timing, risks inherent with the incumbent Contractor approach) and the Contractor's planned mitigation measures to ensure no disruption to CalHEERS services. 10. Approach to organizational change management. 11. Approach to transition training and knowledge transfer to include, but not be limited to:

Req #	SOW Requirement
	a. Knowledge transfer activities the Contractor requires to obtain knowledge from the incumbent Contractor. b. Transition activities/tools and any changes to how services and functionality will be delivered. 12. Approach to conducting transition component readiness reviews to obtain approval for Cutover that includes stakeholder involvement.
7.1.1-12 (modified)	The Contractor shall provide a Quality Management section in the TIMP that includes, but is not limited to, the following information: 1. The identification and approach for the Quality Assurance (QA) Team Organization, staffing, QA Team roles and responsibilities, QA processes, and QA reports that will be used to ensure that Transition-In activities are being accomplished. 2. The procedures the Contractor shall use to describe how the Contractor's QA Team shall oversee implementation of all the tasks listed in the Contract to ensure the tasks are performed in accordance with Contract requirements, the TIMP, as well as other required plans and reports. 3. The procedures the Contractor shall use for conducting a gap analysis between the incumbent Contractor SDMO activities and the Contractor's SOW and the format by which the Contractor will provide the State Project Director or designee with the results of the analysis and the integration of a get well plan for gaps identified as part of the Weekly Status Meetings and Performance Reporting activities. 4. The procedures the Contractor shall use to assume responsibility for providing all missing SDMO activities identified in the gap analysis prior to the end of the Transition-In period or when agreed to by the State Project Director or designee.
7.1.1-13 (modified)	The Contractor shall develop, deliver, maintain, and execute, the following Transition-In Deliverables, including but not limited to: 1. TIMP 2. Transition-In Work Plan (Schedule) 3. Transition Weekly Meeting Agendas/Minutes and Status Reports 4. Transition Component Worksheet 5. Project Management Service and Function Migration Plan 6. System Change & Enhancement Service and Function Migration Plan 7. Program Support Service and Function Migration Plan 8. Operations Service and Function Migration Plan 9. Transition Training and Knowledge Transfer Plan 10. Transition Readiness Reviews 11. Project Management Test and Validation Plan 12. System Change & Enhancement Test and Validation Plan 13. Program Support Test and Validation Plan 14. Operations Test and Validation Plan 15. Annual Deliverable Prioritization
7.1.1-14 (existing)	The Contractor's TIMP shall include a section on the approach to plan, develop, and implement, Service and Function Migration Plans for each of the four (4) transition areas that will guide the Contractor, the State, and the incumbent Contractor in managing plan specific transition activities.
7.1.1-15 (existing)	The Contractor's TIMP shall include a Communication Management section, in the TIMP, on managing communications that will guide the Contractor, the State, and the incumbent Contractor in managing communications during Transition-In.

Req #	SOW Requirement
7.1.1-16 (modified)	The Contractor's Service and Function Migration Plans section of the TIMP shall include, but not be limited to, the following information: 1. Definition for each Transition Area the approach to transition services and functions to be operationalized and Cutover to the Contractor. 2. Identification of key high-level activities that must be accomplished to allow for a successful transition of Transition Area services or functions. These activities include preparatory actions being taken to establish and prepare facilities, obtain service Contracts, establish capabilities, prepare for testing/validation, and those actions taken subsequent to successful testing/validation and needed to implement Cutover. 3. Identification of how Test Readiness Reviews will be planned and coordinated with the State and in coordination with the incumbent Contractor's Project Closeout Plan.
7.1.1-17 (modified)	The Contractor's Communication Management section in the TIMP shall include, but not be limited to, the following information: 1. The processes and procedures for communication with State, county, business partners, and other stakeholders that will be utilized by the Contractor during the transition period. 2. The methods used to ensure timely and appropriate generation, collection, distribution, storage, retrieval, and ultimate disposition of Transition-In information. 3. Identify the critical links among people and information that are necessary for successful communications. 4. The communication approach and processes for communicating Transition-In activities to the State, counties, business partners, and incumbent Contractor. 5. The process for providing timely communications that keep the State, end users, and business partners informed of Transition-In activities. 6. Contractor shall attend meetings and provide status updates regarding the Transition-In activities. 7. The process for timely communication that keeps the State, affected business partners, end users, and the incumbent Contractor informed of any changes or delays in the Transition-In Work Plan.
7.1.1-18 (existing)	The Contractor shall provide a section in the TIMP on the approach to plan, develop, and implement area specific Transition Test and Validation Plans which guides the Contractor, the State, and the incumbent Contractor on completing specific test and validation activities.
7.1.1-19 (existing)	The Contractor shall include a section in the TIMP on Risk Management that will guide the Contractor, the State, and the incumbent Contractor in managing risks during Transition-In.
7.1.1-20 (existing)	The Contractor shall provide a Transition Test and Validation Plans section in the TIMP that includes, but not be limited to, the following information: 1. Identification of what transition component (functions or services) require testing or validation. 2. Description of how to determine what transition components require formal testing versus validation. 3. Identification and documentation of the approach and methods to be used to validate such as checklists or demonstrations.
7.1.1-21 (modified)	The Contractor shall provide a Risk Management section in the TIMP that includes, but is not limited to, the following information: 1. The approach for the development and execution of a Transition-In Work Plan that is realistic and achievable and has a minimal impact on Sponsor programs, business partners, and CalHEERS end user activities. This includes a description of how the schedule minimizes transition risk. 2. The identification of how risks associated with Transition-In will be identified, tracked, and managed; as well as the approaches to mitigate risks.

Req #	SOW Requirement
7.1.1-22 (existing)	The Contractor shall utilize the framework of existing CalHEERS Change Control Management processes and procedures, and the incumbent Contractor's Project Closeout Plan.
7.1.1-23 (existing)	The Contractor shall provide a section on Change Control Management in the TIMP that will guide the Contractor, the State, and the incumbent Contractor in managing changes during Transition-In once this responsibility has been assumed by the Contractor.
7.1.1-24 (modified)	The Contractor shall provide a Change Control Management section in the TIMP that includes, but is not limited to, the following information: 1. The approach, processes, and procedures the Contractor shall utilize when proposing critical Change Request (CRs) that need to be made to the system during Transition-In that allow implementation of the transfer process. 2. The procedures the Contractor will use for proposing a critical change, including documentation that identifies the critical nature of the change as well as validates how the change will not impact the State's ability to test the system, execute normal system operations, or impede transition. 3. The procedures the Contractor will use for proposing noncritical change requests that enhance or facilitate implementation of Transition-In activities. 4. The procedures the Contractor shall use for proposing a noncritical change, provide documentation that identifies the nature of the change, how it enhances/benefits the Transition-In effort, and validates that the change will not impact the State's ability to test the system, execute normal system operations, or impede transition. 5. The procedures the Contractor shall use to implement State required CRs during the Transition-In period as identified by the TIMP and the incumbent Contractor's Project Closeout Plan. 6. The procedures the Contractor shall use to implement production defect fixes during the Transition-In period as identified by the TIMP and the incumbent Contractor's Project Closeout Plan. 7. The procedures the Contractor shall use to review and analyze the existing System/Software Development Life Cycle (SDLC), identification of any guidelines, processes and standards (e.g., IEEE, PMBOK, ITIL, etc.) that can be applied to revise or improve the life cycle, in support of cost savings and process improvement.
7.1.1-25 (existing)	The Contractor shall manage the implementation of all releases beginning in the 7th month after the "Contract Execution" date.
7.1.1-26 (existing)	The Contractor shall manage all CalHEERS CRs that have not been implemented on or before the last release managed by the incumbent Contractor. This includes, but is not limited to, the following item: • Historical information for all CRs that have been implemented into production
7.1.1-27 (existing)	The Contractor's TIMP shall also include a section on managing other transition management requirements that will guide the Contractor, the State, and the incumbent Contractor in managing other transition management requirements during Transition-In.

Req #	SOW Requirement
7.1.1-28 (existing)	The Contractor shall provide a section on managing other transition management in the TIMP that includes, but is not limited to, the following information: 1. The Contractor's use of the procedures in the CalHEERS Operations Manual to support and successfully execute and publish the results of the daily backup and recovery activities. 2. The procedures the Contractor shall use to work with the incumbent Contractor to transfer control of all CalHEERS environments as identified in the incumbent Contractor's Closeout Plan. 3. The procedures the Contractor shall use to work with the State and the incumbent Contractor to understand the incumbent Contractor's Project Closeout Plan and determine how to integrate the Project Closeout Plan and Project Closeout Work Plan with the Contractor's TIMP and Transition-In Work Plan. 4. The procedures the Contractor shall use to work with the incumbent Contractor to determine the file transfer methodology to be used during data migration or conversion activities as identified at the component level. 5. The procedures the Contractor shall use to support the State Transition Manager and the Contractor Transition Manager and provide onsite support to the transition group. 6. The Contractor's expectations from the State in terms of roles, responsibilities, resources, or additional items in order to implement the Transition-In activities. 7. The procedures the Contractor shall use to store transition Deliverables, files, and data in a State approved location identified in TIMP that is accessible to the State.
7.1.1-29 (new)	The Contractor shall only alter or modify this Deliverable's structure or content with the approval of the State Project Director or designee.
7.1.1-30 (existing)	The Contractor shall accurately document and provide detailed Knowledge Transfer (written and training) any and all system, software, hardware and database information for Transition-In activities and Deliverables.
7.1.1-31 (existing)	The Contractor shall create, deliver, maintain, and execute a Transition-In Plan which includes, but is not limited to resources, staffing, schedule, process description, accurate system and operation system documentation, design documentation, software, hardware, all operational activities and dependencies to successfully transition, maintain and operate CalHEERS.
7.1.1-32 (new)	The Contractor shall adopt and maintain all Project Artifacts that are associated with this Deliverable in the Project Artifact Inventory and manage them in accordance with the Project Artifact process.
7.1.1-33 (modified)	The Contractor shall update the following appendices and attach them to the Transition-In & Transformation Master Plan: Appendix 1–SOW to Deliverable Traceability Checklist Description: A table where the Contractor identifies the SOW requirements for this Deliverable, as specified within SOW Section 8, DELIVERABLES, and includes but is not limited to: 1. SOW Requirement ID # 2. SOW Requirement Text 3. Requirement Traceability (Contractor identified traceability from the requirements to the Deliverable) 4. Requirement Fulfillment (Define how the Contractor has fulfilled the SOW requirements in the Deliverable) Appendix 2–Deliverable Compliance and Validation Checklist Description: A QA Checklist that includes, but is not limited to: 1. Deliverable Section Number and Title 2. Deliverable Requirement Statement(s) 3. Requirement Completion (How the Contractor has complied with or will comply with the requirement statements within the Deliverable)

Req #	SOW Requirement
	4. Validation Method (The method the Contractor used to validate Deliverable compliance) 5. The Contractor's QA Manager sign-off on compliance Appendix 3—Associated Artifacts Description: An extract from the Project Artifact Inventory List of artifacts associated with this Deliverable, and will include but is not limited to the following examples: 1. Artifact Name 2. Associated Parent DEL 3. State Approver 4. SI Point of Contact 5. Review Frequency 6. Submission Frequency 7. Artifact File Format 8. Artifact Location (e.g., SharePoint breadcrumb) 9. Link to artifact

7.1.2 TIP1 Execution

Table 7-2: Transition-In Execution

Req #	SOW Requirement
7.1.2-01 (new)	The Contractor shall staff, manage, lead and execute all Transition-In activities on CalHEERS as defined in this Statement of Work and in accordance with the CD-7.1-1 – Transition-In & Transformation Master Plan.
7.1.2-02 (modified)	The Contractor shall execute and oversee all activities specified in the approved TIMP throughout the Transition-In period.
7.1.2-03 (new)	The Contractor shall, during Transition-In, re-disposition all defects from Not Under Warranty (NUW) to a disposition of Warranty, as Not Under Warranty (NUW) is no longer a disposition in use on CalHEERS (refer to Section 10.1.2 - NOT UNDER WARRANTY (NUW), of the Special Provisions).
7.1.2-04 (new)	The Contractor shall collaborate with the State to develop and maintain any new Project Artifacts necessary to support this section. New artifacts shall be added to the Project Artifacts Repository and managed in accordance with the Project Artifact process.

7.1.3 TIP1 Meetings, Agendas, and Minutes

The Contractor is responsible for accurately documenting, tracking, sharing and recording the Meetings, Agendas and Minutes for any/all meeting related to Transition (Transition work plan, manager, and executive meetings). The Contractor shall perform the services described in this section.

Table 7-3: Transition Meetings, Agendas, and Minutes (CD-7.1-2)

Req #	SOW Requirement
7.1.3-01 (new)	The Contractor shall adopt the currently approved DEL <u>D-7.1-2 Transition Meetings, agendas, and Minutes</u> dated 02/05/2020 as a guide to create, in collaboration with the State, a new Transition Meetings, Agendas, and Minutes DED for review. The DED will then be the baseline for a new Transition Meetings, Agendas, and Minutes deliverable, which includes but is not limited to: 1. Introduction 2. Weekly Transition Work Plan Meeting Views 2.1 Phase View

Req #	SOW Requirement
	2.2 Tasks Completed from Prior Week View 2.3 Tasks Due for the Coming Week View 2.4 Late and Slipping Tasks View 2.5 Key Milestones View 2.6 Level of Effort Tasks View 3. Weekly Transition Meeting Cycle 4. Monthly Transition-In Work Plan Meeting
7.1.3-02 (modified)	The Contractor shall maintain sufficient Project Staff throughout the Transition-In period to satisfy and maintain compliance with all Performance Standards and Requirements identified in this Contract.
7.1.3-03 (modified)	The Contractor shall organize and facilitate at a minimum, series of three (3) meetings with the State at multiple levels to report on the progress of the Transition-In effort. Based on the information provided by the Contractor during these meetings, the State will assess whether the Contractor is on track to complete the transition and assume control and responsibility for all CalHEERS SDMO support within the Transition-In period. 1. The Contractor shall facilitate the weekly transition meeting to specifically review the details of the Transition-In Work Plan with the State and working-level teams. 2. The Contractor shall facilitate a weekly transition meeting to review the status of Transition-In activities with managers, supervisors, and leads. 3. The Contractor shall facilitate a twice monthly transition meeting for executive level audiences (e.g., CalHEERS, Sponsors) to review the overall progress of the Transition-In effort along with any key risks or issues associated with transition.
7.1.3-04 (existing)	The Contractor shall ensure that all meetings will be accompanied by meeting agendas and accurate meeting minutes as mutually agreed between the State and the Contractor.

7.1.3.1 TIP1 Transition Work Plan Meetings

The Contractor is responsible for coordinating, developing and facilitating the Transition Work Plan meetings. The Contractor shall perform the services described in this section.

Table 7-4: Transition Work Plan Meetings (CD-7.1-3)

Req #	SOW Requirement
7.1.3-05 (new)	The Contractor shall adopt the currently approved DEL D-7.1-3 Transition Work Plan Meetings dated 02/05/2020 as a guide to create, in collaboration with the State, a new Transition Work Plan Meetings DED for review. The DED will then be the baseline for a new Transition Work Plan Meetings deliverable, which includes but is not limited to: 1. Introduction 2. Weekly Transition Work Plan Meeting Views 2.1 Phase View 2.2 Tasks Completed from Prior Week View 2.3 Tasks Due for the Coming Week View 2.4 Late and Slipping Tasks View 2.5 Key Milestones View 2.6 Level of Effort Tasks View 3. Weekly Transition Meeting Cycle 4. Monthly Transition-In Work Plan Meeting
7.1.3-06 (new)	The Contractor shall staff, manage, lead and execute Transition-In Work Plan activities on the CalHEERS as defined in this Statement of Work and in accordance with the CD-7.1-3 – Transition-In Work Plan Meetings.
7.1.3-07 (new)	The Contractor shall only alter or modify this Deliverable's structure or content with the approval of the State Project Director or designee.

Req #	SOW Requirement
7.1.3-08 (existing)	The Contractor shall prepare and present a written report that contains direct outputs from the Transition-In Work Plan (Schedule). Materials provided must be easy to understand, and that includes but is not limited to the following information: 1. Tasks completed from the prior week. 2. Tasks due for the coming week 3. Areas in the work plan (Schedule) which require attention (behind schedule) 4. Critical Path analysis 5. Suggested changes to maintain the schedule timelines. 6. Schedule Issues 7. Schedule Risks 8. Other areas requiring discussion

7.1.3.2 TIP1 Transition Manager Meetings

The Contractor is responsible for coordinating, developing and facilitating the Transition Manager meetings (During both TIP1 and TIP2). The Contractor shall perform the services described in this section.

Table 7-5: Transition Manager Meetings Reports (CD-7.1-4)

Req #	SOW Requirement
7.1.3-09 (modified)	The Contractor shall adopt the currently approved DED dated 05/21/2020 as a guide to create, in collaboration with the State, a new Transition Manager Meeting Reports DED for review. The DED will then be the baseline for a new Transition Manager Meeting Reports deliverable, which includes but is not limited to: 1. Transition Progress Update Summary 2. Transition-In Work Plan (Microsoft Project High-Level Gantt Chart) with variances. 3. Transition Dashboard (Stop light metrics) covering areas such as but not limited to: a. Overall status of Transition Components b. Status by Gates (Plan, Execute, Verify, Cutover, Initial Operations, Final Review) c. Transition Component Timeliness – On Schedule, Behind < 15 Days, Behind > 15 Days d. Transition Work Plan Completion Chart – Represents the work that has been done versus the planned transition work forecast e. Total Transition Components that have reached any one (1) gate f. Overall Transition Area Status g. Top three (3) risks, issues and milestones 4. Changes 5. Issues 6. Risks 7. Communication activities 8. QA status and results: a. Migration Plan reviews - Checklists required and completed b. Test and Validation reviews - Checklists required and completed 9. Findings
7.1.3-10 (new)	The Contractor shall staff, manage, lead and execute Transition-In Manager Meeting Report activities on the CalHEERS as defined in this Statement of Work and in accordance with the CD-7.1-4 – Transition-In Manager Meetings Reports.
7.1.3-11 (new)	The Contractor shall only alter or modify this Deliverable's structure or content with the approval of the State Project Director or designee.
7.1.3-12 (existing)	The Contractor shall assist the State in creating and maintaining a Transition Dashboard as provided in the sample meeting minutes by the State in the Bidders' Library.

Req #	SOW Requirement
7.1.3-13 (existing)	The Contractor shall include a Transition Dashboard as a part of the Transition Meeting Reports. The Contractor must maintain the Transition Dashboard as a separate file for easy access and updates by both Contractor and State staff.

7.1.3.3 TIP1 Executive Meetings

Transition executive meetings will occur twice a month. The Contractor is responsible for developing the Transition Executive Meeting Report(s) that will be used to facilitate those meetings.

Table 7-6: Executive Meetings (CD-7.1-5)

Req #	SOW Requirement
7.1.3-14 (new)	The Contractor shall adopt the currently approved DED dated 10/30/2019 as a guide to create, in collaboration with the State, a new Transition-In Executive Meetings DED for review. The DED will then be the baseline for a new Transition-In Executive Meetings deliverable.
7.1.3-15 (existing)	The Contractor shall prepare and present a written report for executive level audiences in an agreed to format. The materials presented must be easy to understand, and include but not be limited to the following information: 1. Noteworthy accomplishments 2. Dashboard 3. Schedule updates 4. Key milestones 5. Critical dependencies (between the incumbent Contractor and the Contractor) 6. Key risks 7. Key issues 8. Action items 9. Other topics needing discussion

7.1.4 TIP1 Sunrise Agreement

Table 7-7: Sunrise Agreement

Req #	SOW Requirement
7.1.4-01 (new)	The Contractor shall develop, seek approval, and execute a Sunrise Agreement with the State and the incumbent SI contractor. This agreement will be arranged to ensure the successful transition of SLA liability from the incumbent SI and the SI under the new contract. The State will provide the template and a sample Agreement for the SI to use as a starting point. The Sunrise agreement will be treated as an artifact (work product) under this contract.
7.1.4-02 (new)	The Sunrise Agreement shall be signed by both the Contractor, State, and incumbent SI (of the prior contract) to mark the exact moment and under what conditions will transition of SLA-driven requirements be officially the responsibility of the contractor (under this contract).

7.1.5 TIP1 Sunset Agreement

Table 7-8: Sunset Agreement

Req #	SOW Requirement
7.1.5-01 (new)	The Contractor shall develop, seek approval, and execute a Sunset Agreement with the State and the incumbent SI contractor. This agreement will be arranged to ensure the successful transition of SLA liability from the contractor (of this contract) and the SI under a new contract. The State will provide the template and a sample Agreement for the SI to use as a starting point. The Sunset agreement will be treated as an artifact (work product) under this contract.
7.1.5-02 (new)	The Sunset Agreement shall be signed by both the Contractor (of this contract), State, and Contractor (of a new contract) to mark the exact moment and under what conditions will transition of SLA-driven requirements be officially the responsibility of the contractor (under the new contract).

7.1.6 TIP1 Final Review

The Contractor is responsible for coordinating, developing, documenting and facilitating the Transition-In Final Reviews (for both TIP1 and TIP2). The Contractor shall perform the services described in this section.

Table 7-9: TIP1 Final Review

Req #	SOW Requirement
7.1.6-01 (new)	The Contractor shall collaborate with the State to deliver and present a TIP1 Final Review presentation. The Contractor shall utilize the sample provided in the Bidders' Library to assist in creation of documentation.
7.1.6-02 (existing)	The Contractor shall conduct and facilitate a meeting for executive level audiences to show that Transition-In (TIP1) activities are complete and provide information that shows all transition components are transitioned, work plan activities are complete, and the Contractor is now responsible for all CalHEERS SDMO support.
7.1.6-03 (existing)	The Contractor shall present information in a PowerPoint presentation format which must be easy to understand, and include but not be limited to the following information: 1. Final Dashboard 2. Final Schedule 3. Issues Pertaining to Ongoing SDMO activities. 4. Lessons Learned 5. Request to Close Transition Note: The Final Review shall be conducted at or near the end of the Transition-In (TIP1) period.

7.1.7 TIP1 Work Plan (Schedule)

The Transition-In Work Plan (Schedule) encompasses the scope of activities and tasks and is used to track the progress of the Contractor's efforts during the TIP1 and TIP2 Transition-In periods for the appropriate component area identified by the State.

These activities and tasks include but are not limited to service and function migrations, knowledge transfer, training, data transfer, documentation maintenance, change management, customer support, progress reporting, facilities preparation installation, training, systems testing, quality assurance, Cutover, systems assumption, and communication.

The TIP1 Transition-In Work Plan (Schedule) also includes the integration of activities between the State, incumbent Contractor, and the Contractor transition activities, as well as incorporates risk management implications into the schedule. The Transition-In Work Plan (schedule) is

created in Microsoft Project and provides the detailed project schedule that organizes and implements the Work Breakdown Structure (WBS) as mutually developed by the Contractor and the State.

The Transition-In Work Plan (Schedule) created by the Contractor shall allow the Contractor to understand the overall timeframe required for completing Transition-In and Cutover.

Table 7-10: Transition-In Work Plan (Schedule) (CD-7.1-6)

Req #	SOW Requirement
7.1.7-01 (new)	The Contractor shall adopt the currently approved DED dated 11/15/2019 as a guide to create, in collaboration with the State, a new Transition-In Work Plan (Schedule) DED for review. The DED will then be the baseline for a new Transition-In Work Plan (Schedule) deliverable.
7.1.7-02 (modified)	The Contractor shall update and maintain a Transition-In Work Plan that represents the entire Transition-In phase as defined in the four (4) component areas of Transition-In as follows: 1. Project Management as identified in SOW Section 3, PROJECT MANAGEMENT REQUIREMENTS 2. System Change & Enhancement as identified in SOW Section 4, SYSTEM CHANGE & ENHANCEMENT REQUIREMENTS 3. Program Support as identified in SOW Section 5, PROGRAM SUPPORT REQUIREMENTS 4. Operations as identified in SOW Section 6, OPERATIONS REQUIREMENTS
7.1.7-03 (existing)	The Contractor shall develop and maintain the Transition-In Work Plan from the Transition-In Work Plan Template provided in the Bidders Library, which shall include, but not be limited to, the following information: 1. Transition schedule 2. Transition Milestones and Deliverables 3. Activities and tasks that may apply to each transition component including, but not limited to: a. Knowledge Transfer b. Training c. Data Transfer d. Documentation Maintenance e. Change Management f. Customer Support g. Progress Reporting h. Facilities Preparation/Installation i. Systems Testing j. Test and Validation k. Transition Readiness l. Quality Assurance m. Systems Assumption 4. Gantt Chart showing planned and actual start dates, finish dates, and percent complete for activities and tasks 5. Identification of critical path activities and tasks
7.1.7-04 (modified)	The Contractor shall develop a Transition-In Work Plan and schedule in accordance with the structure and project work plan timeframes in the approved Schedule Management Plan.
7.1.7-05 (existing)	The structure of the Contractor's Transition-In Work Plan shall be in compliance with the approved Schedule Management Plan, Physical Work Plan Structure, Work Breakdown Structure Outline Structure, Logical Work Plan Structure, and Define Project Resource Structure and Build Global Resource Pool.

Req #	SOW Requirement
7.1.7-06 (modified)	The extent of the detail in the Contractor's Transition-In Work Plan shall be in accordance with the approved Schedule Management Plan, and Schedule Development Process defined in SOW Section 3.2, SCHEDULE MANAGEMENT, and shall include, but not be limited to: 1. Summary tasks, tasks and subtasks with clear and meaningful tasks names. 2. Tasks or subtasks for Contractor development of each Contract Transition Phase Deliverable. 3. Tasks or subtasks for State review of each Contract Transition Phase Deliverable. 4. Tasks or subtasks for the Contractor revision of each Contract Transition Phase Deliverable after State review of each Contract Transition Phase Deliverable. 5. State review of each Contract Transition Phase Deliverable after Contractor revision of each Contract Transition Phase Deliverable. 6. State approval of each Contract Transition Phase Deliverable. 7. Predecessor and successor dependencies for tasks without subtasks. 8. Predecessor and successor dependencies for subtasks. 9. Resource assignments for tasks without subtasks. 10. Resource assignments for subtasks. 11. Estimated hours and durations for tasks without subtasks. 12. Estimated hours and durations for subtasks. 13. Custom task fields and custom resource fields as specified in the approved Schedule Management Plan, Work Plan Standards.
7.1.7-07 (existing)	The Contractor shall develop, deliver, maintain, and execute a Transition-In Work Plan that is in accordance with the sequence and project work plan timeframes specified in the approved Schedule Management Plan, Create Physical Work Plans, and Baseline Work Plans and Schedule that includes, but is not limited to, the following: 1. The Contractor's review of the Transition-In Work Plan Template provided by the State. 2. The Contractor's review of requirements and specifications in the Contract, and Appendix A-4, STATEMENT OF WORK (SOW). 3. The Contractor's comparison of the TIP1 Transition-In Work Plan Template to the requirements and specifications in the Contract, and Appendix A-4, SOW to ensure that all Milestones (WBS outline level 2 summary tasks) and Deliverables (WBS outline level 3 summary tasks) necessary for the Contractor, State, counties and incumbent Contractor to accomplish the goals, objectives, requirements, and timelines of the Transition-In phase are included in the TIP1 Transition-In Work Plan. 4. The Contractor's submission of a Schedule Change Request Form to the State Project Director or designee requesting any additions, changes or deletions to Milestones (WBS outline level 2 summary tasks) and Deliverables (WBS outline level 3 summary tasks) in the Transition-In Work Plan before the Contractor produces the finalized Transition-In Work Plan by adding Activities (WBS outline level 4 summary tasks) and Tasks (WBS outline level 5 tasks). 5. The State's review and approval of the Schedule CR Form submitted by the Contractor requesting additions, change or deletions to the Transition-In Work Plan. 6. The Contractor making approved additions, changes and deletions to the Transition-In Work Plan. 7. The Contractor's submission of the revised Transition-In Work Plan to the State Project Director or designee for review and approval. 8. The Contractor's development of the Transition-In Work Plan by adding Activities (WBS outline structure level 4 summary tasks) and tasks (WBS outline structure level 5 tasks). 9. The Contractor's submission of the finalized Transition-In Work Plan to the State Project Director or designee for review and approval. 10. The Contractor baselining the approved Transition-In Work Plan.

Req #	SOW Requirement
7.1.7-08 (existing)	The Contractor shall develop, deliver, maintain, and execute the Transition-In Work Plan in accordance with the instructions, best practices, guidelines and standards specified in the approved Schedule Management Plan, Define Project Resource Structure and Build Global Resource Pool, and Create and Integrate work plans and generate schedule.
7.1.7-09 (existing)	The Contractor shall provide a Transition-In Work Plan that identifies activities and tasks, including expected durations and completion dates, which are expected to be completed by Contractor, State, county, and incumbent Contractor Staff in order to meet the estimated Transition-In schedule.
7.1.7-10 (existing)	All tasks in the Contractor's Transition-In Work Plan shall have appropriate Contractor, State, county and incumbent Contractor resource assignments and estimated hours. Near term tasks (where near term is defined to be within 60 Business Days in the future) shall have actual resource names assigned to the tasks. Tasks that are not classified as near term may have generic resource titles (e.g., such as a role, classification or vacant position) assigned to the tasks.
7.1.7-11 (existing)	The Contractor shall document the duration of any single near-term task in the Transition-In Work Plan, and it shall not exceed ten (10) Business Days without prior approval of the State Project Director or designee.
7.1.7-12 (existing)	Near term tasks in project work plans shall be resource leveled with a maximum of 50 hours of assigned work per week for Contractor Staff and 35 hours per week maximum for State, county and incumbent Contractor Staff.
7.1.7-13 (existing)	Tasks in the Transition-In Work Plan that are assigned to the Contractor's Staff, shall be started and completed by the Contractor according to the scheduled start and finish dates of the tasks.
7.1.7-14 (existing)	The Contractor shall maintain and update the Transition-In Work Plan through the completion of Transition-In. This shall be done in accordance with the approved Schedule Management Plan, Schedule Maintenance Process, and Schedule Elaboration Process.
7.1.7-15 (existing)	The Contractor shall continue to submit the updated Transition-In Work Plan to the State Project Director or designee until Transition-In is approved and completed.
7.1.7-16 (existing)	The Contractor shall produce and include in the Transition Master Plan a Transition Milestone Schedule Summary from the baselined Transition Work Plan.

7.1.8 TIP1 Transition Components Worksheet (TCW)

Transition Component requirements address what is to be transitioned and are defined in terms of the services, functions, and other items that are being used to meet M&O support requirements.

The incumbent Contractor's Project Closeout Plan identifies inventory components for closeout which can be used to help the Contractor identify transition components for each of the M&O support areas and other transition items.

The Contractor creates a transition component inventory which identify what must be transitioned so that the Contractor can assume operational control of CalHEERS and become responsible for all M&O support.

The Contractor then manages updates to the component inventory until all components are successfully transitioned.

Table 7-11: Transition Components Worksheet (CD-7.1-7)

Req #	SOW Requirement
7.1.8-01 (new)	The Contractor shall adopt the currently approved DEL <u>D-7.1-7 System Development, Maintenance and Operations (SMDO) Project</u> dated 02/06/2020 as a guide to create, in collaboration with the State, a new Transition Components Worksheet DED for review. The DED will then be the baseline for a new Transition Components Worksheet deliverable, which includes but is not limited to: • Instructions • TCW Source
7.1.8-02 (new)	The Contractor shall staff, manage, lead and execute TCW activities on the CalHEERS as defined in this Statement of Work and in accordance with the CD-7.1-7 – Transition Components Worksheet.
7.1.8-03 (new)	The Contractor shall only alter or modify this Deliverable's structure or content with the approval of the State Project Director or designee.
7.1.8-04 (modified)	The Contractor shall utilize the Transition Component Worksheet provided in the Bidders' Library as a starting point for identifying and assessing the transition components and attribute characteristics needed to properly plan and execute transition activities for the following support areas defined in the SOW: 1. Project Management as identified in SOW Section 3, PROJECT MANAGEMENT REQUIREMENTS 2. System Change & Enhancement as identified in SOW Section 4, SYSTEM CHANGE & ENHANCEMENT REQUIREMENTS 3. Program Support as identified in SOW Section 5, PROGRAM SUPPORT REQUIREMENTS 4. Operations as identified in SOW Section 6, OPERATIONS REQUIREMENTS
7.1.8-05 (existing)	The Contractor shall create an inventory of all transition components for each of the four (4) M&O Support Areas.
7.1.8-06 (existing)	The Contractor shall update (and modify as needed) the Transition Component Worksheet with the assessment findings and use the worksheet as a guide for development of the Service and Function Migration Plans.
7.1.8-07 (existing)	The Contractor shall validate that all components which must be transitioned to include the services, functions, and other items (e.g., Deliverables) being provided by the incumbent Contractor, and their Subcontractors. These components are identified in the Transition Component Worksheet, and are consistent with the components identified in the incumbent Contractor's Project Closeout Plan, and components as stated within the SOW.
7.1.8-08 (existing)	The Contractor shall compare the Transition Component Worksheet, SOW, and the incumbent Contractor's Project Closeout Plan to identify inconsistencies.
7.1.8-09 (existing)	The Contractor shall provide the identified inconsistencies between the SOW and incumbent Contractor's Project Closeout Plan, present them as part of the weekly status meetings, and seek direction from the State Project Director or designee for resolution to problem areas.
7.1.8-10 (existing)	The Contractor shall identify any additional transition components not included within the incumbent Contractor's Project Closeout Plan or within the SOW, deemed necessary for successful transition and assumption of maintenance and operations activities.
7.1.8-11 (existing)	The Contractor shall develop, deliver, maintain, and execute the Transition Component Worksheet throughout the Transition-In process (as applicable) until all components are successfully transitioned.
7.1.8-12 (new)	The Contractor shall adopt and maintain all Project Artifacts that are associated with this Deliverable in the Project Artifact Inventory and manage them in accordance with the Project Artifact process.
7.1.8-13 (new)	The Contractor shall collaborate with the State to develop and maintain any new Project Artifacts necessary to support this section. New artifacts shall be added to the Project Artifacts Repository and managed in accordance with the Project Artifact process.

7.1.9 TIP1 Service and Function Migration

The overall goal of the Contractor's Service and Function Migration is to identify, prepare, and implement Transition-In activities that allow for a smooth transition of responsibility for services, functions, facilities, and other transition components from the incumbent Contractor to the Contractor.

7.1.9.1 Service and Function Migration Plan (SFMP)

Table 7-12: SFMP (CD-7.1-8)

Req #	SOW Requirement
7.1.9-01 (new)	The Contractor shall adopt the currently approved DEL <u>D-7.1-8 Service and Function Migration Plan</u> dated 02/27/2020 as a guide to create, in collaboration with the State, a new Service and Function Migration Work Products DED for review. The DED will then be the baseline for a new Service and Function Migration Work Products deliverable, which includes but is not limited to: 1. INTRODUCTION 1.1 Purpose 1.2 List of Reference Documents 1.3 Audience 2. SUMMARY 2.1 Scope 3. APPROACH 3.1 Development, Review, and Acceptance Process 3.2 Work Product Storage and Content Management 3.3 Add/Remove Work Product Process 3.4 Update Work Product Process 4. ASSUMPTIONS, CONSTRAINTS AND RISKS 4.1 Assumptions 4.2 Constraints 4.3 Risks 5. REQUIREMENTS 6. ROLES AND RESPONSIBILITIES 7. GLOSSARY AND ACRONYMS APPENDIX 1: SOW TO DELIVERABLE TRACEABILITY CHECKLIST APPENDIX 2: DELIVERABLE COMPLIANCE AND VALIDATION CHECKLIST APPENDIX 3: ASSOCIATED ARTIFACTS APPENDIX 4: WORK PRODUCT TEMPLATE APPENDIX 5: WORK PRODUCT PRIORITIZATION LIST
7.1.9-02 (new)	The Contractor shall staff, manage, lead and execute SFMP activities on the CalHEERS as defined in this Statement of Work and in accordance with the CD-7.1-8 – Service and Function Migration Plan.
7.1.9-03 (new)	The Contractor shall only alter or modify this Deliverable's structure or content with the approval of the State Project Director or designee.
7.1.9-04 (existing)	The Contractor shall accurately provide to the State copies of specified, available Work Product upon the State's request.
7.1.9-05 (existing)	The Contractor shall ensure the Work Products shall accurately be deemed works made for hire of the State for all purposes of copyright law, and copyright shall accurately belong solely to the State.
7.1.9-06 (existing)	In the event that any such Work Product is adjudged to be not a work made for hire, the Contractor agrees to assign, and hereby assigns, all copyright in such Work Product to the State.
7.1.9-07 (existing)	The Contractor shall accurately, at the expense of the State, assist the State or its nominees to obtain copyrights and trademarks for all such Work Products in the United

Req #	SOW Requirement
	States and any other countries.
7.1.9-08 (existing)	The Contractor agrees to execute all papers and to give all facts known to it necessary to secure United States or foreign country copyrights and to transfer or cause to transfer to the State all the right, title and interest in and to such Work Products (subject to Contractor's rights).
7.1.9-09 (existing)	The Contractor shall waive and not assert any moral rights it may have in any such works.
7.1.9-10 (existing)	As between the parties, the Work Products shall accurately be deemed works made for hire of the State for all purposes of copyright law, and copyright shall accurately belong solely to the State.
7.1.9-11 (new)	The Contractor shall adopt and maintain all Project Artifacts that are associated with this Deliverable in the Project Artifact Inventory and manage them in accordance with the Project Artifact process.
7.1.9-12 (new)	The Contractor shall collaborate with the State to develop and maintain any new Project Artifacts necessary to support this section. New artifacts shall be added to the Project Artifacts Repository and managed in accordance with the Project Artifact process.
7.1.9-13 (new)	The Contractor shall update the following appendices and attach them to the Service and Function Migration Plan Appendix 1—SOW to Deliverable Traceability Checklist Description: A table where the Contractor identifies the SOW requirements for this Deliverable, as specified within SOW Section 8, DELIVERABLES, and includes but is not limited to: 1. SOW Requirement ID # 2. SOW Requirement Text 3. Requirement Traceability (Contractor identified traceability from the requirements to the Deliverable) 4. Requirement Fulfillment (Define how the Contractor has fulfilled the SOW requirements in the Deliverable) Appendix 2—Deliverable Compliance and Validation Checklist Description: A QA Checklist that includes, but is not limited to: 1. Deliverable Section Number and Title 2. Deliverable Requirement Statement(s) 3. Requirement Completion (How the Contractor has complied with or will comply with the requirement statements within the Deliverable) 4. Validation Method (The method the Contractor used to validate Deliverable compliance) 5. The Contractor's QA Manager sign-off on compliance Appendix 3—Associated Artifacts Description: An extract from the Project Artifact Inventory List of artifacts associated with this Deliverable, and will include but is not limited to the following examples: 1. Artifact Name 2. Associated Parent DEL 3. State Approver 4. SI Point of Contact 5. Review Frequency 6. Submission Frequency 7. Artifact File Format 8. Artifact Location (e.g., SharePoint breadcrumb) 9. Link to artifact

7.1.9.2 Project Management Service and Function Migration

Table 7-13: Project Management SFMP (CD-7.1-9)

Req #	SOW Requirement
7.1.9-14 (new)	The Contractor shall review the currently approved DEL ~~CD~~-7.1-9 Project Management Service and Function Migration dated 02/29/2020 as a guide to create, in collaboration with the State, a new Project Management Service and Migration Plan DED for review. The DED will then be the baseline for a new Project Management Service and Migration Plan deliverable, which includes but is not limited to: 1. INTRODUCTION 1.1 Purpose 1.2 List of Reference Documents 1.3 Audience 2. SUMMARY 2.1 Scope 3. APPROACH 3.1 Overall Approach 3.2 Approach to Transition Work Products 3.3 Resources Assigned 3.4 Project Management Component Area (SOW 3.1) 3.5 Schedule Management Component Area (SOW 3.2) 3.6 Cost/Cost Estimating Management Component Area (SOW 3.3) 3.7 Human Resource Management Component (SOW 3.4) 3.8 Risk and Issue Management Component Area (SOW 3.5) 3.9 Communication Management Component Area (SOW 3.6) 3.10 Document Management Component Area (SOW 3.7) 3.11 SOW Requirements Management Component Area (SOW 3.8) 3.12 Problem Escalation Component Area (SOW 3.9) 3.13 Quality Management Component Area (SOW 3.10) 3.14 Contract Management Component Area (SOW 3.11) 3.15 CalHEERS Project Enterprise Tools Component Area (SOW 3.12) 3.16 CalHEERS Project Processes Component Area (SOW 3.13) 3.17 CalHEERS Project Training Component Area (SOW 3.14) 3.18 Strategic Planning and Management Component Area (SOW 3.15) 3.19 Policy and Legislative Impact Analysis Impact Analysis and Change Support Component Area (SOW 3.16) 3.20 Audit Evaluation and Findings Services Component Area (SOW 3.17) 3.21 CalHEERS Components Not Listed in SOW, but are covered in Contractor's TOP 4. ASSUMPTIONS, CONSTRAINTS AND RISKS 4.1 Assumptions 4.2 Constraints 4.3 Issues 4.4 Risk Management 4.4.1 Known Risks 4.4.2 Emergent Risks 5. ROLES AND RESPONSIBILITIES 6. GLOSSARY AND ACRONYMS 7. REPORTING AND COMMUNICATIONS 7.1 Timing, Audience, and Media 7.2 Readiness Confidence Criteria APPENDIX 1: SOW TO DELIVERABLE TRACEABILITY CHECKLIST APPENDIX 2: DELIVERABLE COMPLIANCE AND VALIDATION CHECKLIST APPENDIX 3: ASSOCIATED ARTIFACTS APPENDIX 4: CONTRACTOR CUTOVER TIMELINE

Req #	SOW Requirement
7.1.9-15 (new)	The Contractor shall staff, manage, lead and execute PM SFMP activities on the CalHEERS as defined in this Statement of Work and in accordance with the CD-7.1-9 – Project Management Service and Function Migration.
7.1.9-16 (new)	The Contractor shall only alter or modify this Deliverable's structure or content with the approval of the State Project Director or designee.
7.1.9-17 (existing)	The Contractor shall develop, deliver, maintain and execute a Project Management Service and Function Migration Plan to specifically assist the State in defining and executing the migration of all project management functions needed in support of SOW Section 3, PROJECT MANAGEMENT REQUIREMENTS.
7.1.9-18 (existing)	The Contractor shall execute and oversee all activities specified in the approved Project Management Service and Function Migration Plan throughout the Transition-In period.
7.1.9-19 (existing)	The Contractor shall manage updates and changes to the Project Management Service and Function Migration Plan (as needed) throughout the Transition-In period.
7.1.9-20 (existing)	The Contractor shall utilize the Transition Component Worksheet to identify the Project Management transition components that need to be included as part of the service and function migration plan for Project Management.
7.1.9-21 (existing)	The Contractor's Project Management Service and Function Migration Plan shall include, but not be limited to, the following information: 1. Definition of how each service or function, being performed by the incumbent Contractor, will be operationalized and Cutover to the Contractor. 2. Identification of the activities and tasks that must be accomplished to allow for a successful transition of operational control of a service or function. These activities include preparatory actions being taken to obtain service Contracts, establish capabilities, prepare for testing/validation, and those actions taken subsequent to successful testing/validation, needed to implement Cutover. 3. Definition of the roles and responsibilities for completing migration activities and tasks. 4. Plan the timing, audience, media and message for communication events. Define the measurements to validate or test the completion of transition of services or functions. 5. Provide the plan for the Readiness Reviews in coordination with the State and the incumbent Contractor's Project Closeout Plan. 6. Identification of Cutover activities and the target Cutover date. 7. Identification of risks and issues tied to the migration and planned mitigation measures/issues resolution. 8. Definition of contingency plans to troubleshoot high risk transition activities. Identify what technical advice and assistance the Contractor will require from the incumbent Contractor (e.g., number of hours, position expertise).
7.1.9-22 (existing)	The Contractor's Project Management Service and Function Migration Plan shall explain what the Contractor proposes to do to successfully assume all Project Management related M&O responsibilities including but not limited to the following information: 1. Establishing an approach, process, and procedures needed to assume responsibility for all services, functions, and other items identified as transition components. 2. Explaining how the Contractor will demonstrate readiness, provide evidence and confirmation that they are prepared to accept responsibility, and obtain State approval to do so with an effective date.
7.1.9-23 (existing)	The Contractor shall provide a Project Management Service and Function Migration Plan that explains how training and knowledge transfer activities will occur (e.g., materials, courses, Question & Answer (Q&A) session preparation, dates, times, participants) to familiarize the State staff with all of the Contractor's operations, processes and tools.
7.1.9-24 (existing)	The Contractor shall be responsible to ensure that State staff are familiar with all of the Contractor's services and any of the new processes and tools used by the Contractor upon transition from the incumbent Contractor (e.g., CalHEERS Service Desk).

Req #	SOW Requirement
7.1.9-25 (existing)	The Contractor shall provide leadership in working with the State and the incumbent Contractor to integrate the incumbent Contractor's Closeout Plan and Closeout Work Plan with the Contractor's Project Management Service and Function Migration Plan.
7.1.9-26 (existing)	The Contractor shall complete transition and assume responsibility for all project management related business services and functions.
7.1.9-27 (existing)	The Contractor shall participate in the transfer of data and files including but not limited to e-mails, historical transmission files, archived database records, documentation and any other project management related data files.
7.1.9-28 (new)	The Contractor shall collaborate with the State to develop, implement, and maintain a Content Management approach as part of the Document Management Component that identifies transition activities to mature the Project SharePoint site and other content management tools utilized by the Project.
7.1.9-29 (new)	The Contractor shall adopt and maintain all Project Artifacts that are associated with this Deliverable in the Project Artifact Inventory and manage them in accordance with the Project Artifact process.
7.1.9-30 (new)	The Contractor shall collaborate with the State to develop and maintain any new Project Artifacts necessary to support this section. New artifacts shall be added to the Project Artifacts Repository and managed in accordance with the Project Artifact process.
7.1.9-31 (modified)	The Contractor shall update the following appendices and attach them to the Project Management Service and Function Migration Plan: Appendix 1—SOW to Deliverable Traceability Checklist Description: A table where the Contractor identifies the SOW requirements for this Deliverable, as specified within SOW Section 8, DELIVERABLES, and includes but is not limited to: 1. SOW Requirement ID # 2. SOW Requirement Text 3. Requirement Traceability (Contractor identified traceability from the requirements to the Deliverable) 4. Requirement Fulfillment (Define how the Contractor has fulfilled the SOW requirements in the Deliverable) Appendix 2—Deliverable Compliance and Validation Checklist Description: A QA Checklist that includes, but is not limited to: 1. Deliverable Section Number and Title 2. Deliverable Requirement Statement(s) 3. Requirement Completion (How the Contractor has complied with or will comply with the requirement statements within the Deliverable) 4. Validation Method (The method the Contractor used to validate Deliverable compliance) 5. The Contractor's QA Manager sign-off on compliance Appendix 3—Associated Artifacts Description: An extract from the Project Artifact Inventory List of artifacts associated with this Deliverable, and will include but is not limited to the following examples: 1. Artifact Name 2. Associated Parent DEL 3. State Approver 4. SI Point of Contact 5. Review Frequency 6. Submission Frequency 7. Artifact File Format 8. Artifact Location (e.g., SharePoint breadcrumb) 9. Link to artifact

7.1.9.3 System Change & Enhancement SFMP

Table 7-14: System Change & Enhancement SFMP (CD-7.1-10)

Req #	SOW Requirement
7.1.9-32 (new)	The Contractor shall review the currently approved DEL D-7.1-10 Maintenance (via CR) Service and Function Migration Plan dated 02/28/2020 as a guide to create, in collaboration with the State, a new System Change & Enhancement Service and Function Migration Plan DED for review. The DED will then be the baseline for a new System Change & Enhancement Service and Function Migration Plan deliverable, which includes but is not limited to: 1. INTRODUCTION 1.1 Purpose 1.2 List of Reference Documents 1.3 Audience 2. SUMMARY 2.1 Scope 3. APPROACH 3.1 Overall Approach 3.2 Approach to Transition Work Products 3.3 Resources Assigned 3.4 System/Software Development Lifecycle (SDLC) Component Area (SOW 4.1) 3.5 Change Management and Configuration Management (System) Component Area (SOW 4.2) 3.6 Change/Refresh/Upgrades Component Area (SOW 4.3) 3.7 Code Development Component Area (SOW 4.4) 3.8 System Requirements Management Component Area (SOW 4.5) 3.9 Release Management Component Area (SOW 4.6) 3.10 Organization & Business Change Management Component Area (SOW 4.7) 3.11 Testing Component Area (SOW 4.8) 3.12 Defect Management Component Area (SOW 4.9) 4. ASSUMPTIONS, CONSTRAINTS AND RISKS 4.1 Assumptions 4.2 Constraints 4.3 Issues 4.4 Risk Management 4.4.1 Known Risks 4.4.2 Emergent Risks 5. ROLES AND RESPONSIBILITIES 6. GLOSSARY AND ACRONYMS 6.1 Glossary and Acronyms list can be found at this SharePoint link. 7. REPORTING AND COMMUNICATION 7.1 Timing, Audience, and Media 7.2 Readiness Confidence Criteria APPENDIX 1: SOW TO DELIVERABLE TRACEABILITY CHECKLIST APPENDIX 2: DELIVERABLE COMPLIANCE AND VALIDATION CHECKLIST APPENDIX 3: ASSOCIATED ARTIFACTS APPENDIX 4: CONTRACTOR CUTOVER TIMELINE
7.1.9-33 (new)	The Contractor shall staff, manage, lead and execute System Change & Enhancement SFMP activities on the CalHEERS as defined in this Statement of Work and in accordance with the CD-7.1-10 – System Change & Enhancement Service and Function Migration Plan.
7.1.9-34 (new)	The Contractor shall only alter or modify this Deliverable's structure or content with the approval of the State Project Director or designee.

Req #	SOW Requirement
7.1.9-35 (modified)	The Contractor shall develop, deliver, maintain and execute a System Change & Enhancement Service and Function Migration Plan to specifically assist the State in defining and executing the migration of all services and functions needed in support of SOW Section 4, SYSTEM CHANGE & ENHANCEMENT REQUIREMENTS.
7.1.9-36 (modified)	The Contractor shall execute and oversee all activities specified in the approved System Change & Enhancement Service and Function Migration Plan throughout the Transition-In period.
7.1.9-37 (modified)	The Contractor shall manage updates and changes to the System Change & Enhancement Service and Function Migration Plan (as needed) throughout the Transition-In period.
7.1.9-38 (modified)	The Contractor shall utilize the Transition Component Worksheet to identify System Change & Enhancement transition components that need to be included as part of the service and function migration plan for System Change & Enhancement .
7.1.9-39 (modified)	The Contractor shall provide a System Change & Enhancement Service and Function Migration Plan that includes, but is not limited to, the following information: 1. Definition of how each service or function, being performed by the incumbent Contractor, will be operationalized and Cutover to the Contractor. 2. Identification the activities and tasks that must be accomplished to allow for a successful transition of operational control of a service or function. These activities include preparatory actions being taken to obtain service Contracts, establish capabilities, prepare for testing/validation, and those actions taken subsequent to successful testing/validation, needed to implement Cutover. 3. Definition of the roles and responsibilities for completing migration activities and tasks. 4. A Plan of the timing, audience, media and message for communication events. Definition of the measurements to validate or test the completion of transition of services or functions. 5. A plan for the Readiness Reviews in coordination with the State and the incumbent Contractor's Project Closeout Plan. 6. Identification of Cutover activities and the target Cutover date. 7. Identification of risks and issues tied to the migration and planned mitigation measures/issues resolution. 8. Definition of contingency plans to troubleshoot high risk transition activities. Identify what technical advice and assistance the Contractor will require from the incumbent Contractor (e.g., number of hours, position expertise).
7.1.9-40 (modified)	The Contractor shall provide a System Change & Enhancement Service and Function Migration Plan that explains how training and knowledge transfer activities will occur (e.g., materials, courses, Q&A session preparation, dates, times, participants) to familiarize the State staff with all of the Contractor's operations, processes and tools.
7.1.9-41 (existing)	The Contractor shall be responsible for ensuring that State staff are familiar with all of the Contractor's services and any of the new processes and tools used by the Contractor upon transition from the incumbent Contractor.
7.1.9-42 (modified)	The Contractor shall participate in the transfer of data and files including but not limited to e-mails, historical transmission files, archived database records, documentation, software configuration items, test scenarios, test cases and scripts, test data and any other System Change & Enhancement related data files.
7.1.9-43 (modified)	The Contractor shall take over the CalHEERS Software as modified and provide a signed formal letter of acceptance, which states that the Contractor accepts responsibility for the source code.
7.1.9-44 (existing)	The Contractor shall take all actions required to install the component systems equipment and software required to support application maintenance at their development site.
7.1.9-45 (existing)	The Contractor, in consultation with the State staff, shall review and transfer all existing open and closed CRs and attachments into the Contractor's CR tool.

Req #	SOW Requirement
7.1.9-46 (existing)	The Contractor shall transition all System/Software Development Life Cycle (SDLC) Support Functions, required to support defect resolution, change management, and release management requirements in coordination with the incumbent Contractor's Project Closeout Plan that includes but is not limited to the following information: 1. Design 2. Development 3. Tools 4. Data 5. Testing 6. Defect Management 7. Code repository and source code 8. Nonproduction environments 9. UAT support activities 10. Migration 11. Warranties 12. All related documentation
7.1.9-47 (new)	The Contractor shall adopt and maintain all Project Artifacts that are associated with this Deliverable in the Project Artifact Inventory and manage them in accordance with the Project Artifact process.
7.1.9-48 (new)	The Contractor shall collaborate with the State to develop and maintain any new Project Artifacts necessary to support this section. New artifacts shall be added to the Project Artifacts Repository and managed in accordance with the Project Artifact process.
7.1.9-49 (modified)	The Contractor shall update the following appendices and attach them to the System Change & Enhancement Service and Function Migration Plan Appendix 1—SOW to Deliverable Traceability Checklist Description: A table where the Contractor identifies the SOW requirements for this Deliverable, as specified within SOW Section 8, DELIVERABLES, and includes but is not limited to: 1. SOW Requirement ID # 2. SOW Requirement Text 3. Requirement Traceability (Contractor identified traceability from the requirements to the Deliverable) 4. Requirement Fulfillment (Define how the Contractor has fulfilled the SOW requirements in the Deliverable) Appendix 2—Deliverable Compliance and Validation Checklist Description: A QA Checklist that includes, but is not limited to: 1. Deliverable Section Number and Title 2. Deliverable Requirement Statement(s) 3. Requirement Completion (How the Contractor has complied with or will comply with the requirement statements within the Deliverable) 4. Validation Method (The method the Contractor used to validate Deliverable compliance) 5. The Contractor's QA Manager sign-off on compliance Appendix 3—Associated Artifacts Description: An extract from the Project Artifact Inventory List of artifacts associated with this Deliverable, and will include but is not limited to the following examples: 1. Artifact Name 2. Associated Parent DEL 3. State Approver 4. SI Point of Contact 5. Review Frequency 6. Submission Frequency

Req #	SOW Requirement
	7. Artifact File Format 8. Artifact Location (e.g., SharePoint breadcrumb) 9. Link to artifact

7.1.9.4 Program Support SFMP

Table 7-15: Program Support SFMP (CD-7.1-11)

Req #	SOW Requirement
7.1.9-50 (new)	The Contractor shall review the currently approved DEL D-7.1-11 Maintenance (via Program Support) Service and Function Migration Plan dated 02/28/2020 as a guide to create, in collaboration with the State, a new Program Support Service and Function Migration Plan DED for review. The DED will then be the baseline for a new Program Support Service and Function Migration Plan deliverable, which includes but is not limited to: 1. INTRODUCTION 1.1 Purpose 1.2 List of Reference Documents 1.3 Audience 2. SUMMARY 2.1 Scope 3. APPROACH 3.1 Overall Approach 3.2 Approach to Transition Work Products 3.3 Resources Assigned 3.4 Program Support Services Component Area (SOW 5.1) 3.5 Consumer Experience Services Component Area (SOW 5.2) 3.6 Reasonable Opportunity Period Batch Services Component Area (SOW 5.3) 3.7 BOT Services Component Area (SOW 5.4) 3.8 Small Change Notices Services Component Area (SOW 5.5) 3.9 Salesforce Application Maintenance Services Component Area (SOW 5.6) 3.10 Intelligent Document Processing Services Component Area (SOW 5.7) 3.11 Application Maintenance Services Component Area (SOW 5.8) 3.12 Usability Research Services Component Area (SOW 5.9) 3.13 Electronic Health Information Transfer (eHIT) Services Component Area (SOW 5.10) 3.14 Federal Regulatory Analysis and Implementation Services Component Area (SOW 5.11) 3.15 State Regulatory Analysis and Implementation Services Component Area (SOW 5.12) 3.16 Data Usage & Analytics Innovations Component Area (SOW 5.13) 3.17 Print Mail Center Support Services Component Area (SOW 5.14) 3.18 General Innovations Component Area (SOW 5.15) 3.19 Data Usage Innovations Component Area (SOW 5.16) 3.20 Consumer Journey & Experience Innovations Component Area (SOW 5.17) 3.21 Artificial Intelligence Innovations Component Area (SOW 5.18) 3.22 Organizational Innovations Component Area (SOW 5.19) 3.23 Security Innovations Component Area (SOW 5.20) 4. ASSUMPTIONS, CONSTRAINTS AND RISKS 4.1 Assumptions 4.2 Constraints 4.3 Issues 4.4 Risk Management 4.4.1 Known Risks

Req #	SOW Requirement
	4.4.2 Emergent Risks 5. ROLES AND RESPONSIBILITIES 6. GLOSSARY AND ACRONYMS 7. REPORTING AND COMMUNICATION 7.1 Timing, Audience, and Media 7.2 Readiness Measurement Criteria APPENDIX 1: SOW TO DELIVERABLE TRACEABILITY CHECKLIST APPENDIX 2: DELIVERABLE COMPLIANCE AND VALIDATION CHECKLIST APPENDIX 3: ASSOCIATED ARTIFACTS APPENDIX 2: CONTRACTOR CUTOVER TIMELINE
7.1.9-51 (new)	The Contractor shall staff, manage, lead and execute Program Support SFMP activities on the CalHEERS as defined in this Statement of Work and in accordance with the CD-7.1-11 –Program Support Service and Function Migration Plan.
7.1.9-52 (new)	The Contractor shall only alter or modify this Deliverable's structure or content with the approval of the State Project Director or designee.
7.1.9-53 (modified)	The Contractor shall develop, deliver, maintain and execute a Program Support Service and Function Migration Plan to specifically assist the State in defining and executing the migration of all services and functions needed in support of SOW Section 5, PROGRAM SUPPORT REQUIREMENTS.
7.1.9-54 (modified)	The Contractor shall execute and oversee all activities specified in the approved Program Support Service and Function Migration Plan throughout the Transition-In period.
7.1.9-55 (modified)	The Contractor shall utilize the Transition Component Worksheet to identify the Program Support transition components that need to be included as part of the service and function migration plan for Program Support.
7.1.9-56 (modified)	The Contractor shall provide a Program Support Service and Function that includes but is not limited to the following information: 1. Definition of how each service or function, being performed by the incumbent Contractor, will be operationalized and Cutover to the Contractor. 2. Identification of the activities and tasks that must be accomplished to allow for a successful transition of operational control of a service or function. These activities include preparatory actions being taken to establish and prepare facilities, obtain service Contracts, establish capabilities, prepare for testing/validation, and those actions taken subsequent to successful testing/validation, needed to implement Cutover. 3. Definition of the roles and responsibilities for completing migration activities and tasks. 4. A Plan of the timing, audience, media and message for communication events. 5. Definition the measurements to validate or test the completion of transition of services or functions. 6. A Plan for the Readiness Reviews in coordination with the State and the incumbent Contractor's Project Closeout Plan. 7. Identification of Cutover activities and the target Cutover date. 8. Identification of risks and issues tied to the migration and planned mitigation measures/issues resolution. 9. Definition of the contingency plans to troubleshoot high risk transition activities. 10. Identification of what technical advice and assistance the Contractor will require from the incumbent Contractor (e.g., number of hours, position expertise). Include how and where the Contractor intends to stand up component subsystems, the CalHEERS Service Desk and Program Support Services (back office). 11. Include facilities preparation and installation planning. The Contractor facilities will be used to accommodate the delivery of services and functions that support the maintenance and operations of CalHEERS.

Req #	SOW Requirement
7.1.9-57 (modified)	The Contractor shall provide an Program Support Service and Function Migration Plan that addresses how and when data will be migrated for component subsystems, service desk, archives, nonproduction environments, and contained in tools used to support M&O activities.
7.1.9-58 (modified)	The Contractor shall provide an Program Support Service and Function Migration Plan that explains what the Contractor proposes to do to successfully assume complete and full operation of CalHEERS and all related M&O responsibilities including, but not limited to: 1. Explaining how the Contractor will demonstrate readiness, provide evidence and confirmation that they are prepared to accept responsibility, and obtain State approval to do so with an effective date. 2. Establishing an approach, process, and procedures needed to Cutover and assume responsibility for all services, functions, and activities identified as transition components.
7.1.9-59 (modified)	The Contractor shall provide an Program Support Service and Function Migration Plan that explains how training and knowledge transfer activities will occur (e.g., materials, courses, Q&A session preparation, dates, times, participants) to familiarize the State staff with all of the Contractor's operations, processes and tools.
7.1.9-60 (existing)	The Contractor shall be responsible for ensuring that State staff are familiar with all of the Contractor's services and any of the new processes and tools used by the Contractor upon transition from the incumbent Contractor (e.g., CalHEERS Service Desk).
7.1.9-61 (existing)	The Contractor shall transition all incumbent Contractor's Print Center Services in coordination with the incumbent Contractor's Project Closeout Plan and Operations Manual.
7.1.9-62 (existing)	The Contractor shall transition all CalHEERS Website Services in coordination with the incumbent Contractor's Project Closeout Plan.
7.1.9-63 (existing)	The Contractor shall transition all Blind or Visually Impaired (BVI) Services in coordination with the incumbent Contractor's Project Closeout Plan.
7.1.9-64 (new)	The Contractor shall adopt and maintain all Project Artifacts that are associated with this Deliverable in the Project Artifact Inventory and manage them in accordance with the Project Artifact process.
7.1.9-65 (new)	The Contractor shall collaborate with the State to develop and maintain any new Project Artifacts necessary to support this section. New artifacts shall be added to the Project Artifacts Repository and managed in accordance with the Project Artifact process.
7.1.9-66 (modified)	The Contractor shall update the following appendices and attach them to the Program Support Service and Function Migration Plan Appendix 1–SOW to Deliverable Traceability Checklist Description: A table where the Contractor identifies the SOW requirements for this Deliverable, as specified within SOW Section 8, DELIVERABLES, and includes but is not limited to: 1. SOW Requirement ID # 2. SOW Requirement Text 3. Requirement Traceability (Contractor identified traceability from the requirements to the Deliverable) 4. Requirement Fulfillment (Define how the Contractor has fulfilled the SOW requirements in the Deliverable) Appendix 2–Deliverable Compliance and Validation Checklist Description: A QA Checklist that includes, but is not limited to: 1. Deliverable Section Number and Title 2. Deliverable Requirement Statement(s) 3. Requirement Completion (How the Contractor has complied with or will comply with the requirement statements within the Deliverable)

Req #	SOW Requirement
	4. Validation Method (The method the Contractor used to validate Deliverable compliance) 5. The Contractor's QA Manager sign-off on compliance Appendix 3—Associated Artifacts Description: An extract from the Project Artifact Inventory List of artifacts associated with this Deliverable, and will include but is not limited to the following examples: 1. Artifact Name 2. Associated Parent DEL 3. State Approver 4. SI Point of Contact 5. Review Frequency 6. Submission Frequency 7. Artifact File Format 8. Artifact Location (e.g., SharePoint breadcrumb) 9. Link to artifact

7.1.9.5 Operations SFMP

Table 7-16: Operations SFMP (CD-7.1-12)

Req #	SOW Requirement
7.1.9-67 (new)	The Contractor shall review the currently approved DEL ~~CD~~-7.1-12 Operations Service and Function Migration Plan dated 02/28/2020 as a guide to create, in collaboration with the State, a new Operations Service and Function Migration Plan DED for review. The DED will then be the baseline for a new Operations Service and Function Migration Plan deliverable, which includes but is not limited to: 1. INTRODUCTION 1.1 Purpose 1.2 List of Reference Documents 1.3 Audience 2. SUMMARY 2.1 Scope 3. APPROACH 3.1 Overall Approach 3.2 Approach to Transition Work Products 3.3 Resources Assigned 3.4 Operations Planning and Management Component Area (SOW 6.1) 3.5 Operations Manual Component Area (SOW 6.2) 3.6 Operations Reporting, Data, and Analytics Component Area (SOW 6.3) 3.7 Operations Maintenance Component Area (SOW 6.4) 3.8 Interface Support Component Area (SOW 6.5) 3.9 Technology Refresh Component Area (SOW 6.6) 3.10 System Security Component Area (SOW 6.7) 3.11 Data Retention, Backup and Recovery Component Area (SOW 6.8) 3.12 Data Management Component Area (SOW 6.9) 3.13 Technology Recovery Component Area (SOW 6.10) 3.14 Business Continuity Component Area (SOW 6.11) 3.15 System Environments Component Area (SOW 6.12) 3.16 System Performance Component Area (SOW 6.13) 3.17 System Hardware/Software Component Area (SOW 6.14) 3.18 Problem Management Component Area (SOW 6.15) 3.19 Help Desk Services Component Area (SOW 6.16)

Req #	SOW Requirement
	3.20 Hosting Services Component Area (SOW 6.17) 3.21 Project Support Services Component Area (SOW 6.18) 3.22 Service Center Services Component Area (SOW 6.19) 3.23 Website Management Component Area (SOW 6.20) 3.24 ServiceNow, SharePoint, and EWM 4. ASSUMPTIONS, CONSTRAINTS AND RISKS 4.1 Assumptions 4.2 Constraints 4.3 Issues 4.4 Risk Management 4.4.1 Known Risks 4.4.2 Emergent Risks 5. ROLES AND RESPONSIBILITIES 6. GLOSSARY AND ACRONYMS 7. REPORTING AND COMMUNICATIONS 7.1 Timing, Audience, and Media 7.2 Readiness Confidence Criteria APPENDIX 1: SOW TO DELIVERABLE TRACEABILITY CHECKLIST APPENDIX 2: DELIVERABLE COMPLIANCE AND VALIDATION CHECKLIST APPENDIX 3: ASSOCIATED ARTIFACTS APPENDIX 4: CONTRACTOR CUTOVER TIMELINE
7.1.9-68 (new)	The Contractor shall staff, manage, lead and execute Operations SFMP activities on the CalHEERS as defined in this Statement of Work and in accordance with the CD-7.1-12 – Operations Service and Function Migration Plan.
7.1.9-69 (new)	The Contractor shall only alter or modify this Deliverable's structure or content with the approval of the State Project Director or designee.
7.1.9-70 (modified)	The Contractor shall develop, deliver, maintain and execute an Operations Service and Function Migration Plan to specifically assist the State in defining and executing the migration of all services and functions needed in support of SOW Section 6, OPERATIONS REQUIREMENTS.
7.1.9-71 (existing)	The Contractor shall execute and oversee all activities specified in the approved Operations Service and Function Migration Plan throughout the Transition-In period.
7.1.9-72 (existing)	The Contractor shall manage updates and changes to the Operations Service and Function Migration Plan (as needed) throughout the Transition-In period.
7.1.9-73 (existing)	The Contractor shall utilize the Transition Component Worksheet to identify the Operations transition components that need to be included as part of the service and function migration plan for Operations.
7.1.9-74 (existing)	The Contractor shall provide an Operations Service and Function Migration Plan that includes but is not limited to the following information: 1. Definition of how each service or function, being performed by the incumbent Contractor, will be operationalized and Cutover to the Contractor. 2. Identification of the activities and tasks that must be accomplished to allow for a successful transition of operational control of a service or function. These activities include preparatory actions being taken to establish and prepare facilities, obtain service Contracts, establish capabilities, prepare for testing/validation, and those actions taken subsequent to successful testing/validation, needed to implement Cutover. 3. Definition of the roles and responsibilities for completing migration activities and tasks. 4. A Plan of the timing, audience, media and message for communication events. Define the measurements to validate or test the completion of transition of services or functions. 5. A Plan for the Readiness Reviews in coordination with the State and the incumbent Contractors Project Closeout Plan. 6. Identification of Cutover activities and the target Cutover date.

Req #	SOW Requirement
	7. Identification of risks and issues tied to the migration and planned mitigation measures/issues resolution. 8. Definition of contingency plans to troubleshoot high risk transition activities. Identify what technical advice and assistance the Contractor will require from the incumbent Contractor (e.g., number of hours, position expertise)
7.1.9-75 (modified)	The Contactor shall provide an Operations Service and Function Migration Plan that explains what the Contractor proposes to do to successfully assume complete and full operation of CalHEERS and all related M&O responsibilities including but not limited to: 1. Explaining how the Contractor will demonstrate readiness, provide evidence and confirmation that they are prepared to accept responsibility, and obtain State approval to do so with an effective date. 2. Establishing an approach, process, and procedures needed to Cutover and assume responsibility for all services, functions, and activities identified as transition components.
7.1.9-76 (existing)	The Contractor shall provide an Operations Service and Function Migration Plan that explains how training and knowledge transfer activities will occur (e.g., materials, courses, Q&A session preparation, dates, times, participants) to familiarize the State staff with all of the Contractor's operations, processes and tools.
7.1.9-77 (existing)	The Contractor shall be responsible for ensuring that State staff are familiar with all of the Contractor's services and any of the new processes and tools used by the Contractor upon transition from the incumbent Contractor.
7.1.9-78 (existing)	The Contractor shall participate in the transfer of data and files including but not limited to e-mails, historical transmission files, archived database records, historical system logs, documentation, and any other Operations related data files that would be mandatory or beneficial to the continuance of the system.
7.1.9-79 (existing)	The Contractor shall provide an Operations Service and Function Migration Plan that includes provisions for transition of all Data Management Functions, including, but not limited to the following items in the incumbent Contractor's Project Closeout Plan: 1. Data Administration 2. Database Administration 3. Data Encryption 4. Data Archiving 5. Backup and Recovery 6. Test Data Management
7.1.9-80 (modified)	The Contractor shall provide an Operations Service and Function Migration Plan that includes provisions for any facilities they are establishing to support a service or function. Such services or functions that may require facilities include but are not limited to the following: 1. Print Center Facility 2. ADA Support Facilities 3. Service Desk Facilities 4. Workload Automation (AutoSys - batch processing) 5. Service Center Facilities
7.1.9-81 (modified)	The Contractor shall provide an Operations Service and Function Migration Plan that includes, but is not limited to the following topics relating the facility preparation and installation planning: 1. Approach 2. Strategy (Prime and backup facilities) 3. Roles and Responsibilities (Contractor, state, Data Center, and other key stakeholders) 4. Schedule 5. Risks 6. Security 7. Network connectivity. 8. Specialized commercial building modifications

Req #	SOW Requirement
	9. Specialized computer electrical equipment 10. Specialized environmental conditioning equipment 11. Assumptions
7.1.9-82 (new)	The Contractor shall adopt and maintain all Project Artifacts that are associated with this Deliverable in the Project Artifact Inventory and manage them in accordance with the Project Artifact process.
7.1.9-83 (new)	The Contractor shall collaborate with the State to develop and maintain any new Project Artifacts necessary to support this section. New artifacts shall be added to the Project Artifacts Repository and managed in accordance with the Project Artifact process.
7.1.9-84 (modified)	The Contractor shall update the following appendices and attach them to the Operations Service and Function Migration Plan Appendix 1—SOW to Deliverable Traceability Checklist Description: A table where the Contractor identifies the SOW requirements for this Deliverable, as specified within SOW Section 8, DELIVERABLES, and includes but is not limited to: 1. SOW Requirement ID # 2. SOW Requirement Text 3. Requirement Traceability (Contractor identified traceability from the requirements to the Deliverable) 4. Requirement Fulfillment (Define how the Contractor has fulfilled the SOW requirements in the Deliverable) Appendix 2—Deliverable Compliance and Validation Checklist Description: A QA Checklist that includes, but is not limited to: 1. Deliverable Section Number and Title 2. Deliverable Requirement Statement(s) 3. Requirement Completion (How the Contractor has complied with or will comply with the requirement statements within the Deliverable) 4. Validation Method (The method the Contractor used to validate Deliverable compliance) 5. The Contractor's QA Manager sign-off on compliance Appendix 3—Associated Artifacts Description: An extract from the Project Artifact Inventory List of artifacts associated with this Deliverable, and will include but is not limited to the following examples: 1. Artifact Name 2. Associated Parent DEL 3. State Approver 4. SI Point of Contact 5. Review Frequency 6. Submission Frequency 7. Artifact File Format 8. Artifact Location (e.g., SharePoint breadcrumb) 9. Link to artifact

7.1.10 TIP1 Training and Knowledge Transfer

Transition Training and Knowledge Transfer services are conducted with Staff for each Service or Function identified as part of the Service and Function Migration Plans and ensures all appropriate Staff are appropriately and effectively trained to be ready assume operational and system control and responsibility for fulfilling M&O support requirements and have coordinated Cutover tasks and timing with the incumbent Contractor. The Contractor shall perform the Transition Readiness services described in this section.

Table 7-17: Transition-In Training and Knowledge Transfer Plan (CD-7.1-13)

Req #	SOW Requirement
7.1.10-01 (new)	The Contractor shall ~~adopt~~ <u>review</u> the currently approved ~~DEL~~ <u>CD-7.10-1 Transition-In Training and Knowledge Transfer Plan</u> dated 02/28/2020 as a guide to create, in collaboration with the State, a new Transition-In Training and Knowledge Transfer Plan DED for review. The DED will then be the baseline for a new Transition-In Training and Knowledge Transfer Plan deliverable, which includes but is not limited to: 1. INTRODUCTION 1.1 Purpose 1.2 List of Reference Documents 1.3 Audience 2. SUMMARY 2.1 Scope 3. APPROACH 4. ASSUMPTIONS, CONSTRAINTS AND RISKS 4.1 Assumptions 4.2 Constraints 4.3 Risk Management 5. REQUIREMENTS 6. ROLES AND RESPONSIBILITIES 7. GLOSSARY AND ACRONYMS 8. TRAINING TIMELINE 9. TRAINING METHODOLOGY 9.1 ADDIE Model 9.2 Analyze Phase 9.2.1 Analysis Approach 9.2.2. Analyze Phase Findings 9.3 Design Phase 9.3.1 Design Phase Approach 9.3.2 Training Curriculum Defined (ongoing/iterative process) 9.4 Develop Phase 9.4.1 Develop Phase Approach 9.4.2 Training Development Tools 9.4.3 Development and Review Process of Training Materials 9.4.4 Timeline for Training Development 9.4.5 Training Materials 9.5 Implement Phase 9.5.1 Implement Phase Approach 9.5.2 Training Delivery Methods (defined in Design Phase) 9.5.3 Objectives of Training Delivery 9.5.4 Management of Training Schedule and Logistics 9.5.5 Post-Transition Training Support 9.5.6 Iterative Training Development and Delivery 9.6 Evaluate Phase 9.6.1 Evaluation Approach 9.6.2 Evaluation Methods 9.6.3 Approach to capture training attendance and outcomes 10. KNOWLEDGE TRANSFER AND DISCOVERY ACTIVITIES APPENDIX 1: SOW TO DELIVERABLE TRACEABILITY CHECKLIST APPENDIX 2: DELIVERABLE COMPLIANCE AND VALIDATION CHECKLIST APPENDIX 3: ASSOCIATED ARTIFACTS APPENDIX 4: KNOWLEDGE TRANSFER (KT) AND DISCOVERY SESSIONS

Req #	SOW Requirement
7.1.10-02 (new)	The Contractor shall staff, manage, lead and execute Training and Knowledge Transfer activities on the CalHEERS as defined in this Statement of Work and in accordance with the CD-7.1-13 – Training and Knowledge Transfer.
7.1.10-03 (new)	The Contractor shall only alter or modify this Deliverable's structure or content with the approval of the State Project Director or designee.
7.1.10-04 (modified)	The Contractor shall develop, deliver, maintain, and execute a Transition-In Training and Knowledge Transfer Plan that addresses training and knowledge transfer needs for Contractor and State staff and training needs for all CalHEERS end users and stakeholders, and for any changes to services and functions provided within each of the transition component areas as follows: 1. Project Management as identified in SOW Section 3, PROJECT MANAGEMENT REQUIREMENTS 2. System Change & Enhancement as identified in SOW Section 4, SYSTEM CHANGE & ENHANCEMENT REQUIREMENTS 3. Program Support as identified in SOW Section 5, PROGRAM SUPPORT REQUIREMENTS 4. Operations as identified in SOW Section 6, OPERATIONS REQUIREMENTS
7.1.10-05 (existing)	The Contractor shall execute and oversee all activities specified in the approved Transition-In Training and Knowledge Transfer Plan throughout the Transition-In period.
7.1.10-06 (existing)	The Contractor shall manage updates and changes to the Transition-In Training and Knowledge Transfer Plan (as needed) throughout the Transition-In period.
7.1.10-07 (existing)	The Contractor shall provide a Transition-In Training and Knowledge Transfer Plan that describes training and knowledge transfer expectations and planning, and for the transition period. This plan must include different perspectives, such as but not limited to: 1. The knowledge transfer activities that Contractor Staff will require from the incumbent Contractor in order to prepare for assumption of M&O support for a given service or function identified in the Contractor's Transition Plan. 2. Training that the Contractor conducts internally to prepare their Staff to implement activities, processes, and procedures needed to provide M&O support for a given service or function identified in the Contractor's TIMP. 3. Training of State staff regarding the Contractor's transition approach, processes, activities, and tools for managing the transition effort and reporting status. 4. Training of State staff, Stakeholders, and CalHEERS end users regarding changes to M&O services/functions and to service delivery means.
7.1.10-08 (existing)	The Contractor shall provide a Transition-In Training and Knowledge Transfer Plan which serves as the single source of planning for training and knowledge transfer expectations during the transition period so that upon transition completion, Contractor Staff is equipped to operate the system and the processes for managing these systems.
7.1.10-09 (existing)	The Contractor shall provide knowledge transfer and internal training activities that specify the methods to be used – examples include, but are not limited: 1. Documentation Reviews – shall be the review of CalHEERS documentation relevant to the responsibilities to be assumed by the Contractor's Staff. 2. Q&A Sessions – shall be meetings to ask the incumbent Contractor clarifying questions on the documentation to validate the understanding of CalHEERS processes and procedures. 3. Walkthroughs – shall be discussions or meetings between the Contractor and incumbent Contractor to step through operational processes, procedures, scripts, workflow, HW/SW configuration, etc. 4. Training – shall be the learning that takes place to prepare the Contractor's Staff to implement activities, processes, and procedures needed to provide M&O support for a given service or function identified in the Contractor's TIMP. 5. Demonstration – shall show the Contractor's Staff can successfully demonstrate capability to implement activities, processes, and procedures needed to provide M&O support for a given service or function identified in the Contractor's TIMP.

Req #	SOW Requirement
7.1.10-10 (modified)	The Contractor shall provide a Transition-In Training and Knowledge Transfer Plan that includes but is not limited to: 1. Training approach, instruction/courses, and training materials to be delivered to familiarize the State staff and stakeholders, and CalHEERS end users, as appropriate, with the Contractor's transition plans and reporting tools and any enhancements or changes to M&O services or functions, and 2. Knowledge transfer and internal training exercises that will be conducted to equip and verify the Contractor's Staff can implement the activities, processes, and procedures needed to provide M&O support for each given service or function identified in the Contractor's TIMP.
7.1.10-11 (existing)	The Contractor shall ensure that any transition to new Staff will not affect the Schedule or provisions of Services set forth in this Contract
7.1.10-12 (modified)	While constructing and developing the Deliverables, the Contractor shall demonstrate and provide information to Staff designated by the State about the functions and operations of all such Software in accordance with the Specifications, any executed CRs and the Work Plan.
7.1.10-13 (existing)	The Contractor shall be responsible for ensuring that State staff are familiar with all of the Contractor's services (e.g., CalHEERS Service Desk).
7.1.10-14 (new)	The Contractor shall identify and document any and all project artifacts identified or developed during knowledge transfer in the Project Artifact Inventory.
7.1.10-15 (new)	The Contractor shall adopt and maintain all Project Artifacts that are associated with this Deliverable in the Project Artifact Inventory and manage them in accordance with the Project Artifact process.
7.1.10-16 (new)	The Contractor shall collaborate with the State to develop and maintain any new Project Artifacts necessary to support this section. New artifacts shall be added to the Project Artifacts Repository and managed in accordance with the Project Artifact process.
7.1.10-17 (modified)	The Contractor shall update the following appendices and attach them to the Training and Knowledge Transfer. Appendix 1—SOW to Deliverable Traceability Checklist Description: A table where the Contractor identifies the SOW requirements for this Deliverable, as specified within SOW Section 8, DELIVERABLES, and includes but is not limited to: 1. SOW Requirement ID # 2. SOW Requirement Text 3. Requirement Traceability (Contractor identified traceability from the requirements to the Deliverable) 4. Requirement Fulfillment (Define how the Contractor has fulfilled the SOW requirements in the Deliverable) Appendix 2—Deliverable Compliance and Validation Checklist Description: A QA Checklist that includes, but is not limited to: 1. Deliverable Section Number and Title 2. Deliverable Requirement Statement(s) 3. Requirement Completion (How the Contractor has complied with or will comply with the requirement statements within the Deliverable) 4. Validation Method (The method the Contractor used to validate Deliverable compliance) 5. The Contractor's QA Manager sign-off on compliance Appendix 3—Associated Artifacts Description: An extract from the Project Artifact Inventory List of artifacts associated with this Deliverable, and will include but is not limited to the following examples: 1. Artifact Name 2. Associated Parent DEL

Req #	SOW Requirement
	3. State Approver 4. SI Point of Contact 5. Review Frequency 6. Submission Frequency 7. Artifact File Format 8. Artifact Location (e.g., SharePoint breadcrumb) 9. Link to artifact

7.1.11 TIP1 Readiness Reviews

Transition Readiness Reviews are conducted with the State for each Service or Function identified as part of the Service and Function Migration Plans and provide evidence that the Contractor is ready to assume operational control and responsibility for fulfilling M&O support requirements and have coordinated Cutover tasks and timing with the incumbent Contractor. The Contractor shall perform the Transition Readiness services described in this section.

Table 7-18: Transition Readiness Reviews (CD-7.1-14)

Req #	SOW Requirement
7.1.11-01 (new)	The Contractor shall adopt the currently approved DEL D-7.1-14 Transition Readiness Reviews dated 04/21/2020 as a guide to create, in collaboration with the State, a new Transition Readiness Reviews DED for review. The DED will then be the baseline for a new Transition Readiness Reviews deliverable, which includes but is not limited to: 1. INTRODUCTION 1.1 Purpose 2. SCOPE 2.1 Readiness Review Schedule 2.2 Readiness Review Checklist 2.3 Readiness Review Presentation 2.4 Go/No-Go Decision Packet 2.5 Cutover Content Repository 3. GLOSSARY AND ACRONYMS APPENDIX 1: SOW TO DELIVERABLE TRACEABILITY CHECKLIST APPENDIX 2: DELIVERABLE COMPLIANCE AND VALIDATION CHECKLIST APPENDIX 3: ASSOCIATED ARTIFACTS
7.1.11-02 (new)	The Contractor shall staff, manage, lead and execute Transition Readiness Review activities on the CalHEERS as defined in this Statement of Work and in accordance with the CD-7.1-14 – Transition Readiness Reviews.
7.1.11-03 (new)	The Contractor shall only alter or modify this Deliverable’s structure or content with the approval of the State Project Director or designee.
7.1.11-04 (modified)	The Contractor shall conduct a series of Transition Readiness Reviews with the State for each Service or Function identified as part of the Service and Function Migration Plans and provide evidence that they are ready to assume operational control and responsibility for fulfilling M&O support requirements and have coordinated Cutover tasks and timing with the incumbent Contractor. Transition Readiness Reviews apply to each of the following transition area: 1. Project Management as identified in SOW Section 3, PROJECT MANAGEMENT REQUIREMENTS 2. System Change & Enhancement as identified in SOW Section 4, SYSTEM CHANGE & ENHANCEMENT REQUIREMENTS 3. Program Support as identified in SOW Section 5, PROGRAM SUPPORT REQUIREMENTS 4. Operations as identified in SOW Section 6, OPERATIONS REQUIREMENTS

Req #	SOW Requirement
7.1.11-05 (existing)	The Contractor shall provide Transition Readiness Reviews that include but are not limited to the following: 1. Incumbent Contractor's Closeout Checklist 2. Status of Transition Component Migration Activities and Tasks 3. Training and/or Knowledge Transfer 4. Contractor's Test or Validation Results 5. Proposed Cutover Activities and Date 6. Contractor's Confirmation of Readiness 7. State Go/No Go Decision
7.1.11-06 (existing)	The Contractor shall conduct a Transition Readiness Review with the State to obtain State Project Director or designee approval to assume operational control of CalHEERS.
7.1.11-07 (existing)	The Contractor shall show evidence and confirm that they can operate the system in production as indicated but not limited to the following: 1. Start up and shut down of CalHEERS Application 2. Monitor and support Running Batch 3. Support Running Backups 4. Producing the CalHEERS Daily Operations Status Report 5. Perform operations management and system administration
7.1.11-08 (existing)	The Contractor shall also show that they have identified and coordinated Cutover tasks and timing with the incumbent Contractor.
7.1.11-09 (existing)	The Contractor shall include the effort that specifies the methods, processes, and reviews to be used to confirm readiness to accept responsibility for operating and maintaining identified services, functions, and other transition component items identified in the Service and Function Migration Plans.
7.1.11-10 (modified)	The Contractor shall ensure that the incumbent Contractor Project Closeout Plan turnover processes and procedures conform to the TIMP.
7.1.11-11 (existing)	Upon implementing Cutover for a transition component, the Contractor shall confirm for the State Project Director or designee that Transition-In is complete and the Contractor has assumed full M&O responsibility for providing and managing the service, function or other transition item.
7.1.11-12 (new)	The Contractor shall adopt and maintain all Project Artifacts that are associated with this Deliverable in the Project Artifact Inventory and manage them in accordance with the Project Artifact process.
7.1.11-13 (new)	The Contractor shall collaborate with the State to develop and maintain any new Project Artifacts necessary to support this section. New artifacts shall be added to the Project Artifacts Repository and managed in accordance with the Project Artifact process.
7.1.11-14 (new)	The Contractor shall update the following appendices and attach them to the Transition Readiness Review. Appendix 1–SOW to Deliverable Traceability Checklist Description: A table where the Contractor identifies the SOW requirements for this Deliverable, as specified within SOW Section 8, DELIVERABLES, and includes but is not limited to: 1. SOW Requirement ID # 2. SOW Requirement Text 3. Requirement Traceability (Contractor identified traceability from the requirements to the Deliverable) 4. Requirement Fulfillment (Define how the Contractor has fulfilled the SOW requirements in the Deliverable) Appendix 2–Deliverable Compliance and Validation Checklist Description: A QA Checklist that includes, but is not limited to: 1. Deliverable Section Number and Title 2. Deliverable Requirement Statement(s)

Req #	SOW Requirement
	3. Requirement Completion (How the Contractor has complied with or will comply with the requirement statements within the Deliverable) 4. Validation Method (The method the Contractor used to validate Deliverable compliance) 5. The Contractor's QA Manager sign-off on compliance Appendix 3—Associated Artifacts Description: An extract from the Project Artifact Inventory List of artifacts associated with this Deliverable, and will include but is not limited to the following examples: 1. Artifact Name 2. Associated Parent DEL 3. State Approver 4. SI Point of Contact 5. Review Frequency 6. Submission Frequency 7. Artifact File Format 8. Artifact Location (e.g., SharePoint breadcrumb) 9. Link to artifact

7.1.12 TIP1 Test and Validation

The overall goal of the Contractor's Transition Test and Validation is to demonstrate that the Contractor is capable of successfully maintaining and operating CalHEERS, standing up replacement component subsystem services, operating the CalHEERS Service Desk, providing program support services, and supporting SDLC activities.

7.1.12.1 TIP1 Project Management Test and Validation

Table 7-19: Project Management Test and Validation Plan (CD-7.1-15)

Req #	SOW Requirement
7.1.12-01 (new)	The Contractor shall adopt the currently approved DEL D-7.1-15 Project Management Transition Test and Validation Plan dated 04/21/2020 as a guide to create, in collaboration with the State, a new Project Management Transition Test and Validation Plan DED for review. The DED will then be the baseline for a new Project Management Transition Test and Validation Plan deliverable, which includes but is not limited to: 1. INTRODUCTION 1.1 Purpose 2. SCOPE 2.1 Transition Test and Validation Plan (Word Document) 2.1 Transition Test and Validation Tracker (Excel Sheet) 3. APPROACH 4. GLOSSARY AND ACRONYMS APPENDIX 1: SOW TO DELIVERABLE TRACEABILITY CHECKLIST APPENDIX 2: DELIVERABLE COMPLIANCE AND VALIDATION CHECKLIST APPENDIX 3: ASSOCIATED ARTIFACTS APPENDIX 4: TTVP FOR SOW 3 PROJECT MANAGEMENT
7.1.12-02 (new)	The Contractor shall staff, manage, lead and execute Project Management Test Validation activities on the CalHEERS as defined in this Statement of Work and in accordance with the CD-7.1-15 – Project Management Test and Validation Plan.
7.1.12-03 (new)	The Contractor shall only alter or modify this Deliverable's structure or content with the approval of the State Project Director or designee.

Req #	SOW Requirement
7.1.12-04 (modified)	The Contractor shall develop, maintain, and execute a Project Management Transition Test and Validation Plan to specifically assist the State in defining and executing the test and validation activities of all project management functions needed in support of SOW Section 3, PROJECT MANAGEMENT REQUIREMENTS. Areas to consider include but are not limited to the validation of systems in place to manage: 1. Processes for project management 2. Risk and issue tracking. 3. Schedule management 4. Document management. 5. Content Management (Storage of Project Management artifacts) 6. Meetings and other communications 7. Correspondence/E-mail
7.1.12-05 (existing)	The Contractor shall execute and oversee all activities specified in the approved Project Management Service and Function Migration Plan throughout the Transition-In period.
7.1.12-06 (existing)	The Contractor shall manage updates and changes to the Project Management Transition Test and Validation Plan (as needed) throughout the Transition-In period.
7.1.12-07 (existing)	The Contractor shall provide a Project Management Transition Test and Validation Plan that includes, but is not limited to, the following information: 1. Identify which transition components require validation and describes the approach and methods to be used to validate. 2. Indicate that the Contractor shall create a detailed validation plan specific to each transition component (or group of components) identified for validation along with the documentation needed to implement validation and record results. 3. Include a test and validation work plan to schedule, monitor, and report the progress of all test and validation activities.
7.1.12-08 (existing)	During testing and/or validation, conducting walkthroughs for State staff to review, the Contractor shall provide but not be limited to the following activities/tasks: 1. Demonstration of areas where performance is acceptable 2. Demonstration of areas of unacceptable performance, problems, and issues 3. Identification of where the problem occurred and an explanation of the differences between expected and actual results 4. Summary analysis of the problem and the corrective action process and results for each problem or issue
7.1.12-09 (new)	The Contractor shall adopt and maintain all Project Artifacts that are associated with this Deliverable in the Project Artifact Inventory and manage them in accordance with the Project Artifact process.
7.1.12-10 (new)	The Contractor shall collaborate with the State to develop and maintain any new Project Artifacts necessary to support this section. New artifacts shall be added to the Project Artifacts Repository and managed in accordance with the Project Artifact process.
7.1.12-11 (modified)	The Contractor shall update the following appendices and attach them to the Project Management Test Validation Plan. Appendix 1–SOW to Deliverable Traceability Checklist Description: A table where the Contractor identifies the SOW requirements for this Deliverable, as specified within SOW Section 8, DELIVERABLES, and includes but is not limited to: 1. SOW Requirement ID # 2. SOW Requirement Text 3. Requirement Traceability (Contractor identified traceability from the requirements to the Deliverable) 4. Requirement Fulfillment (Define how the Contractor has fulfilled the SOW requirements in the Deliverable) Appendix 2–Deliverable Compliance and Validation Checklist Description: A QA Checklist that includes, but is not limited to:

Req #	SOW Requirement
	1. Deliverable Section Number and Title 2. Deliverable Requirement Statement(s) 3. Requirement Completion (How the Contractor has complied with or will comply with the requirement statements within the Deliverable) 4. Validation Method (The method the Contractor used to validate Deliverable compliance) 5. The Contractor's QA Manager sign-off on compliance Appendix 3—Associated Artifacts Description: An extract from the Project Artifact Inventory List of artifacts associated with this Deliverable, and will include but is not limited to the following examples: 1. Artifact Name 2. Associated Parent DEL 3. State Approver 4. SI Point of Contact 5. Review Frequency 6. Submission Frequency 7. Artifact File Format 8. Artifact Location (e.g., SharePoint breadcrumb) 9. Link to artifact

7.1.12.2 TIP1 System Change & Enhancement Test and Validation

Table 7-20: System Change & Enhancement Test and Validation Plan (CD-7.1-16)

Req #	SOW Requirement
7.1.12-12 (new)	The Contractor shall review the currently approved DEL D-7.1-16 Maintenance (via CR) Transition Test and Validation Plan dated 04/21/2020 as a guide to create, in collaboration with the State, a new System Change & Enhancement Transition Test and Validation Plan DED for review. The DED will then be the baseline for a new System Change & Enhancement Transition Test and Validation Plan deliverable, which includes but is not limited to: 1. INTRODUCTION 1.1 Purpose 2. SCOPE 2.1 Transition Test and Validation Plan (Word Document) 2.2 Transition Test and Validation Tracker (Excel Sheet) 3. APPROACH 4. GLOSSARY AND ACRONYMS APPENDIX 1: SOW TO DELIVERABLE TRACEABILITY CHECKLIST APPENDIX 2: DELIVERABLE COMPLIANCE AND VALIDATION CHECKLIST APPENDIX 3: ASSOCIATED ARTIFACTS APPENDIX 4: TTVP FOR SOW 4 SYSTEM CHANGE & ENHANCEMENTS
7.1.12-13 (new)	The Contractor shall staff, manage, lead and execute System Change & Enhancements Test Validation activities on the CalHEERS as defined in this Statement of Work and in accordance with the CD-7.1-16 – System Change & Enhancements Transitions Test and Validation Plan.
7.1.12-14 (new)	The Contractor shall only alter or modify this Deliverable's structure or content with the approval of the State Project Director or designee.
7.1.12-15 (modified)	The Contractor shall develop, maintain, and execute a System Change & Enhancements Transition Test and Validation Plan to specifically assist the State in defining and executing the test and validation activities of all Maintenance (via CRs) functions needed in support of SOW Section 4, SYSTEM CHANGE & ENHANCEMENT REQUIREMENTS.

Req #	SOW Requirement
7.1.12-16 (modified)	The Contractor shall execute and oversee all activities specified in the approved System Change & Enhancement Transition Test and Validation Plan throughout the Transition-In period.
7.1.12-17 (modified)	The Contractor shall manage updates and changes to the System Change & Enhancement Transition Test and Validation Plan (as needed) throughout the Transition-In period.
7.1.12-18 (existing)	The Contractor shall successfully validate their capability to provide full SDLC support for design, development, test, and implementation in support of application change requests.
7.1.12-19 (existing)	During testing and/or validation, conducting walkthroughs for State staff to review, the Contractor shall at a minimum provide (but not be limited to) the following: 1. Observation of test execution 2. Demonstration of areas where performance is acceptable. 3. Demonstration of areas of unacceptable performance, problems, and issues 4. Identification of where the problem occurred and an explanation of the differences between expected and actual results. 5. Summary analysis of the problem, including subsystems affected, and the corrective action plan
7.1.12-20 (existing)	The Contractor shall document the executed transition system test showing the results of each test and shall submit it to the State Project Director or designee no later than one (1) week after the test. Additional documentation and related materials requested by the State shall be provided no later than 48 hours after the request.
7.1.12-21 (existing)	Following test execution, the Contractor shall deliver or make available to the State all system and component subsystem test documentation, including files, materials, reports, and scripts that were used to validate test results within five (5) Business Days.
7.1.12-22 (existing)	During system and component subsystem testing, the Contractor shall provide the State staff with an updated list of all the test related findings and results at regularly scheduled meetings.
7.1.12-23 (existing)	The Contractor shall utilize a tool to support defect management and this tool must track the status of each defect found during testing activities.
7.1.12-24 (existing)	The Contractor shall identify and resolve inconclusive or incomplete areas of system testing prior to the start of Transition Customer Readiness Testing.
7.1.12-25 (existing)	All deficiencies identified by the Contractor during system and component subsystem testing shall be fully documented through the defect management process, as defined within the existing Transition Test and Validation Plan.
7.1.12-26 (existing)	The Contractor shall correct all defects found during system and component subsystem testing, that are determined to be the responsibility of the Contractor at no cost to the State.
7.1.12-27 (modified)	The Contractor shall, during testing, conduct weekly status meetings with State staff to summarize at a management review level, at a minimum, the following: 1. Summary of status for test execution. 2. Summary of areas where performance is unacceptable. 3. Summary of problems, and issues logged within the defect management tool. 4. Identification of where the problem occurred and an explanation of the differences between expected and actual results. 5. The differences between expected and actual results, and how they will be addressed. 6. Identification of when testing is expected to be completed.
7.1.12-28 (existing)	The Contractor shall perform system and component subsystem testing and provide walkthroughs of the associated test plans and test approaches for State staff.

Req #	SOW Requirement
7.1.12-29 (existing)	The Contractor shall allow the State full access to the Contractor's Transition test plans and test documentation which includes, but is not limited to: 1. Test cases. 2. Test scripts. 3. Test data. 4. Test procedures. 5. Test results
7.1.12-30 (existing)	The Contractor shall conduct Transition Customer Readiness Testing in an environment that mirrors production.
7.1.12-31 (existing)	The Contractor shall conduct Customer Readiness Testing with State participation for all testing identified in the Transition Test and Validation Plan.
7.1.12-32 (existing)	The Contractor shall in collaboration with the State, identify State roles and participation for each component subsystem Customer Readiness Test.
7.1.12-33 (new)	The Contractor shall adopt and maintain all Project Artifacts that are associated with this Deliverable in the Project Artifact Inventory and manage them in accordance with the Project Artifact process.
7.1.12-34 (new)	The Contractor shall collaborate with the State to develop and maintain any new Project Artifacts necessary to support this section. New artifacts shall be added to the Project Artifacts Repository and managed in accordance with the Project Artifact process.
7.1.12-35 (new)	The Contractor shall update the following appendices and attach them to the System Change & Enhancements Test Validation Plan. Appendix 1–SOW to Deliverable Traceability Checklist Description: A table where the Contractor identifies the SOW requirements for this Deliverable, as specified within SOW Section 8, DELIVERABLES, and includes but is not limited to: 1. SOW Requirement ID # 2. SOW Requirement Text 3. Requirement Traceability (Contractor identified traceability from the requirements to the Deliverable) 4. Requirement Fulfillment (Define how the Contractor has fulfilled the SOW requirements in the Deliverable) Appendix 2–Deliverable Compliance and Validation Checklist Description: A QA Checklist that includes, but is not limited to: 1. Deliverable Section Number and Title 2. Deliverable Requirement Statement(s) 3. Requirement Completion (How the Contractor has complied with or will comply with the requirement statements within the Deliverable) 4. Validation Method (The method the Contractor used to validate Deliverable compliance) 5. The Contractor's QA Manager sign-off on compliance Appendix 3—Associated Artifacts Description: An extract from the Project Artifact Inventory List of artifacts associated with this Deliverable, and will include but is not limited to the following examples: 1. Artifact Name 2. Associated Parent DEL 3. State Approver 4. SI Point of Contact 5. Review Frequency 6. Submission Frequency 7. Artifact File Format 8. Artifact Location (e.g., SharePoint breadcrumb) 9. Link to artifact

7.1.12.3 TIP1 Program Support Test and Validation

Table 7-21: Program Support Test & Validation Plan (CD-7.1-17)

Req #	SOW Requirement
7.1.12-36 (new)	The Contractor shall review the currently approved DEL D-7.1-17 Maintenance (via Program Support) Transition Test & Validation Plan dated 04/21/2020 as a guide to create, in collaboration with the State, a new Program Support Transition Test & Validation Plan DED for review. The DED will then be the baseline for a new Program Support Transition Test & Validation Plan deliverable, which includes but is not limited to: 1. INTRODUCTION 1.1 Purpose 2. SCOPE 2.1 Transition Test and Validation Plan (Word Document) 2.2 Transition Test and Validation Tracker (Excel Sheet) 3. APPROACH 4. GLOSSARY AND ACRONYMS APPENDIX 1: SOW TO DELIVERABLE TRACEABILITY CHECKLIST APPENDIX 2: DELIVERABLE COMPLIANCE AND VALIDATION CHECKLIST APPENDIX 3: ASSOCIATED ARTIFACTS APPENDIX 4: TTVP FOR SOW 5 PROGRAM SUPPORT
7.1.12-37 (new)	The Contractor shall staff, manage, lead and execute Program Support Test Validation activities on the CalHEERS as defined in this Statement of Work and in accordance with the CD-7.1-17 – Program Support Transitions Test and Validation Plan.
7.1.12-38 (new)	The Contractor shall only alter or modify this Deliverable's structure or content with the approval of the State Project Director or designee.
7.1.12-39 (modified)	The Contractor shall develop, maintain, and execute a Program Support Transition Test and Validation Plan to specifically assist the State in defining and executing the test and validation activities of all Program Support functions needed in support of SOW Section 5, PROGRAM SUPPORT REQUIREMENTS.
7.1.12-40 (modified)	The Contractor shall execute and oversee all activities specified in the approved Program Support Transition Test and Validation Plan throughout the Transition-In period.
7.1.12-41 (modified)	The Contractor shall manage updates and changes to the Program Support Transition Test and Validation Plan (as needed) throughout the Transition-In period.
7.1.12-42 (existing)	During testing and/or validation, conducting walkthroughs for State staff, the Contractor shall document and provide a review that includes but is not limited to the following information: 1. Observation of test execution 2. Demonstration of areas where performance is acceptable. 3. Demonstration of areas of unacceptable performance, problems, and issues 4. Identification of where the problem occurred and an explanation of the differences between expected and actual results. 5. Summary analysis of the problem, including subsystems affected, and the corrective action process and results for each defect, problem, or issue
7.1.12-43 (existing)	The Contractor shall document the executed transition system test showing the results of each test and shall submit it to the State Project Director or designee no later than one (1) week after the test. Additional documentation and related materials requested by the State shall be provided no later than 48 hours after the request.

Req #	SOW Requirement
7.1.12-44 (existing)	The Contractor shall, during testing, conduct weekly status meetings with State staff to summarize at a management review level, at a minimum, the following: 1. Summary of status for test execution 2. Summary of areas where performance is unacceptable. 3. Summary of problems, and issues logged within the defect management tool. 4. Identification of where the problem occurred and an explanation of the differences between expected and actual results. 5. The differences between expected and actual results, and how they will be addressed. 6. Identification of when testing is expected to be completed
7.1.12-45 (existing)	The Contractor shall perform system and component subsystem testing and provide walkthroughs of the associated test plans and test approaches for State staff.
7.1.12-46 (existing)	The Contractor shall allow the State full access to the Contractor's Transition test plans, and test documentation that includes, but is not limited to, the following information: 1. Test cases. 2. Test scripts. 3. Test data. 4. Test procedures. 5. Test results
7.1.12-47 (existing)	The Contractor shall conduct Transition Customer Readiness Testing in an environment that mirrors production.
7.1.12-48 (existing)	The Contractor shall conduct Customer Readiness Testing with State participation for all testing identified in the Transition Test and Validation Plan.
7.1.12-49 (existing)	The Contractor shall in collaboration with the State, identify State roles and participation for each component subsystem Customer Readiness Test.
7.1.12-50 (existing)	Following test execution, the Contractor shall deliver or make available to the State all system and component subsystem test documentation, including files, materials, reports and scripts that were used to validate test results within five (5) Business Days.
7.1.12-51 (existing)	The Contractor shall, during system and component subsystem testing, provide the State staff with an updated list of all the test related findings and results at regularly scheduled meetings.
7.1.12-52 (existing)	The Contractor shall utilize a tool to support defect management and this tool must track the status of each defect found during testing activities. The tool shall also be accessible to the State for use and shall include administrative rights for designated State staff.
7.1.12-53 (existing)	The Contractor shall identify and resolve inconclusive or incomplete areas of system testing prior to the start of Transition Customer Readiness Testing.
7.1.12-54 (existing)	All deficiencies identified by the Contractor during system and component subsystem testing shall be fully documented through the defect management process, as defined within the existing Transition Test and Validation Plan.
7.1.12-55 (existing)	The Contractor shall correct all defects found during system and component subsystem testing, that are determined to be the responsibility of the Contractor at no cost to the State.
7.1.12-56 (existing)	During functional, integration, and regression testing, the Contractor shall test to: 1. Confirm that each component Subsystem conforms to the System specifications. 2. Validate interoperability between System and component Subsystems and Client (recipient/provider) correspondence output. 3. Validate receipt and delivery of interfaces files. 4. Confirm operating performance as necessary for each component Subsystem. 5. Execute batch jobs as necessary to verify component Subsystem outputs. 6. Validate generation and delivery of data download files.
7.1.12-57 (existing)	The Contractor shall conduct a test readiness review with the State utilizing the State's User Acceptance Testing (UAT) entry and exit criteria to show that the Contractor is properly prepared to execute Customer Readiness Testing prior to initiating test activities.

Req #	SOW Requirement
7.1.12-58 (existing)	The Contractor shall perform full load and stress testing of components Subsystems to demonstrate the ability to process expected workloads accurately and within prescribed time frames.
7.1.12-59 (existing)	All defects and/or deficiencies identified by the Contractor during System and Component Subsystem Testing, shall be corrected by the Contractor prior to the start of System Operations unless authorized by the State Project Director or designee.
7.1.12-60 (existing)	The Contractor shall successfully and accurately test and/or validate its capability to conduct all business services functions.
7.1.12-61 (existing)	The Contractor shall successfully and accurately test and/or validate its capability to operate all Service Desk functions.
7.1.12-62 (existing)	The Contractor shall successfully and accurately test and/or validate its capability to successfully interact with the CalHEERS Application in receiving, handling, scanning, reading, and generating data files as well as storage and retrieval of images.
7.1.12-63 (existing)	The Contractor shall successfully and accurately test and/or validate its capability to perform all current Print Center functions to include but not limited to printing and mailing information notices, notice of actions (NOA) and correspondence.
7.1.12-64 (existing)	As a minimum, the Contractor shall conduct Test Readiness Reviews with the State to obtain State Project Director or designee approval to initiate System Testing for the following specific transition components: 1. Training Services 2. Website Management Services 3. User's Manual Services, Program Support (Back Office) 4. Operations Forms Support (Print Center) 5. Operations Reporting Support
7.1.12-65 (existing)	The Contractor shall confirm and provide evidence that they are capable of providing these services as specified by the TIMP and have coordinated Cutover tasks and timing with the incumbent Contractor.
7.1.12-66 (new)	The Contractor shall adopt and maintain all Project Artifacts that are associated with this Deliverable in the Project Artifact Inventory and manage them in accordance with the Project Artifact process.
7.1.12-67 (new)	The Contractor shall collaborate with the State to develop and maintain any new Project Artifacts necessary to support this section. New artifacts shall be added to the Project Artifacts Repository and managed in accordance with the Project Artifact process.
7.1.12-68 (modified)	The Contractor shall update the following appendices and attach them to the Program Support Test Validation Plan. Appendix 1–SOW to Deliverable Traceability Checklist Description: A table where the Contractor identifies the SOW requirements for this Deliverable, as specified within SOW Section 8, DELIVERABLES, and includes but is not limited to: 1. SOW Requirement ID # 2. SOW Requirement Text 3. Requirement Traceability (Contractor identified traceability from the requirements to the Deliverable) 4. Requirement Fulfillment (Define how the Contractor has fulfilled the SOW requirements in the Deliverable) Appendix 2–Deliverable Compliance and Validation Checklist Description: A QA Checklist that includes, but is not limited to: 1. Deliverable Section Number and Title 2. Deliverable Requirement Statement(s) 3. Requirement Completion (How the Contractor has complied with or will comply with the requirement statements within the Deliverable) 4. Validation Method (The method the Contractor used to validate Deliverable compliance)

Req #	SOW Requirement
	5. The Contractor's QA Manager sign-off on compliance Appendix 3—Associated Artifacts Description: An extract from the Project Artifact Inventory List of artifacts associated with this Deliverable, and will include but is not limited to the following examples: 1. Artifact Name 2. Associated Parent DEL 3. State Approver 4. SI Point of Contact 5. Review Frequency 6. Submission Frequency 7. Artifact File Format 8. Artifact Location (e.g., SharePoint breadcrumb) 9. Link to artifact

7.1.12.4 TIP1 Operations Test and Validation

Table 7-22: Operations Test and Validation Plan (CD-7.1-18)

Req #	SOW Requirement
7.1.12-69 (new)	The Contractor shall adopt the currently approved DEL <u>D-7.1-18 Operations Transition Test and Validation Plan</u> dated 04/21/2020 as a guide to create, in collaboration with the State, a new Operations Transition Test and Validation Plan DED for review. The DED will then be the baseline for a new Operations Transition Test and Validation Plan deliverable, which includes but is not limited to: 1. INTRODUCTION 1.1 Purpose 2. SCOPE 2.1 Transition Test and Validation Plan (Word Document) 2.2 Transition Test and Validation Tracker (Excel Sheet) 3. APPROACH 4. GLOSSARY AND ACRONYMS APPENDIX 1: SOW TO DELIVERABLE TRACEABILITY CHECKLIST APPENDIX 2: DELIVERABLE COMPLIANCE AND VALIDATION CHECKLIST APPENDIX 3: ASSOCIATED ARTIFACTS APPENDIX 4: TTVP FOR SOW 6 OPERATIONS
7.1.12-70 (new)	The Contractor shall staff, manage, lead and execute Operations Test Validation activities on the CalHEERS as defined in this Statement of Work and in accordance with the CD-7.1-18 – Operations Transitions Test and Validation Plan.
7.1.12-71 (new)	The Contractor shall only alter or modify this Deliverable's structure or content with the approval of the State Project Director or designee.
7.1.12-72 (existing)	The Contractor shall develop, maintain, and execute an Operations Transition Test and Validation Plan to specifically assist the State in defining and executing the test and validation activities of all Operations functions needed in support of SOW Section 6, OPERATION REQUIREMENTS.
7.1.12-73 (existing)	The Contractor shall execute and oversee all activities specified in the approved Operations Transition Test and Validation Plan throughout the Transition-In period.
7.1.12-74 (existing)	The Contractor shall manage updates and changes to the Operations Transition Test and Validation Plan (as needed) throughout the Transition-In period.
7.1.12-75 (existing)	The Contractor shall successfully validate their capability to operate the CalHEERS System, in accordance with SOW Section 6, OPERATIONS REQUIREMENTS.

Req #	SOW Requirement
7.1.12-76 (existing)	During testing and/or validation, conducting walkthroughs for State staff to review, the Contractor shall at a minimum provide (but not be limited to) the following: 1. Observation of test execution 2. Demonstration of areas where performance is acceptable. 3. Demonstration of areas of unacceptable performance, problems, and issues 4. Identification of where the problem occurred and an explanation of the differences between expected and actual results. 5. Summary analysis of the problem, including subsystems affected, and the corrective action plan
7.1.12-77 (existing)	The Contractor shall document the executed transition system test showing the results of each test and shall submit it to the State Project Director or designee no later than one (1) week after the test. Additional documentation and related materials requested by the State shall be provided no later than 48 hours after the request.
7.1.12-78 (existing)	Following test execution, the Contractor shall deliver or make available to the State all system and component subsystem test documentation, including files, materials, reports and scripts that were used to validate test results within five (5) Business Days.
7.1.12-79 (existing)	During system and component subsystem testing, the Contractor shall provide the State staff with an updated list of all the test related findings and results at regularly scheduled meetings.
7.1.12-80 (existing)	The Contractor shall utilize a tool to support defect management and this tool must track the status of each defect found during testing activities.
7.1.12-81 (existing)	The Contractor shall identify and resolve inconclusive or incomplete areas of system testing prior to the start of Transition Customer Readiness Testing.
7.1.12-82 (existing)	All deficiencies identified by the Contractor during system and component subsystem testing shall be fully documented through the defect management process, as defined within the existing Transition Test and Validation Plan.
7.1.12-83 (existing)	The Contractor shall correct all defects found during system and component subsystem testing, that are determined to be the responsibility of the Contractor at no cost to the State.
7.1.12-84 (modified)	The Contractor shall, during testing, conduct weekly status meetings with State staff to summarize at a management review level, at a minimum, the following: 1. Summary of status for test execution 2. Summary of areas where performance is unacceptable. 3. Summary of problems, and issues logged within the defect management tool. 4. Identification of where the problem occurred and an explanation of the differences between expected and actual results. 5. The differences between expected and actual results, and how they will be addressed. 6. Identification of when testing is expected to be completed
7.1.12-85 (existing)	The Contractor shall perform system and component subsystem testing and provide walkthroughs of the associated test plans and test approaches for State staff.
7.1.12-86 (existing)	The Contractor shall allow the State full access to the Contractor's Transition test plans and test documentation which includes, but is not limited to: 1. Test cases. 2. Test scripts. 3. Test data. 4. Test procedures. 5. Test results
7.1.12-87 (existing)	The Contractor shall conduct Transition Customer Readiness Testing in an environment that mirrors production.
7.1.12-88 (existing)	The Contractor shall conduct Customer Readiness Testing with State participation for all testing identified in the Transition Test and Validation Plan.
7.1.12-89 (existing)	The Contractor shall in collaboration with the State, identify State roles and participation for each component subsystem Customer Readiness Test.

Req #	SOW Requirement
7.1.12-90 (new)	The Contractor shall adopt and maintain all Project Artifacts that are associated with this Deliverable in the Project Artifact Inventory and manage them in accordance with the Project Artifact process.
7.1.12-91 (new)	The Contractor shall collaborate with the State to develop and maintain any new Project Artifacts necessary to support this section. New artifacts shall be added to the Project Artifacts Repository and managed in accordance with the Project Artifact process.
7.1.12-92 (new)	The Contractor shall update the following appendices and attach them to the Operations Test Validation Plan. Appendix 1—SOW to Deliverable Traceability Checklist Description: A table where the Contractor identifies the SOW requirements for this Deliverable, as specified within SOW Section 8, DELIVERABLES, and includes but is not limited to: 1. SOW Requirement ID # 2. SOW Requirement Text 3. Requirement Traceability (Contractor identified traceability from the requirements to the Deliverable) 4. Requirement Fulfillment (Define how the Contractor has fulfilled the SOW requirements in the Deliverable) Appendix 2—Deliverable Compliance and Validation Checklist Description: A QA Checklist that includes, but is not limited to: 1. Deliverable Section Number and Title 2. Deliverable Requirement Statement(s) 3. Requirement Completion (How the Contractor has complied with or will comply with the requirement statements within the Deliverable) 4. Validation Method (The method the Contractor used to validate Deliverable compliance) 5. The Contractor's QA Manager sign-off on compliance Appendix 3—Associated Artifacts Description: An extract from the Project Artifact Inventory List of artifacts associated with this Deliverable, and will include but is not limited to the following examples: 1. Artifact Name 2. Associated Parent DEL 3. State Approver 4. SI Point of Contact 5. Review Frequency 6. Submission Frequency 7. Artifact File Format 8. Artifact Location (e.g., SharePoint breadcrumb) 9. Link to artifact

7.2 TRANSITION-IN PHASE 2 (TIP2) TRANSFORMATION

7.2.1 TIP2 TIMP Updates

The TIP2 TMMP will include a retrospect of TIP1 activities and include updates and improvements on expectations in TIP1 based on new information collected and lessons learned.

Table 7-23: TIP2 TIMP Updates (CD-7.2-1)

Req #	SOW Requirement
7.2.1-01 (new)	The Contractor shall update the TIMP to incorporate TIP2 activities, which includes but is not limited to, identifying all items to be transformed, the approach to be utilized for the transformation of each item, the processes and procedures needed to carry out the transformation of each item, the resources, roles and responsibilities necessary to execute the transformation of each item, a timeline for the execution of all transformation activities, and include lessons learned documented throughout the effort. This shall include the approach to how all SOW requirements that are identified as “modified” and “new” will be addressed by the close of the Transformation period.
7.2.1-02 (new)	The Contractor shall analyze, create and maintain an inventory of all contract transformation items by the four (4) SOW Maintenance & Operations (M&O) Support Areas: • Project Management • System Change & Enhancements • Program Support • Operations
7.2.1-03 (new)	The Contractor shall conduct a gap analysis which identifies the “as-is” state and “to-be” state planned for each contract transformation item.
7.2.1-04 (new)	The Contractor shall plan for, and execute the update of, all project Deliverables impacted by the Contract Transformation Phase activities.
7.2.1-05 (new)	The Contractor shall adopt and maintain all Project Artifacts that are associated with this Deliverable in the Project Artifact Inventory and manage them in accordance with the Project Artifact process.
7.2.1-06 (new)	The Contractor shall collaborate with the State to develop and maintain any new Project Artifacts necessary to support this section. New artifacts shall be added to the Project Artifacts Repository and managed in accordance with the Project Artifact process.

7.2.2 TIP2 Meetings, Agendas, and Minutes

Table 7-24: TIP2 Transformation Meetings, Agendas, and Minutes (CD-7.2-2)

Req #	SOW Requirement
7.2.2-01 (new)	The Contractor shall provide continued support for TIP2 Meetings, Agendas, and Minutes requirements as provided for the TIP1 (see requirements above).

7.2.3 TIP2 Final Review

Table 7-25: TIP2 Final Review

Req #	SOW Requirement
7.2.3-01 (new)	The Contractor shall provide continued support for TIP2 Final Review requirements as provided for the TIP1 Final Review requirements.

7.2.4 TIP2 Project Work Plan Updates

Table 7-26: TIP2 Project Work Plan Updates (CD-7.2-3)

Req #	SOW Requirement
7.2.4-01 (new)	The Contractor shall develop, deliver, update, and maintain a Contract Transformation Project Work Plan that represents the entire body of work within the Contract Transformation phase, breaking out transformation activities across the four (4) component areas of the Contract: 1. Project Management 2. System Change & Enhancements 3. Program Support 4. Operations
7.2.4-02 (new)	The Contractor shall develop the Contract Transformation Project Work Plan in accordance with the structure, process and procedures identified in the approved Schedule Management Plan.
7.2.4-03 (new)	The Contractor shall ensure that the Contract Transformation Project Work Plan integrates into the Master Project Schedule.

7.2.5 TIP2 Transformation Short-Term Staffing

Table 7-27: TIP2 Transformation Short-Term Staffing

Req #	SOW Requirement
7.2.5-01 (new)	The Contractor shall provide the additional, short-term staffing necessary to complete all State approved TIP2 Project Work Plan transformation activities.

7.2.6 TIP2 Transformation Execution

Table 7-28: TIP2 Transformation Execution

Req #	SOW Requirement
7.2.6-01 (new)	The Contractor shall manage and execute the Contract Transformation Project using and in compliance with all CalHEERS Project process, including but not limited to: • Project Management • Schedule Management • Risk and Issue Management • Release Management • The Change Request Process • Technical Processes (e.g., Architectural Review Board) • Organizational Change Management • Quality Management • Tool access • Training
7.2.6-02 (new)	The Contractor, when planning the Contract Transformation activities, shall take into consideration the State's resource capacity.
7.2.6-03 (new)	The Contractor shall integrate the Contract Transformation Project activities into both the Functional and Technical Strategic 24-month Roadmaps.

7.2.7 TIP2 Design Document True-up Report

Table 7-29: TIP2 Design Document True-up Report

Req #	SOW Requirement
7.2.7-01 (new)	The Contractor shall plan, staff, and execute a true-up of the CalHEERS Design Documentation, ensuring accurate representation of the current system.
7.2.7-02 (New)	The Contractor shall develop, submit and maintain a Design Documentation Assessment & True-Up Report artifact, which documents the contractor's design document assessment findings & recommendations, and provides the status of the Contractor's design document true-up effort. The Contractor shall provide status reporting and any associated presentations as directed by the State Project Director or designee.

7.2.8 TIP2 CalHEERS Deliverables Transformation Planning

Table 7-30: TIP2 CalHEERS Deliverables Transformation Planning

Req #	SOW Requirement
7.2.8-01 (new)	The Contactor shall plan for the transformation of all CalHEERS Project Deliverables and State identified Artifacts within the Transformation Phase, taking State direction on deliverable update order and priority.
7.2.8-02 (new)	The Contactor shall update all applicable deliverables, removing the use of the term Not Under Warranty (NUW), as that term and defect classification no longer exist on CalHEERS.

7.2.9 TIP2 State Designated Transformation Innovation

Table 7-31: TIP2 State Designated Transformation Innovation

Req #	SOW Requirement
7.2.9-01 (new)	The Contactor shall plan, staff, and execute the Innovation items identified by the State for implementation during the Transformation phase.

7.2.10 TIP2 Mandatory Optional Scope

Table 7-32: TIP2 Mandatory Optional Scope

Req #	SOW Requirement
7.2.10-01 (new)	The Contactor shall plan, staff, and execute the State optioned mandatory/optional items within the transformation of CalHEERS Project Deliverables, taking State direction on deliverable update order and priority.

7.3 TRANSITION-OUT

Transition-Out involves identifying and implementing all the activities required to roll off the project by transitioning out and turning over all control and responsibility for M&O support and State-owned resources, documentation, and knowledge to a successor Contractor or the State.

Note: Transition-Out is not to be confused with Contract Closeout, which occurs concurrently with Transition-Out, and is discussed in SOW Section 3.1.3, CONTRACT CLOSEOUT.

Transition-Out includes creating a Transition-Out Plan that determines what items and components must be transitioned, the approach to be utilized for transitioning, how knowledge transfer will be conducted, and the processes and procedures needed to carry out the transition

and Contract closeout activities. The process for transitioning components includes working in coordination with a successor Contractor or the State to Cutover M&O Services, functions and other items.

The Contractor is expected to develop a Component Worksheet to list all items and components and then utilize it to monitor status and manage the Transition-Out activities from both an overall perspective as well as at an individual Transition-Out item/component level.

A Transition-Out Work Plan (Schedule) is also required to identify and manage all Transition-Out activities and tasks required by the Transition-Out Plan.

The Contractor shall be responsible for successfully completing Transition-Out as specified in these plans and periodically reporting the status to the State.

7.3.1 Transition-Out Plan (TOP) – Draft & Update

The start of Transition-Out planning involves the creation of a Transition-Out Plan (TOP). The TOP shall be the governing document for the management and execution of the CalHEERS SDMO Transition-Out phase and include the approach, procedures, timeline, and documentation for the duration of the Transition-Out phase. Refer to Figure 1 Transition Activities and Timelines for the context of the TOP in the broader topic of Transition.

The Contractor Project Closeout Plan shall encompass the work done via the TOP and is described in SOW Section 3.1.3 CONTRACT CLOSEOUT. The TOP and Project Closeout Plan will be concurrent efforts during the end phase of the contract.

Requirements of the TOP shall also address how and when transition components will be transitioned and tracked. Transition-Out calls for planning and reporting at both the overall and specific transition component levels, and identification of requirements related to critical and noncritical changes that are needed or recommended during the Transition-Out period.

If the State exercises its option to extend the Contract, the extension shall result in a delay of all Transition-Out activities for a commensurate period.

Requirements in this section also address the plans, communication, and reporting mechanisms needed to support management and implementation of the Transition-Out activities.

7.3.1.1 TOP Draft – Final Year Minus 8 Months

Table 7-33: Transition-Out Plan (TOP) Draft - Final Year Minus 8 Months (CD-7.3-1)

Req #	SOW Requirement
7.3.1-01 (modified)	Eight (8) months PRIOR to the final year of the contract (1 yr. and 8 months) the Contractor shall submit a Transition-Out Plan for State Acceptance. The Transition-Out Plan shall include all tasks and Deliverables necessary to complete the termination of the Contract and successfully transfer of State operations to the State or successor contractor all occurring during the final year of the contract.
7.3.1-02 (modified)	Eight (8) months prior to the final year of the contract, the Contractor shall at a minimum (but not limited to) provide the following: 1. Submit a letter to the State Project Director or designee identifying the Staff to serve as Transition-Out management Staff, along with the start/stop timeframes they will serve. 2. Submit a detailed description of the Transition-Out methodology and Deliverable Expectation Document (DED) to the State for review and approval. 3. Begin Transition-Out activities, or upon direction from the State Project Director or designee. Note: The State may shorten or extend the M&O of the Contract at the discretion of the

Req #	SOW Requirement
	State Project Director or designee.
7.3.1-03 (new)	The Contract shall create the Transition-Out Plan to guide both State, incumbent SI, and successor Contractor through the Transition-Out activities during the final year of the contract. The TOP shall include such things as, but is not limited to the following: 1. A detailed Work Plan reflecting all tasks and Deliverables to be completed. The structure must be consistent with the CalHEERS Project Work Plan. 2. Narrative describing each task and Deliverable. 3. Contractor and State staff required and roles and responsibilities. 4. Summary of activities described in the weekly and monthly status reports. Creation and maintenance of a log of all problems, issues, and action items, including responsible parties, due dates and actions taken. 5. A plan and schedule for Transition-Out of all System documentation and Source Code 6. The approach and methods for transitioning of components that are hosted by the Contractor to a prospective successor contractor. 7. Approaches and methodologies the Contractor will employ to transfer knowledge to State Resources and a prospective successor contractor. This plan shall include, but may not be limited to the following: a. Schedule of planned training sessions, site visit tours, and demonstrations. b. Number of staff to be trained per topic area. c. Training topics with training objective descriptions and summaries for each topic. d. Length and location of each training session. 8. Capture Lessons Learned a. Incorporate applicable lessons learned from the Transition-In activities. b. Incorporate applicable guidance and lessons learned from the prior CalHEERS Transition-In. 9. Address Transition-In activities for all transition components and M&O responsibilities as defined in the Contract. 10. Describe how they will plan, organize, communicate, implement, monitor, and report the status of all Transition-Out activities. 11. Act as the Master Transition-Out document by which the other Transition-Out documents are referred and traceable. 12. Include support to the State with transition activities of the new Transition-In Contractor. 13. The approach for supporting the Cutover of services and functions to a successor Contractor or the State.
7.3.1-04 (new)	The Contractor shall update the following appendices and attach them to the Transition-Out Plan. Appendix 1–SOW to Deliverable Traceability Checklist Description: A table where the Contractor identifies the SOW requirements for this Deliverable, as specified within SOW Section 8, DELIVERABLES, and includes but is not limited to: 1. SOW Requirement ID # 2. SOW Requirement Text 3. Requirement Traceability (Contractor identified traceability from the requirements to the Deliverable) 4. Requirement Fulfillment (Define how the Contractor has fulfilled the SOW requirements in the Deliverable) Appendix 2–Deliverable Compliance and Validation Checklist Description: A QA Checklist that includes, but is not limited to: 1. Deliverable Section Number and Title

Req #	SOW Requirement
	2. Deliverable Requirement Statement(s) 3. Requirement Completion (How the Contractor has complied with or will comply with the requirement statements within the Deliverable) 4. Validation Method (The method the Contractor used to validate Deliverable compliance) 5. The Contractor's QA Manager sign-off on compliance Appendix 3—Associated Artifacts Description: An extract from the Project Artifact Inventory List of artifacts associated with this Deliverable, and will include but is not limited to the following examples: 1. Artifact Name 2. Associated Parent DEL 3. State Approver 4. SI Point of Contact 5. Review Frequency 6. Submission Frequency 7. Artifact File Format 8. Artifact Location (e.g., SharePoint breadcrumb) 9. Link to artifact

7.3.1.2 TOP – Final Year Update

Upon award of the new SI contract, and possible successor contractor, the Transition-Out Plan will need to be updated to reflect changes from a successor contractor (if applicable). Collaboration between the State, incumbent SI (Transition-Out) and new contract SI (Transition-In) will need to begin.

Table 7-34: Transition-Out Plan (TOP) - Final Year Update (CD-7.3-2)

Req #	SOW Requirement
7.3.1-05 (new)	The Contractor shall submit for approval and update to the TOP to coincide with the start of the new SI contract. The contractor shall coordinate with the State as well as the successor contractor (if applicable) to ensure cohesive interaction between Transition-In activities (under the new contract), and transition-out activities under the existing contract.
7.3.1-06 (modified)	The Contractor shall manage updates and changes to the Transition-Out Plan (as needed) throughout the Transition-Out period in accordance with standard CalHEERS configuration management and document management practices.

7.3.2 Transition-Out Walkthrough Tours

Transition-Out walkthrough Tours ensure Transition-Out activities have been accurately and appropriately executed in timely manner. The Contractor shall perform the services described in this section.

Table 7-35: Transition-Out Walkthrough Tours (CD-7.3-3)

Req #	SOW Requirement
7.3.2-01 (new)	The Contractor shall staff, manage, lead and execute Transition-Out Walkthrough activities on the CalHEERS as defined in this Statement of Work.
7.3.2-02 (existing)	Two and one-half (2.5) years prior to the end of the Contract, the Contractor shall support and/or conduct onsite facility walkthroughs and/or demonstrations of the logical and actual operation of CalHEERS, annually for each site as requested by the State Project Director or designee. Potential sites and/or demonstrations include but are not limited to:

Req #	SOW Requirement
	1. CalHEERS Operations, Service Desk, Print Center. These tours, walkthroughs, and demonstrations shall be provided for up to ten (10) representatives of a prospective Contractor, per tour, during the Contractor's normal working hours. 2. Tour dates and times shall be arranged by the Contractor at the request of, and with the written acceptance of the State.
7.3.2-03 (existing)	The Contractor shall submit the content and format of the materials to be used in the walkthroughs and demonstrations for the State Project Director or designee prior to written acceptance.
7.3.2-04 (new)	The Contractor shall adopt and maintain all Project Artifacts that are associated with this Deliverable in the Project Artifact Inventory and manage them in accordance with the Project Artifact process.
7.3.2-05 (new)	The Contractor shall collaborate with the State to develop and maintain any new Project Artifacts necessary to support the requirements described under this section (e.g. presentations, or handouts). New artifacts shall be added to the Project Artifacts Repository and managed in accordance with the Project Artifact process.

7.3.3 Transition-Out Work Plan (Schedule)

The Transition-Out Work Plan (Schedule) encompasses the scope of activities and tasks and is used to track the progress of the Contractor's efforts during the Transition-Out period for the appropriate component area identified by the State.

These activities and tasks include but are not limited to service and function migrations, knowledge transfer, training, data transfer, documentation maintenance, change management, customer support, progress reporting, facilities preparation installation, training, systems testing, quality assurance, closeout, systems assumption, and communication.

The Transition-Out Work Plan (Schedule) also includes the integration of activities between State, Incumbent and the successor Contractor transition activities, as well as incorporates risk management implications into the schedule. The Transition-Out Work Plan is created in MS Project and provides the detailed project schedule that organizes and implements the Work Breakdown Structure (WBS).

The Transition-Out Work Plan (Schedule) created by the Contractor shall allow the Contractor to understand the overall timeframe required for completing Transition-Out and Closeout activities.

Table 7-36: Transition-Out Work Plan (Schedule) (CD-7.3-4)

Req #	SOW Requirement
7.3.3-01 (new)	In parallel with the creation of the Transition-Out Plan, the Contractor shall develop submit a Transition-Out schedule in MS Project. The schedule shall be consistent and be cohesive, compatible, and traceable to the approved TOP. The scheduled shall be managed to the rigor and quality as defined by the CalHEERS Schedule Management Plan.
7.3.3-02 (existing)	The Contractor shall, as part of Transition-Out activities, establish a data migration schedule and obtain acceptance, in writing, by the State Project Director or designee and successor Contractor.
7.3.3-03 (existing)	The Contractor shall implement support for Cutover of M&O Services and functions to a successor Contractor or the State as identified in the Transition-Out Plan and Transition-Out Work Plan.
7.3.3-04 (new)	Transition-Out activities shall begin during the final year of the contract (and during the Transition-In of a prospective new contractor) in accordance with the TOP and TOP schedule.
7.3.3-05 (new)	Transition-Out activities of the Contractor shall work in coordination and cohesion with the Transition-In activities of the successor contractor.

7.3.4 Transition-Out Meeting Agendas/Minutes and Status Reports

Transition-Out Meeting/Agenda/Minutes and Status reports show that that Transition-Out activities are complete and provide information that shows all transition components are transitioned, and work plan activities are complete.

Transition-Out status reports activities actively needed to track and provide status of Transition-Out activities. Requirements in this section also address the plans, communication, and reporting mechanisms needed to support management and implementation of the Transition-Out activities. The Contractor shall perform the services described in this section. The Contractor shall perform the services described in this section.

Table 7-37: Transition-Out Meeting Agendas/Minutes and Status Reports (CD-7.3-5)

Req #	SOW Requirement
7.3.4-01 (existing)	At the onset of the Transition-Out Period, the Contractor shall include Transition-Out status reporting in the Weekly Status Report. The Transition-Out portion of the Weekly Project Status Report shall include at a minimum a description of the progress made on each Task, Deliverable, and/or Milestone, including any variance from the baseline.
7.3.4-02 (existing)	The Contractor shall provide technical advice and assistance as identified and requested by the State Project Director or designee to support the successor Contractor or State after Cutover.

7.3.5 Transition-Out Training and Training Materials

Transition-Out Training and Training Materials are needed to provide comprehensive training to the successor Contractor, supervisory, and technical staff; the training shall utilize current and complete systems documentation; as well as instruction materials and handbooks. All training materials shall be based on the complete and current documentation required under this Contract. The Contractor shall perform the services described in this section.

Table 7-38: Transition-Out Training and Training Materials (CD-7.3-6)

Req #	SOW Requirement
7.3.5-01 (existing)	The Contractor shall conduct knowledge transfer activities as identified in the Transition-Out Plan and Transition-Out Work Plan.
7.3.5-02 (existing)	Twenty-nine (29) months prior to the end of the Contract, the Contractor shall provide training materials to be used in the walkthroughs and demonstrations, including the systems training for the State Project Director or designee's prior written acceptance.
7.3.5-03 (existing)	Upon the State Project Director or designee's written request, the Contractor shall provide the following at a minimum: comprehensive training to the successor Contractor, supervisory, and technical staff; the training shall utilize current and complete systems documentation; as well as instruction materials and handbooks. All training materials must be based on the complete and current documentation required under this Contract. Formal training sessions shall be provided for up to 30 successor Contractor or State staff for a minimum of 40 hours of class instruction per individual. Each class session shall have a maximum of 15 individuals. The training shall be centralized around hands-on training, as determined by the State Project Director or designee.

Req #	SOW Requirement
7.3.5-04 (existing)	Prior to the start of Transition-Out Training, the Contractor shall provide the State Project Director or designee with the following: 1. A schedule of planned training sessions. A description of the professional background, experience, knowledge of the subject, and previous training experience for each trainer. 2. Number of staff to be trained per area. 3. Training subjects. 4. Training methodology (include description of training material handouts and media format of this material). 5. Length of each training session. 6. Sample copies of material to be used in training sessions and location(s) of training sessions.
7.3.5-05 (new)	The Contractor shall staff, manage, lead and execute Transition-Out Walkthrough activities on the CalHEERS as defined in this Statement of Work and in accordance with the CD-7.3-6 – Transition-Out Training and Training Materials.
7.3.5-06 (new)	The Contractor shall only alter or modify this Deliverable's structure or content with the approval of the State Project Director or designee.
7.3.5-07 (existing)	The Contractor shall provide training in support of site walkthroughs and demonstrations and as identified in the schedule of planned training sessions.
7.3.5-08 (existing)	The Contractor shall turnover and develop, update, deliver, maintain, and execute the following Project Management Deliverables in accordance with the Contract, which are included within the M&O Fixed Price Services Costs of the Contract: • Transition-Out Work Plan
7.3.5-09 (existing)	The Contractor shall provide an M&O Transition Plan that gives the framework for the management and execution of the CalHEERS Transition-In and Out Phase from start-to-transition (close out). This shall include but not be limited to Transition-In and Transition-Out activities.
7.3.5-10 (existing)	The Contractor shall turn over, update, deliver, maintain, and execute a Transition-Out Plan which at a minimum shall include, but not be limited to resources, staffing, schedule, process description, accurate system and operation system documentation, design documentation, software, hardware, all operational activities, and dependencies to successfully Transition-Out, CalHEERS Operations.
7.3.5-11 (existing)	The Contractor shall develop and maintain the CalHEERS M&O Master Plan to include descriptions of the methods, tools, techniques, and assumptions used to estimate the Contract costs and associated confidence levels for planned activities as well as changes to scope.
7.3.5-12 (existing)	The Contractor shall develop and maintain the CalHEERS M&O Master Plan to include a plan for business processes and system migration at transition, Contract termination or at the end of the Contract.
7.3.5-13 (existing)	The Contractor shall develop and maintain the CalHEERS M&O Master Plan to include a plan that ensures the successful closeout of the Contract by the Contractor, including all CalHEERS hardware, software, source code, data, services, staffing, Deliverables, and archived project materials.
7.3.5-14 (existing)	The Contractor shall develop and maintain the CalHEERS M&O Master Plan to include tasks for the preparation of a final report, which shall include but not be limited to, lessons learned, and an analysis of objectives achieved.
7.3.5-15 (existing)	The Contractor shall update and maintain the CalHEERS M&O Master Plan to include descriptions of the Contractor's processes and activities for executing, monitoring, controlling, and Transition-Out Contract closeout services.
7.3.5-16 (existing)	The Contractor shall develop and maintain the CalHEERS Transition-Out Plan to include activities for conducting debriefings with the State in the event of Contract termination or Contract expiration.
7.3.5-17 (modified)	The Contractor shall accurately document and provide detailed Knowledge Transfer (written and training) for any and all system, software, hardware and database information for Transition-Out activities and Deliverables.

Req #	SOW Requirement
7.3.5-18 (existing)	The Contractor shall conduct knowledge transfer activities as identified in the Transition-Out Plan and Transition-Out Work Plan.
7.3.5-19 (existing)	The Contractor shall provide an overall structure of the Closeout Plan that includes, but is not limited to, the following: 1. Contract Closeout Planning and Execution 2. Project Management 3. Control Processes 4. Technical Processes 5. Program Support 6. Supporting Processes 7. Contract Closeout
7.3.5-20 (existing)	The Contractor shall resolve all Contract Closeout expectations that includes, but is not limited to, the following: 1. The resolution of all documented Contractor-responsible deficiencies associated with the present and any prior Deliverables as stipulated through the approved deficiency process. 2. The successful completion of all other work breakdown structure elements, tasks, and Deliverables for this milestone as specified in the Contract Closeout Work Plan (Schedule). 3. The successful completion of all other contractual obligations that were identified in the Closeout Plan.
7.3.5-21 (new)	The Contractor shall adopt and maintain all Project Artifacts that are associated with this Deliverable in the Project Artifact Inventory and manage them in accordance with the Project Artifact process.
7.3.5-22 (new)	The Contractor shall collaborate with the State to develop and maintain any new Project Artifacts necessary to support this section. New artifacts shall be added to the Project Artifacts Repository and managed in accordance with the Project Artifact process.
7.3.5-23 (modified)	The Contractor shall update the following appendices and attach them to the Transition-Out Training and Training Materials. Appendix 1—SOW to Deliverable Traceability Checklist Description: A table where the Contractor identifies the SOW requirements for this Deliverable, as specified within SOW Section 8, DELIVERABLES, and includes but is not limited to: 1. SOW Requirement ID # 2. SOW Requirement Text 3. Requirement Traceability (Contractor identified traceability from the requirements to the Deliverable) 4. Requirement Fulfillment (Define how the Contractor has fulfilled the SOW requirements in the Deliverable) Appendix 2—Deliverable Compliance and Validation Checklist Description: A QA Checklist that includes, but is not limited to: 1. Deliverable Section Number and Title 2. Deliverable Requirement Statement(s) 3. Requirement Completion (How the Contractor has complied with or will comply with the requirement statements within the Deliverable) 4. Validation Method (The method the Contractor used to validate Deliverable compliance) 5. The Contractor's QA Manager sign-off on compliance Appendix 3—Associated Artifacts Description: An extract from the Project Artifact Inventory List of artifacts associated with this Deliverable, and will include but is not limited to the following examples:

Req #	SOW Requirement
	- Artifact Name - Associated Parent DEL - State Approver - SI Point of Contact - Review Frequency - Submission Frequency - Artifact File Format - Artifact Location (e.g., SharePoint breadcrumb) - Link to artifact

7.3.6 Transition-Out Component Worksheet Updates

Transition Component requirements address what is to be transitioned and are defined in terms of the services, functions, and other items that are being used to meet M&O support requirements.

The incumbent Contractor's Project Closeout Plan and Transition-Out Plan identifies inventory components for closeout which can be used to help the Contractor identify transition components for each of the M&O support areas and other transition items.

The Contractor creates a transition component inventory which identify what must be transitioned so that the Successor Contractor can assume operational control of CalHEERS and become responsible for all M&O support.

The Contractor then manages updates to the component inventory until all components are successfully transitioned.

Table 7-39: Transition-Out Component Worksheet Updates

Req #	SOW Requirement
7.3.6-01 (existing)	Within ten (10) Days of receipt of the Notice of termination or expiration, the Contractor shall provide, in machine readable form, an up-to-date, usable copy of the Custom Software and Data and a copy of all Documentation needed by the State to utilize the Custom Software and Data.
7.3.6-02 (existing)	The Contractor shall ensure that all consents or approvals to allow Contractor and Subcontractors to provide the assistance required following termination or expiration have been obtained, on a contingent basis, in advance and will be provided by the applicable third parties at no cost or delay to the State.
7.3.6-03 (existing)	The Contractor shall provide to the successor, via the State, an initial and complete set of all State system software and Documentation.
7.3.6-04 (existing)	The Contractor shall provide daily updates of changes to the State System from that date forward (ten (10) Days from the receipt of the Notice of termination or expirations) through the end of the Contract Term and the completion of the transfer of all residual inventory and records to the successor contractor.
7.3.6-05 (existing)	The Contractor shall provide the State or the subsequent provider all appropriate Software and all Documentation, Data, test data, and procedures.
7.3.6-06 (existing)	Six (6) months after the Operations Effective Date, the Contractor shall provide an annual report of all failed backup and necessary restoration events in the previous reporting year to the State Project Director or designee. This report must include details of each event including date and time, full description of the event, actions taken and impact. At the request of the State Project Director or designee, the vendor shall be required to provide all backup and recovery logs for the past 12 months.

Req #	SOW Requirement
7.3.6-07 (existing)	The Contractor shall provide an annual report that shall include, but not limited to the following information: 1. Details of each event including date and time 2. Full description of the event 3. Actions taken and impact. At the request of the State Project Director or designee, the vendor shall be required to provide all backup and recovery logs for the past 12 months.
7.3.6-08 (existing)	Twelve (12) months prior to the end of the Term of Contract, the Contractor shall complete an inventory and assessment of all the items contained in the State. The assessment of Documentation shall include, but not be limited to the following: 1. Complete and comprehensive Review and evaluation of all State Project Documentation, including the following: a. All State project Deliverables. b. All State design documents, including the most current State data map, data dictionary, database descriptions, batch run books, and listing of all State Interfaces by Interface Partner. c. The most current and up-to-date State Source Code. d. All State Contracts, Contract Amendments and Change Orders. e. All State Project Audits. f. All State Project invoices and payment records. g. All State Project policies and procedures. h. A current detailed asset inventory, including start and end dates of all, warranties, software licenses, service Contracts and current location information including site, rack, server, and network connection point. This includes but is not limited to any other Documentation that would facilitate successor contractors' understanding of overall Standards, Network bandwidth needs, Hardware Capacity, Software needs, and Network topology to maintain and operate the current State System. 2. Any other information required by the State. 3. A Gap Analysis identifying specific State Project Documentation that requires updates or revisions. 4. The archiving, central storing, and file location listing of all State Project Documentation. Note: Many of the above listed items will be needed 24 months prior to the end of the Contract and, to support the procurement, shall be updated and produced during this time at the request of the State.
7.3.6-09 (existing)	The Contractor shall maintain and update the Component Worksheets developed under this Contract in support of Transition-Out activities.
7.3.6-10 (modified)	The Contractor shall maintain the Component Worksheets in an accessible location for State staff to access and provide feedback.
7.3.6-11 (existing)	The Contractor shall make any modifications to the Component Worksheets as deemed applicable for the new M&O Contract and approved by the State Project Director or designee.
7.3.6-12 (existing)	The Contractor shall manage and maintain the Component Worksheets throughout the Transition-Out process (as applicable) until all components are successfully transitioned.
7.3.6-13 (existing)	The Contractor shall maintain and update the Component Worksheets developed under this Contract in support of Transition-Out activities.

7.3.7 Transition-Out Execution Activities

Transition-out activities will be performed during the transition-out period and include the execution of work established by the TOP and other deliverables described under this section.

Table 7-40: Transition-Out Execution Activities

Req #	SOW Requirement
7.3.7-01 (new)	The Contractor shall staff, manage, lead and execute Transition-Out activities on the CalHEERS as defined in this Statement of Work and in accordance with the TOP.
7.3.7-02 (modified)	The Contractor shall execute and oversee all activities specified in the approved Transition-Out Work Plan (Word Document) and Transition-Out Work Plan (MS Project schedule) throughout the Transition-Out period.
7.3.7-03 (existing)	The Contractor's Transition-Out Management Team shall oversee the activities, completion, and implementation of all Transition-Out tasks listed in the Contract and/or subsequent Change Orders, including the assessment and update of State Project Documentation and the submission of a Transition-Out Project Plan.
7.3.7-04 (modified)	Upon the State Project Director or designee's Acceptance of the Transition-Out Plan, the Contractor shall start the execution of transition out activities by establishing the baseline for both the Transition-Out Plan document (using version control and track changes), and the Transition-Out Work Plan (schedule). The schedule baseline shall be utilized to track any variance(s) from the Transition-Out Work Plan.
7.3.7-05 (modified)	The Contractor shall plan, coordinate, and execute the Transition-Out activities of this Contract with the Transition-In activities of the successor Contractor or the State during the final year of the contract (and first year of a prospective new SI contractor).
7.3.7-06 (existing)	At the onset of the Transition-Out activities, the Contractor shall submit a letter to the State indicating which individuals have been identified to serve on a Transition-Out Management Team and the start/stop timeframes they will serve.
7.3.7-07 (existing)	Notwithstanding anything contained herein to the contrary, in the event this Contract is terminated by the State due to a material breach by the Contractor of its obligations hereunder or for the State's convenience, the State shall have the option to continue the use and operation of the Hosting Services and System for a period of not more than 180 Days after the effective date of termination or expiration of this Contract in order to identify and complete the transition to alternative software products and services.
7.3.7-08 (existing)	In addition, upon expiration of the Contract or Contractor's receipt of notice of termination of the Contract by the State, the Contractor will provide any turnover assistance Services necessary to enable the State or its designee to effectively close out the Contract and move the work to another vendor or to perform the work by itself.
7.3.7-09 (existing)	If the State exercises its option to extend the Term, the extension shall result in a delay of all Transition-Out activities for a commensurate period of time. The State shall work closely with the Contractor during this Process and must approve all updates to the Contractor's Transition-Out approach and plans.
7.3.7-10 (existing)	The Contractor shall manage updates and changes to the Transition-Out Work Plan (as needed) throughout the Transition-Out period.
7.3.7-11 (modified)	The Contractor shall provide all other files, application code, documentation, records, transaction information, and assistance the State identifies as necessary for the orderly and successful transfer of the system to the successor Contractor, or the State as directed by the State Project Director or designee. This includes, but is not limited to the following: 1. On the successor Contractor's Contract effective date or a date established by the State Project Director or designee, the Contractor shall provide to the State a summary of all reports produced by the Contractor, as required by the Contractor and the individuals/organizations to whom the reports are delivered, including a schedule of required delivery dates. 2. On the successor Contractor's Contract effective date or a date established by the State Project Director or designee, the Contractor shall provide to the successor Contractor, via the State, an initial complete set of the systems code and documentation. 3. The Contractor shall provide weekly updates of CRs to the system from the successor Contractor's Contract effective date or a date established by the State Project Director or designee forward through the end of the Transition-Out period and the completion of the transfer of all residual inventory and records to the

Req #	SOW Requirement
	successor Contractor or the State. 4. Beginning six (6) months prior to the end of the Transition-Out phase, the Contractor shall provide User Acceptance Testing support to both the State and the successor Contractor. The Contractor shall satisfy all requests for support within a reasonable time, but in no case longer than two (2) Business Days, unless given prior written acceptance by the State Project Director or designee. This support shall include, but not be limited to the following subtasks: - Provide to the State the System, files, test data files, tables, System document copies, and all other documentation and information requested by the State to support at least two (2) parallel tests, and other testing as determined by the State. - Provide successor Contractor or State staff with access to the required System. - Provide assistance to the State with interpretation and analysis of test results. - Provide any statistics requested by the State regarding the levels of accuracy of the System. - Provide to the successor Contractor or the State certified production copies (certifying in writing that each is complete, current, accurate and are what the Contractor uses for production) of each of the following on electronic media and/or secure transmissions: - System source code. - Source code library file(s). - A listing identifying which, if any modules are on-line or which, if any are batch processed. - Data element dictionary. - All Equipment/Software configurations, security, database schemas, build macros, and all configuration parameters of all tools utilized to support the operation of the System. - All operational parameters to operate and support the operation of System. 5. Any and all source related components necessary to perform the Contract's Statement of Work requirements shall be included in this requirement regardless of nomenclature.
7.3.7-12 (existing)	During the Transition-Out period, the Contractor shall facilitate an orderly transfer of the CalHEERS and corresponding application code from the Contractor to the State or a (successor) Contractor in accordance with the TOP and Sunset Agreement.
7.3.7-13 (existing)	The Contractor shall maintain Staff throughout the Transition-Out period to satisfy and maintain compliance with all performance standards and requirements of the Contract.
7.3.7-14 (existing)	Eight (8) months prior to the end of the Transition-Out phase, the Contractor shall provide the destination of the actual data transfers (e.g., portal, domain name system, etc.).
7.3.7-15 (existing)	The Contractor shall identify all data lines that are being utilized to support CalHEERS operations along with their purpose and planned disposition at end of operations to include working with the State to transfer or remove data lines. Not later than one (1) Business Day prior to the end of the operations period, the incumbent Contractor shall transfer to the new Contractor all data lines used for State terminal network communication or terminate those data lines in the event the respective carriers prohibit transfer. The Contractor shall inform the State of either action when taken and completed.
7.3.7-16 (existing)	The Contractor shall transfer items needed to allow the successor Contractor or the State to establish a development system environment. These items include but are not limited to the following: - Application Code - Hardware and Software Configuration - Data - Technical Information

Req #	SOW Requirement
7.3.7-17 (existing)	The Contractor's Transition-Out activities shall begin during the M&O phase and shall continue until the State Project Director or designee provides approval of system operation to a successor Contractor or the State.
7.3.7-18 (existing)	The Transition-Out phase shall be concluded upon successful completion of the Transition-Out Review as referenced in Milestone Reviews. The criterion for passing the Transition-Out Review is that the Contractor demonstrates that they have successfully completed the activities and Deliverables identified in the Transition-Out Work Plan.
7.3.7-19 (existing)	The Contractor shall cooperate with and assist the State and the successor Contractor(s) in end of Contract changeover planning, preparation, testing, and transfer of CalHEERS services and CalHEERS data (as needed) to the successor Contractor or the State.
7.3.7-20 (existing)	The Contractor shall work with the State to develop a Work Authorization for end of Contract changeover services.
7.3.7-21 (existing)	The Contractor shall participate in end of Contract changeover joint meetings with the State and the successor Contractor.
7.3.7-22 (existing)	The Contractor shall provide all CalHEERS data files as specified by the State, in support of the changeover services.
7.3.7-23 (existing)	The Contractor shall work with the State and the successor Contractor to define the format and layout of CalHEERS data files to be transferred to the successor Contractor and/or the State.
7.3.7-24 (existing)	The Contractor shall provide a minimum of three (3) sets of CalHEERS data files to the State and the successor Contractor for testing of data transfer processes.
7.3.7-25 (existing)	The Contractor shall provide CalHEERS files to the State and the successor Contractor for system Cutover to the successor Contractor.
7.3.7-26 (existing)	The Contractor shall develop and distribute a system disruption notification to all active (as defined by the State) CalHEERS users explaining the downtime associated with system Cutover.
7.3.7-27 (existing)	The Contractor shall transfer the Service Desk numbers to the successor Contractor.
7.3.7-28 (existing)	The Contractor shall manage the transfer of ownership, or return of, all equipment owned by the State, as defined within the CalHEERS Hardware and Software Inventory Management Plan Deliverable.
7.3.7-29 (existing)	The Contractor shall provide Transition-Out activities and Deliverables that is included within the fixed-price cost.
7.3.7-30 (existing)	The Contractor shall ensure all Transition-Out media or transmissions are secured and encrypted. This includes but shall not be limited to tapes, Digital Video Disks (DVDs), and file transfers.
7.3.7-31 (existing)	The Contractor shall ensure the Transition-Out media is readable and in an acceptable industry standard format.
7.3.7-32 (existing)	The Contractor shall implement knowledge transfer to help ensure that the successor Contractor or the State understands and is prepared to assume SDMO support responsibilities. Knowledge transfer shall include but is not limited to providing documentation, conducting formal training or walkthroughs/demonstrations of operational processes and procedures, Q&A sessions, job shadowing, and/or providing technical and advice and assistance during an initial operational period following Cutover as deemed adequate and appropriate by the State.
7.3.7-33 (existing)	The Contractor shall participate in Transition Readiness Reviews and provide information on the actions taken to prepare the successor Contractor or the State to assume responsibility for M&O support to include but is not limited to services, functions, or other items identified in the Transition-Out Plan.
7.3.7-34 (new)	The Contractor shall adopt and maintain all Project Artifacts that are associated with this Deliverable in the Project Artifact Inventory and manage them in accordance with the Project Artifact process.

Req #	SOW Requirement
7.3.7-35 (new)	The Contractor shall collaborate with the State to develop and maintain any new Project Artifacts necessary to support this section. New artifacts shall be added to the Project Artifacts Repository and managed in accordance with the Project Artifact process.
7.3.7-36 (existing)	Throughout the Transition-Out period, implement activities shall include but not be limited to the following: 1. Provide access to Facilities and support for the installation of Hardware and Software needed to accomplish the Transition-Out. 2. Make role and responsibility changes for the operation and support of the State system between the Incumbent and the new Contractor. These changes may occur throughout the course of the Transition-Out Period. 3. Support the installation of additional Network connectivity to State Facilities as necessary to accomplish the Transition-Out. It may be necessary to reimburse the Contractor for reasonable costs for this connectivity by the State if there is not adequate excess capacity or the Contractor does not pay for the connectivity directly. 4. Make State System and Network configuration changes necessary to accomplish the Transition-Out. 5. Permit network traffic to transit between the Contractor data centers and the Trusted State network necessary to accomplish the Transition-Out. 6. Continue to Support the components of the State System that are in the control and possession of the Contractor while potentially connected to components of the State System that are in the control and possession of the Contractor.

7.3.8 Transition-Out Completion Reports

The Transition-Out Completion Report will be the final report for all Transition-Out activities, and act as one of the inputs to the Contract Closeout found in SOW 3.1.3 CONTRACT CLOSEOUT as well as the Contract Closeout Plan (CD-3.1-2). Note: The Transition-Out completion report is specific to only the activities and expectations identified in SOW 7.3 TRANSITION-OUT. The contractor may reference this report as part of the Contract Closeout documentation.

Table 7-41: Transition-Out Execution Activities

Req #	SOW Requirement
7.3.8-01 (existing)	The Contractor shall prepare a Final Project Completion Report that includes but is not limited to: 1. Executive Summary: Scope, Schedule, Budget: Plan vs. Actuals Organization and Project Management Approach 2. Summaries by major Project Team: PMO, Application Development & Testing, Technical, Implementation, Training 3. Summary of key issues and risks 4. Key Best Practices and Lessons Learned 5. Requirements Summary 6. Administrative and Contract Closure 7. Contract Closure 8. Information Distribution & Archive

7.4 TRANSITION PAYMENTS

7.4.1 Transition-In (TIP1) Payments

Payments for Transition-In work is based on successful completion of the key milestones as identified and calculated in Appendix D-8.1, TRANSITION-IN PAYMENT.

Table 7-42: TIP1 Payment

Req #	SOW Requirement
7.4.1-01 (modified)	Payments for Transition-In (TIP1) work are based on successful completion of the key milestones as identified and calculated in Appendix D-8.1, TRANSITION-IN PAYMENT.

7.4.2 Transition-In (TIP2) Payments

Payments for Transformation work is based on successful completion of the key milestones as identified and calculated in Appendix D-8.1, TRANSITION-IN PAYMENT.

Table 7-43: TIP2 Payments

Req #	SOW Requirement
7.4.2-01 (modified)	Payments for Transition-In Transformation (TIP2) work are based on successful completion of the key milestones as identified and calculated in Appendix D-8.1, TRANSITION-IN PAYMENT.

7.4.3 Transition-Out Payments

Payments for Transition-Out work is based on successful completion of the key transition-out milestones as identified and calculated in Appendix D-8.3, TRANSITION-OUT PAYMENT.

Table 7-44: Transition-Out Payments

Req #	SOW Requirement
7.4.3-01 (existing)	The Contractor shall accurately take all actions necessary and transfer ownership of each Deliverable to the State upon payment therefor, subject to the exercise of the State's remedies, and each other Work Product upon its delivery.
7.4.3-02 (existing)	The State shall pay on a time and materials basis at rates in the Contract for turnover assistance, subject to mutual written agreement on such work to be performed, and Contractor agrees that any of its out-of-pocket costs, which will be reimbursed by the State, will not be marked up to include profits.
7.4.3-03 (new)	Payments for Transition-Out work are based on successful completion of the key milestones as identified and calculated in Appendix D-8.3, TRANSITION-OUT PAYMENT.

SOW SECTION 8 DELIVERABLES

SOW SECTION 8 – DELIVERABLES

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8 DELIVERABLES

The responsibility for development, production, delivery, and maintenance of CalHEERS Project Deliverables rests with the Contractor. The State expects the Contractor to adhere to the State's Standard Process for Deliverables, beginning with a Deliverable Expectation Document (DED), followed by a draft Deliverable, then a final Deliverable.

The State will meet with the Contractor to discuss and clarify specific expectations for each DED and Deliverable in advance of the DED due date. For periodic Deliverables, the State will work with the Contractor to identify those Deliverables for which both draft and final versions are required. For example, after the initial Monthly Status Report, the State does not expect a draft Monthly Status Report to be produced.

Once a DED, draft Deliverable, or final Deliverable is submitted, the State will conduct a review and provide consolidated comments using a standard template. The State understands and expects that multiple Deliverables may be in the development stage simultaneously.

In the event the State finds a Deliverable to be unsatisfactory, the State will notify the Contractor of the reason(s) for the rejection in writing and identify specific Deficiencies. State staff will meet and confer with the Contractor to provide clarification as requested or needed. Rejection of a Deliverable does not allow for schedule delays regarding subsequent Deliverables, unless approved in writing and in accordance with the Contract by the State Project Director, or designee.

Please note that this section of the Sstatement of ~~w~~Work (SOW) references multiple sets of standards, which are subject to change over time. Please refer to APPENDIX A-2, SPECIAL PROVISIONS, Section 7.7, UPDATES TO STANDARDS, REGULATIONS, AND CODES, regarding project processes around standard updates.

8.1 GENERAL DELIVERABLE REQUIREMENTS

The following sections outline the general requirements for the development, formatting, preparation, submission, acceptance /approval of CalHEERS System Development Maintenance and Operations (SDMO) Informal and Formal Deliverables.

These general requirements help with the consistency and quality of documentation, facilitates communication, and provides for clear and concise instructions related to the content and quality of Contract required Deliverables.

8.1.1 Consistency and Quality

The Contractor's Deliverables must follow the guidelines in the Office of Technology & Solutions Integration (OTSI) Writing Style Guidelines. The following requirements apply to Deliverable consistency and quality.

Table 8-1: General Deliverable Requirements

Req #	SOW Requirement
8.1.1-01 (existing)	The Contractor shall be responsible for the development, production, delivery and maintenance of CalHEERS Project Informal and Formal Deliverables.
8.1.1-02 (new)	The Contractor shall replace and update all Appendix 1, 2, & 3's for all Deliverables.
8.1.1-03 (new)	The Contractor shall, for all deliverables with associated standards, refer to the standards update process defined in Appendix A-2, SPECIAL PROVISIONS, Section 7.7, UPDATES TO STANDARDS, REGULATIONS, AND CODES.

Req #	SOW Requirement
8.1.1-04 (new)	The Contractor shall only modify the structure and content of a Deliverable with State agreement, and the approval of the State Project Director or designee.
8.1.1-05 (existing)	The Contractor shall ensure that Informal and Formal Deliverables will use terminology consistent with Appendix C, GLOSSARY, the executed Contract and STATEMENT OF WORK (SOW), current CalHEERS System documentation, and other Contractor Deliverables.
8.1.1-06 (existing)	The Contractor shall perform an internal review of each Deliverable (and each Deliverable revision) to ensure that each Deliverable is free of formatting and typographical errors. In addition, any screen shots, graphs, and charts must be legible prior to submission to the State Project Director or designee. The Contractor shall ensure a quality product is submitted to the State that allows the State to approve the Informal or Formal Deliverable as submitted.
8.1.1-07 (existing)	For periodic Deliverables, the Contractor shall work with the State to identify those Deliverables for which both draft and final versions are required.
8.1.1-08 (existing)	The Contractor shall proceed to work on Deliverables prior to the State's formal Acceptance of any preceding Deliverables; as this does not relieve the Contractor of the obligation to adhere to the Deliverable Schedule as defined in the approved Work Plan.
8.1.1-09 (existing)	The Contractor shall work collaboratively with assigned State staff, including the State Contracts team, and committees and workgroups during the Deliverable development and review process, where appropriate, to minimize expectation gaps and expedite the acceptance process.
8.1.1-10 (existing)	The Contractor shall complete all Contract approved Deliverables, subject to SOW Sections 8.7 - 8.13.
8.1.1-11 (existing)	The Contractor shall ensure that all recommendations and Contract Informal and Formal Deliverables comply with the Patient Protection and Affordable Care Act of 2010, as well as all state law requirements that were passed in Assembly Bill 1602 (Chapter 655, Statutes of 2010), and Senate Bill 900 (Chapter 659, Statutes of 2010).
8.1.1-12 (existing)	The Contractor shall provide all Informal and Formal Deliverables within the timeframe specified and required by the State.
8.1.1-13 (existing)	The Contractor shall understand that all Informal and Formal Deliverables shall be reviewed, approved and accepted by the State.
8.1.1-14 (existing)	The Contractor understands that any State-requested revisions to any Deliverable shall be incorporated by the Contractor within seven (7) calendar days from the date in which the State provided its feedback or within a timeframe required and specified by the State.
8.1.1-15 (existing)	In the event the State requires additional refinements and modifications for any Deliverable which occurs after that Deliverable has been previously accepted by the State, the Contractor shall be required to make the additional revisions until the revised Deliverable is accepted and approved by the State.

8.2 DELIVERABLE EXPECTATION DOCUMENT (DED)

There are not many deliverables that require a DED. However, in the event that a DED is required, refer to the guidance herein.

A DED outlines what the Contractor proposes to include in the Deliverable. The DED should reflect the planned Deliverable content for all versions, even if the content is not included in the initial version.

Transition in deliverables will use the existing CalHEERS Transition DED as the starting point for creation of a new DED. The expectation is that the contractor will create a new DED by adopting the existing DED structure and content, making updates only to incorporate necessary changes resulting from the new contract. The Contractor shall create a new DED with additional expectations for the new deliverable, to be delivered for review and approval by the State. Upon approval of the new DEDs and based on existing CalHEERS Transition deliverables as samples

for the structure of the deliverable, the Contractor shall submit new Transition deliverables with updated and new DED requirements for review and approval by the State.

The DED identifies the Contractor's proposed response to the Deliverable's requirements specifications. The DED is submitted to the State Project Director or designee for review and approval prior to the development of the actual Deliverable. Modifications to Deliverable requirement specifications and/or the Contractor's DED can be identified during the review and approval process.

8.2.1 Deliverable Expectation Document

Table 8-2: DED Requirements

Req #	SOW Requirement
8.2.1-01 (existing)	The Contractor shall ensure that a DED will be submitted to the State Project Director or designee for each new Formal Deliverable, or as requested by the State Project Director or designee. Existing Deliverables (e.g., Operations Plan) will not require a DED, unless requested by the State Project Director or designee.
8.2.1-02 (existing)	The Contractor shall obtain the State's approval of a DED prior to developing the initial Deliverable.
8.2.1-03 (existing)	The Contractor shall ensure that Deliverables address all contractual requirements through the development and refinement of their associated DED.
8.2.1-04 (existing)	The Contractor shall ensure that the DED will be developed to conform to the standards agreed upon by the State Project Director or designee and the Contractor.
8.2.1-05 (existing)	The Contractor shall ensure that the DED will specify the content description, proposed format, proposed media, and number of copies for each Deliverable.
8.2.1-06 (existing)	The Contractor shall ensure that the DED includes a summary that, at a minimum, contains the following information: 1. Deliverable Number 2. Deliverable Name 3. Version Number 4. Review Gate Alignment 5. Acceptance Review & Walkthrough Requirements 6. Frequency of Submission 7. Final Deliverable Due Date 8. Date of Subsequent Submission 9. Delivery/Format
8.2.1-07 (existing)	The Contractor shall include, with all DEDs, a crosswalk table which maps each item listed in the Deliverable's SOW requirements to the DED section where the requirement is met.
8.2.1-08 (existing)	The Contractor shall ensure that each DED will include a DED transmittal letter, the document title, version number, a document control number, and date of the delivery.
8.2.1-09 (existing)	The Contractor shall ensure the DED lists the specific requirements for the Deliverable as described in the Contract.
8.2.1-10 (existing)	The Contractor shall ensure the DED lists the specific source of the requirement, including the document name, paragraph or page number, and the requirement number.
8.2.1-11 (existing)	The Contractor shall ensure the DED lists all applicable requirements (not just the single requirement that the Deliverable must be provided).
8.2.1-12 (existing)	The Contractor shall ensure the DED lists any documents that are referenced within the DED for the Deliverable.

Req #	SOW Requirement
8.2.1-13 (existing)	The Contractor shall provide a high-level outline of the Deliverable in the following format: Introduction 1. Assumptions, Constraints and Risks 2. Requirements 3. Referenced Documents 4. Glossary/Terminology 5. Acronyms 6. <Section 1 > - <Description> a. <Subsection 1> b. <Subsection 2> 7. <Section 2> - <Description> a. <Subsection 1> 8. <Subsection 1>
8.2.1-14 (existing)	The Contractor shall ensure each DED includes, at a minimum the following: 1. Approach for Deliverable development 2. Assumptions, constraints or risks related to the Deliverable 3. Scope 4. Schedule (key activities, due dates) 5. Critical Dependencies 6. Resources 7. Acceptance Criteria

8.2.2 DED Approval and Acceptance Process

Table 8-3: DED Approval and Acceptance

Req #	SOW Requirement
8.2.2-01 (existing)	The Contractor shall submit a DED to the State Project Director or designee for review and approval.
8.2.2-02 (existing)	The Contractor will work with the State to resolve all outstanding comments and issues related to a DED's acceptance.
8.2.2-03 (existing)	The State will approve the DED if the DED conforms to the Deliverable's requirements specifications and does not contain formatting errors. In addition, the State will provide comments and suggested edits electronically, by using Microsoft Word's track changes functionality, when a DED is not accepted.
8.2.2-04 (existing)	The State will notify the Contractor of the DED approval when there are no outstanding comments or suggested edits. The Contractor is then authorized to produce the Deliverable.

8.3 PREPARATION OF DELIVERABLES

This section outlines the expectations for preparation of Deliverables.

8.3.1 Preparation of Deliverables

For the preparation of Deliverables, the Contractor must include the following requirements.

Table 8-4: Preparation of Deliverables

Req #	SOW Requirement
8.3.1-01 (existing)	Except for Status Reports and unless otherwise approved, the Contractor shall accurately include the following standard sections in each Formal Deliverable: 1. Introduction 2. Assumptions, Constraints and Risks 3. Requirements 4. Referenced Documents 5. Glossary 6. Acronyms 7. Appendices as applicable
8.3.1-02 (existing)	The Contractor shall accurately define and implement the process for submitting CalHEERS Project Deliverables including but not limited to: 1. DEDs 2. General Acceptance Criteria 3. Draft Submissions 4. Revisions 5. Final submissions 6. Approval/Acceptance
8.3.1-03 (existing)	The Contractor's processes and Deliverables shall meet or exceed the current version of standards (IEEE, Project Management Body of Knowledge (PMBOK), and Information Technology Infrastructure Library (ITIL)) cited within Appendix A-4, STATEMENT OF WORK (SOW). As new versions of standards are available, adoption of the new standard will be considered through the change control process and approved by the State Project Director or designee.
8.3.1-04 (existing)	The Contractor shall use a document process that adheres to ISO/IEC 121207 IEEE Std. 12207-2008 Systems and Software Engineering—Software Life Cycle Processes (7.2.1 - Software Documentation Management Process).
8.3.1-05 (existing)	The Contractor shall adhere to the State's Document Management Plan and processes.
8.3.1-06 (existing)	The Contractor shall ensure that each work plan or Deliverable shall be placed under configuration management, in accordance with the processes defined within the Configuration Management Plan.
8.3.1-07 (existing)	The Contractor shall develop, deliver, and maintain user documentation, as follows: 1. Contractor shall identify the user documentation using the methodology of ISO/IEC/IEEE 26512- Systems and Software Engineering - Requirements for acquirers and suppliers of user documentation (5- User Documentation within a System/Software Life Cycle, 8-User documentation specification) and ISO/IEC/IEEE 23026:2015—Systems and Software Engineering—Engineering and management of websites for systems, software, and services information (7.3 - Developing a Strategy for Website Lifecycle Management) to include User's Manuals and Service Desk Procedures. 2. All user documentation shall have a Flesch Reading ease score of at least 60 and Flesch-Kincaid Grade Level of no more than 8.
8.3.1-08 (existing)	The Contractor shall ensure that Deliverables will be developed with consistent style and quality, in accordance with the Document Management Plan and the technical writing standards, as defined by the State Project Director or designee. This means that if the Deliverable is the composite work of multiple people within the Contractor's organization, the Deliverable shall be edited for style and consistency.
8.3.1-09 (existing)	The Contractor shall develop each Deliverable identified as requiring a DED, ensuring that it is consistent with all components identified in the related State approved DED.
8.3.1-10 (existing)	The Contractor shall ensure that each work plan or Deliverable will be updated to reflect the current business and system requirements.

Req #	SOW Requirement
8.3.1-11 (new)	The Contractor shall ensure that Deliverables are identifiable on the Deliverable Hierarchy Diagram and categorized correctly in accordance with the requirements for the DEL.
8.3.1-12 (new)	The Contractor shall provide training on formal deliverables for the State Deliverable Owner and their Team as deliverables are assigned for review as part of the Deliverable Prioritization Recommendation Report process. The State at its discretion shall notify the Contractor if a training session will be canceled.

8.4 DELIVERABLE SUBMISSION

The initial Deliverable shall conform to the Deliverable's Requirements Specifications. Contractor may submit a draft version of the Deliverable electronically, prior to the Deliverable's initial due date, for State review and comment. As specified in the General Provisions, "Time, if stated as a number of days, shall mean calendar days unless otherwise specified." (See APPENDIX A-2, CalHEERS SDMO GENERAL PROVISIONS, Section 14, DELIVERY)

8.4.1 Formal Deliverable Submission

For the submission of Deliverables, the Contractor must include the following requirements.

Table 8-5: Deliverable Submission

Req #	SOW Requirement
8.4.1-01 (existing)	The Contractor shall submit all Deliverables to the State Project Director or designee with a signed Deliverable Transmittal Letter. Each Deliverable Transmittal Letter shall be signed by the Contractor's representative who has been authorized to sign legal documents on behalf of the company and shall contain the following: 1. Deliverable Name 2. Related SOW Reference(s) 3. Deliverable due date 4. Actual completion date 5. Actual transmittal date 6. CalHEERS comments due date 7. Include the following statement: "I certify this Deliverable has been prepared in accordance with the relevant terms and conditions of the Contract and meets all Contract requirements." 8. Include the following statement: "<Contractor Name> has used the internal Deliverable review process as described in the Deliverable Management Process" 9. Include the following statement: "A walkthrough may be held during the CalHEERS review period upon request." 10. Signature of a Contractor representative who is authorized to sign legal documents on behalf of the company.
8.4.1-02 (existing)	The Contractor shall provide to the State Project Director or designee, in writing, the names and positions of the Contractor representatives who are authorized to sign Deliverable Transmittal Letters and other legal documents on behalf of the Contractor.
8.4.1-03 (existing)	The Contractor shall provide to the State Project Director or designee, in writing, with an updated list of the names and positions of the Contractor representatives who are authorized to sign Deliverable Transmittal Letters and other legal documents on behalf of the Contractor within five (5) Business Days of identification of a change to the list.
8.4.1-04 (existing)	The Contractor shall submit all Deliverables for acceptance to the State Project Director or designee.
8.4.1-05 (existing)	The Contractor shall submit Deliverables to the State Project Director or designee in accordance with SOW Sections 8.7 – 8.13 and the Transition-In work plan for the initial submittal, and the CalHEERS M&O Master Plan and the Document Management Plan for subsequent submittals.

Req #	SOW Requirement
8.4.1-06 (existing)	The Contractor shall submit Deliverables in the format specified in SOW Section 8, DELIVERABLES, the Document Management Plan, or as requested by the State Project Director or designee.
8.4.1-07 (existing)	The Contractor shall submit Deliverables in versions of software that are compatible with the versions of software used by the CalHEERS Project Management Office.
8.4.1-08 (existing)	The Contractor shall submit Deliverables via the media specified in this Section, the Document Management Plan, or as requested by the State Project Director or designee. Utilization of alternate media shall be approved by the State Project Director or designee.
8.4.1-09 (existing)	The Contractor shall submit two (2) electronic versions of Deliverables, one (1) in PDF format and one (1) in Microsoft changes to reflect the changes from the prior submission.
8.4.1-10 (existing)	The Contractor shall give Confirmation for each Deliverable.
8.4.1-11 (existing)	The Contractor shall include, with all Deliverables, a quality assurance (QA) checklist as defined in SOW Section 8.5, FORMAL DELIVERABLE APPROVAL PROCESS.
8.4.1-12 (existing)	When revisions to a Deliverable are identified by the State, the Contractor shall update and re-submit the Deliverable within five (5) Business Days of receipt of State notification.
8.4.1-13 (existing)	The Contractor shall mark any recurring Deliverable, which has not been changed since the last submission, with "No Changes Made". The Contractor shall make this entry within the Deliverable's document history section.

8.4.2 Formal Deliverable Format

As it relates to Deliverable format, any deviations to established standards must be approved by the OTSI Information Technology Office (ITO) and Information Security Office (ISO).

Hard copy Deliverables must be on standard format as agreed to with the State. Electronic versions must be stored in an approved State designated repository and remain the sole property of the State.

For the submission of Deliverables, the Contractor must adhere to the following requirements.

Table 8-6: Deliverable Format

Req #	SOW Requirement
8.4.2-01 (existing)	The Contractor shall ensure that all Deliverables must be developed in versions of software that are compatible with the current CalHEERS Project Office standard applications (Microsoft Office).
8.4.2-02 (existing)	The Contractor shall verify the software's compatibility with the State's Contract Manager prior to the creation or delivery of any electronic documentation.
8.4.2-03 (existing)	The Contractor shall ensure the delivery media shall be compatible with State storage devices.
8.4.2-04 (existing)	The Contractor shall ensure that each Formal Deliverable, includes but is not limited to the following: 1. Cover Page - document title, version number, date, and Contractor name 2. Table of Contents 3. Document History - that reflects each version, the date, document control number, revision reason/description and author 4. Documentation Location Listing 5. Introduction - that includes the document's purpose, suggested audience, and key terms 6. Summary - that describes the Deliverable's scope and summarizes the main points 7. Assumptions, constraints, and risks 8. Requirements

Req #	SOW Requirement
	a. Requirement Number/RTM number b. Requirement Description c. Contract Identifier (e.g., Section of RFP, SOW, Exhibit, Change Request (CR)) 9. Comments- if applicable 10. Listing of referenced document(s) 11. Page headers - that include the document title 12. Page footers - that include the page number, document version, and date 13. Acronyms and Abbreviations 14. Glossary 15. Appendices – if applicable

8.4.3 Quality Assurance Checklist

The following Quality Assurance (QA) checklist is intended to provide the Contractor with guidance in identifying and planning related to Deliverable quality.

For each Formal Deliverable, the Contractor must include the following requirements.

Table 8-7: Quality Assurance Checklist

Req #	SOW Requirement
8.4.3-01 (existing)	As a tracking and Deliverable management tool, the Contractor shall accurately provide and maintain the following information within a single file: 1. All Deliverable Expectation Documents (DEDs) and their associated due dates, submittal dates and approval dates. 2. All Deliverables, their due dates, submittal dates, approval dates, invoice dates and payment dates (as applicable).
8.4.3-02 (existing)	The Contractor shall ensure the QA Checklist Deliverable includes but is not limited to the following: 1. The Contractor's content reviewer or approved designee's signature and date signifying a review of the Deliverable's content. 2. The Contractor's format reviewer or approved designee's signature and date signifying a review of the Deliverable's format.
8.4.3-03 (existing)	The Contractor shall ensure the Quality Assurance (QA) Checklist Deliverable. The QA Checklist shall include, but not be limited to the following: 1. Deliverable name 2. Contractor Deliverable owner 3. Deliverable owner 4. Deliverable submission date 5. Include the following statement: "This Deliverable has been developed/updated to include content up to and including Release (n.n)." 6. Deliverable walkthrough date(s)
8.4.3-04 (existing)	The Contractor shall ensure the Quality Assurance Checklist Deliverable includes a QA Checklist Table (Y/N) that contains, but is not limited to the following: 1. Have the changes, edits and deletions that were identified and mutually agreed upon by Deliverable Owners in walkthrough(s) been applied to the Deliverable? (Y/N) 2. Does the Deliverable address all walkthrough discussion items? (If not, attach list of exceptions.) (Y/N) 3. Has the Contractor addressed all State comments in the Deliverable? (If not, attach list of exceptions.) (Y/N) 4. Does the Deliverable meet content requirements of the Contract and DED? (Y/N) 5. Does the Deliverable meet the format requirements and quality level? (Y/N)

Req #	SOW Requirement
	6. Does the Deliverable contain consistent and accurate: - Spelling? (Y/N) - Grammar, sentence structure, syntax? (Y/N) - Acronym definitions? (Y/N) - Formatting? (Y/N) - Cross references? (Y/N) 7. Has the Deliverable been properly included in the Configuration Management Tool?(Y/N) 8. Has the Deliverable and DED been properly linked to the Deliverable specification requirements in the SOW? (Y/N)

8.4.4 Deliverable Transmittal Letter

Table 8-8: Deliverable Transmittal Letter

Req #	SOW Requirement
8.4.4-01 (existing)	For each Deliverable submitted for acceptance/approval, the Contractor shall accurately include a formal transmittal letter from the Contractor Project Manager (or designee) to the State Project Director or designee. The transmittal letter must certify that the subject Deliverable meets all applicable Specifications, DEDs, and Contract requirements.
8.4.4-02 (existing)	The Contractor shall submit a Transmittal Letter that contains the following: - Deliverable name - Related SOW reference(s) - Deliverable due date - Actual completion date - Actual transmittal date - State comments due date - Include the following statement: "I certify this Deliverable has been prepared in accordance with the relevant terms and conditions of the Contract, and meets all Contract requirements." - Include the following statement: "<Contractor Name> has used the internal Deliverable review process as described in the Document Management Plan." - Include the following statement: "A walkthrough can be held during the CalHEERS review period upon request." - Signature of the Contractor representative who is authorized to sign legal documents on behalf of the company.

8.4.5 Media and Number of Copies

This specific Deliverable and all supporting documents are to be submitted to the following location:

Table 8-9: Media and Number of Copies

Req #	SOW Requirement
8.4.5-01 (existing)	The Contractor shall provide the transmittal letter in a format as agreed to with the State and submitted as directed by the State Project Director or designee.

8.5 FORMAL DELIVERABLE APPROVAL PROCESS

The CalHEERS Project Deliverables are categorized into two groups, "Formal" and "Informal" Deliverables. This is based upon the type of Deliverable and the review and acceptance process.

Formal Deliverables are required to meet all Deliverable requirements and go through a rigorous review and acceptance process.

Informal Deliverables (e.g., meeting agendas/minutes, ad hoc reports) are also required to meet all Deliverable requirements but go through a less rigorous review and acceptance process.

8.5.1 Formal Deliverable Review and Approval Process

Formal Deliverables must conform to the Deliverable submission requirements referenced in the requirements in the following table.

Refer to APPENDIX A-2, SPECIAL PROVISION, A-2.3, SERVICE LEVEL AGREEMENTS & LIQUIDATED DAMAGES.

Table 8-10: Formal Deliverable Review and Approval

Req #	SOW Requirement
8.5.1-01 (existing)	The Contractor shall accurately provide the State with Deliverables according to a work plan and applicable DEDs, the solicitation, the response, the Deliverables for which the State has previously granted acceptance, Contractor's knowledge, experience and expertise, and this Contract as the basis of subsequent Deliverables.
8.5.1-02 (existing)	The Contractor shall retain backup copies in writing and on electronic media of all Deliverables until 180 calendar days after termination or expiration of this Contract and shall provide the State on its request with a copy thereof until that time.
8.5.1-03 (existing)	The Contractor shall accurately submit an electronic Version of each Deliverable to the State Project Director, or designee, for acceptance. Once the State has approved a Deliverable, the Contractor must provide a read-only electronic copy.
8.5.1-04 (existing)	The Contractor shall submit each Deliverable no later than the delivery date established as per the Annual Deliverable Prioritization and the approved work plan.
8.5.1-05 (existing)	For the following specific formal Deliverables, the Contractor shall accurately conduct a formal walkthrough of the initial and final Deliverables with State Project staff, stakeholders, QA, Independent Verification & Validation (IV&V) and oversight consultants. 1. Project Work Plan 2. Master Plan 3. Technical System / Technical Architecture Design Document 4. Interface Control Document 5. Test Plan 6. Training Plan 7. Operations Manual
8.5.1-06 (existing)	In the event of a contradiction, conflict, ambiguity or inconsistency in or among Deliverables (including without limitation a Deliverable that has already received acceptance), any such contradiction, conflict, ambiguity or inconsistency shall be resolved in favor of the latest State-approved Deliverable except in the case where a previous documented requirement is inadvertently omitted or not addressed directly in a subsequent Deliverable.
8.5.1-07 (existing)	The Contractor shall not omit any requirement from the Specifications without the written consent of the State Project Director or designee.
8.5.1-08 (existing)	The State may have a minimum of five (5) Business Days for review of the Contractor's revised Deliverables. In addition, the State will submit a letter indicating acceptance of a revised Formal Deliverable when there are no outstanding comments or concerns.
8.5.1-09 (existing)	All Deliverables, and all updates to Deliverables (as agreed upon by the State and the Contractor), are subject to the State's Acceptance, including without limitation Deliverables provided pursuant to executed CRs.
8.5.1-10 (existing)	The State's review of Deliverables shall accurately be in accordance with the time frames set forth in a work plan.

Req #	SOW Requirement
8.5.1-11 (modified)	Notwithstanding the foregoing, or anything in this Contract to the contrary, the State's review, confirmation, and approval of design artifacts that are located in the central repository managed by the State, and those portions of Deliverables containing such design artifacts, shall accurately be subject to SOW 4.3.5, Detailed System Design Deliverable Design Merge Process.
8.5.1-12 (existing)	The State shall, with the Contractor's assistance and in accordance with any executed CR and other applicable Project documents, review or perform acceptance tests on the Deliverable, as applicable, to determine whether it conforms to its acceptance criteria.
8.5.1-13 (existing)	The State will provide Acceptance for a Deliverable or service if it does not have a Deficiency (except Cosmetic Deficiencies). However, if a Deficiency (other than a Cosmetic Deficiency) is found, the State will notify the Contractor in an email or other document of the Deficiencies used as the grounds for the State's decision not to give acceptance.
8.5.1-14 (existing)	If the Contractor is unable to correct a Deficiency(s) (except Cosmetic Deficiencies) within the number of days indicated in a work plan following the scheduled Acceptance, or if no such date is in a work plan, within 60 calendar days from such scheduled Acceptance, the State may, at its option: (a) continue reviewing or performing Acceptance Tests and require the Contractor to continue until Deficiencies (except for Cosmetic Deficiencies) are corrected or eliminated;(b) request the Contractor to provide, at its expense, a replacement Deliverable or Service for further review Acceptance Tests; or (c) after completion of the process set forth in the Contract, and providing Notice of default to the Contractor, terminate this Contract, in whole or in part as provided in APPENDIX A-2, SPECIAL PROVISIONS, Section 17.2, INABILITY TO CORRECT DEFICIENCIES DURING CURE PERIOD.
8.5.1-15 (new)	In coordination with the State, the Contractor shall adopt, maintain, and make recommendations to streamline the deliverable development, review, and approval process.
8.5.1-16 (new)	The Contractor shall update and submit for review and approval any off-cycle deliverable as requested by the State Deliverable Owner or Project Director or designee.

8.5.2 Revised Formal Deliverables

The revised Formal Deliverable process requirements are included in the Revised Formal Deliverables Table below.

Table 8-11: Revised Formal Deliverables

Req #	SOW Requirement
8.5.2-01 (existing)	If a Formal Deliverable is rejected, the Contractor shall correct the Deliverable and re-submit it to the State Project Director or designee within five (5) Business Days.
8.5.2-02 (existing)	If the modification requires longer than five (5) Business Days, or at the State's request, the Contractor shall provide a Corrective Action Plan (CAP) within five (5) Business Days of receiving the rejection letter.
8.5.2-03 (existing)	The Contractor shall submit a draft electronic copy of a revised Deliverable for State review and comment prior to formal submission of the revised Deliverable.
8.5.2-04 (existing)	For each revised Deliverable submitted to the State, the Contractor shall provide an electronic copy that shows the changes made to the Deliverable.
8.5.2-05 (existing)	For each revised Deliverable submitted to the State, the Contractor shall provide written responses to all State comments.
8.5.2-06 (existing)	The Contractor shall develop, submit, and gain State Project Director or designee approval of a CAP when a Deliverable is deemed deficient by the State, and it will take longer than five (5) Business Days to correct.

Req #	SOW Requirement
8.5.2-07 (existing)	The Contractor shall execute the CAP and facilitate a Deliverable review with the State once the Deliverable is corrected. (See SOW section 3.11.4, CORRECTIVE ACTION PLAN.)
8.5.2-08 (existing)	The Contractor shall conduct a walkthrough of any Deliverable upon request of the State Project Director or designee.
8.5.2-09 (existing)	The Contractor shall not change a Deliverable that has been accepted by the State without the written approval of the State Project Director or designee.
8.5.2-10 (existing)	The Contractor shall accurately correct deficiencies and re-submit a corrected Deliverable to or re-perform the Service for the State which will review or perform acceptance tests to verify whether the Deliverable or Service lacks deficiencies (except for cosmetic deficiencies) and in writing shall accurately either give its acceptance or reject it following such review or acceptance tests.
8.5.2-11 (existing)	The Contractor's times for correcting Deficiencies shall accurately be in accordance with the timeframes therefor set in a work plan and other Project documents.
8.5.2-12 (existing)	If time periods for correcting Deficiencies by the Contractor and reviewing and retesting corrected Deliverables or services by the State are not in a work plan or another Project document, each such time period for the Contractor to correct the deficiencies shall accurately be ten (10) Business Days.
8.5.2-13 (existing)	The Contractor shall accurately give notice to the State if the State has not given the Contractor Notice of rejection or acceptance in accordance with a work plan. If the State has not given notice within ten (10) Business Days following the receipt of notice from the Contractor, the State shall allow the Contractor to issue an invoice for one-half of the applicable payment that would have been due if the Deliverable had received acceptance, and the second half would be invoiced follow acceptance of such Deliverable.

8.5.3 Noncompliance to Deliverable Requirements

If the State rejects a Deliverable, it will notify the Contractor in writing. The State may withhold all payments associated with the rejected Deliverable until the Contractor corrects any outstanding deficiencies. The Contractor shall remediate the defective Deliverables pursuant to the State's direction and may only receive payment once the Deficiencies have been remediated to the State's satisfaction.

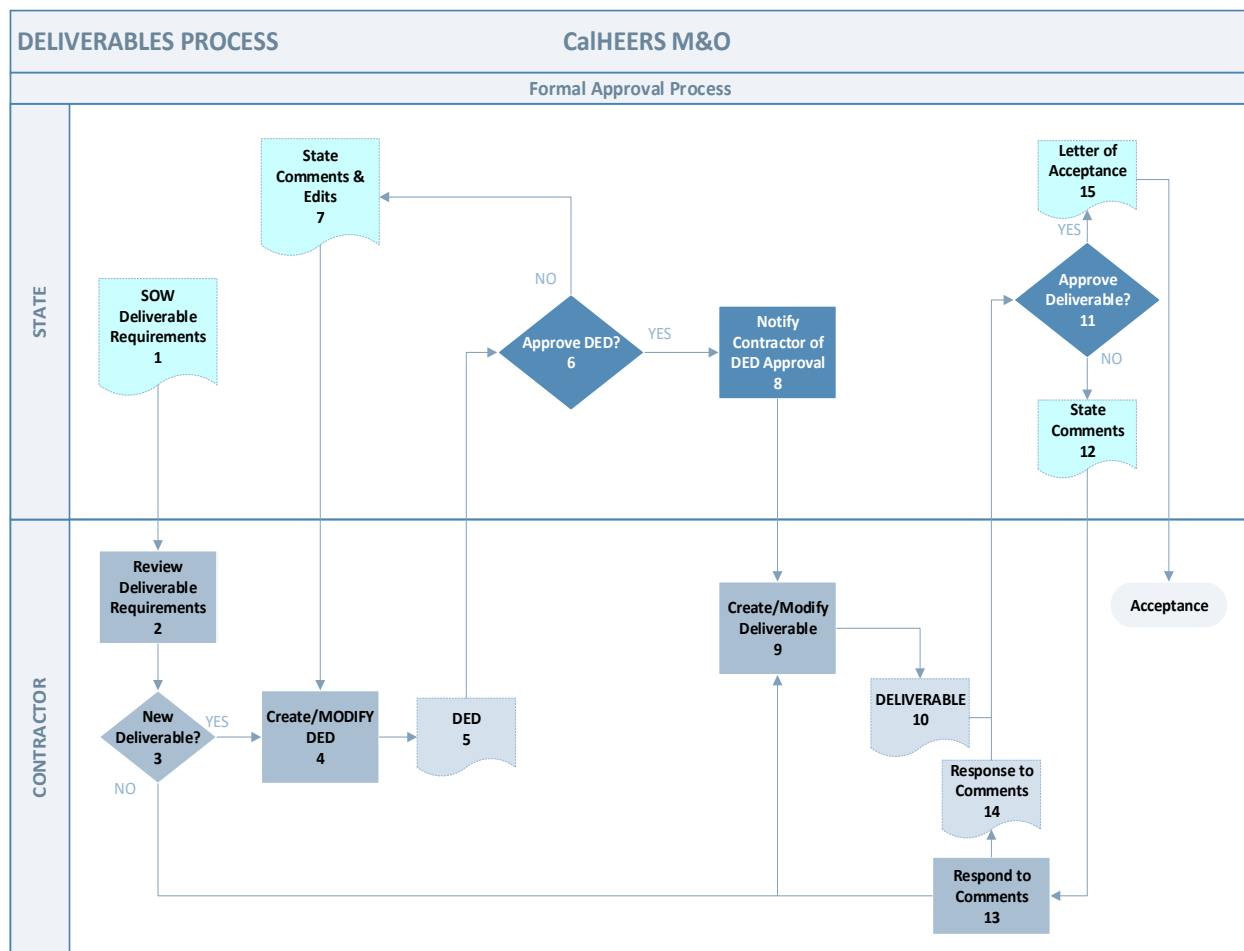
Table 8-12: Noncompliance to Deliverable Requirements

Req #	SOW Requirement
8.5.3-01 (existing)	If a Deliverable is rejected, the Contractor shall correct and resubmit the Deliverable within the agreed upon timeframes as defined in the approved work plan that will vary with the type, complexity, and volume of the Deliverable.

8.5.4 Formal Deliverable Approval

The figure below shows the process by which formal Deliverables are approved.

Figure 8-1: Formal Approval Process



8.6 INFORMAL DELIVERABLE APPROVAL PROCESS

8.6.1 Informal Deliverable Submission

The following requirements apply to the preparation and submission of an Informal Deliverable. For each Informal Deliverable, the Contractor must adhere to the following requirements.

Table 8-13: Informal Deliverable Submission

Req #	SOW Requirement
8.6.1-01 (new)	The Contractor shall submit the first iteration of all Informal Deliverables to include a TOC, include the content or a representative example of the informal deliverable submission, and Appendix 1, 2 and 3 for approval by the State Project Director or designee.
8.6.1-02 (existing)	The Contractor shall submit all Informal Deliverables to the State Project Director or designee based upon the Deliverable's requirements specifications.
8.6.1-03 (existing)	The Contractor shall include a cover page with the document title, version number, date, document control and the Contractor's name in all Informal Deliverables, unless otherwise requested or waived by the State.
8.6.1-04 (existing)	The Contractor shall include a table of contents in all Informal Deliverables, unless otherwise requested or waived by the State.

Req #	SOW Requirement
8.6.1-05 (existing)	The Contractor shall include an introduction section that describes the document's purpose, suggested audience, and key terms in all Informal Deliverables, unless otherwise referenced or waived by the State.

8.6.2 Informal Deliverable Format

All Informal Deliverables must be provided in a format compatible with the CalHEERS Project Office standard applications (Microsoft Office). Any deviations to these standards must be approved by the OTSI ITO and ISO.

Table 8-14: Informal Deliverable Approval Process

Req #	SOW Requirement
8.6.2-01 (modified)	The Contractor shall ensure that all hard copy production of Deliverables are produced in State desired format.
8.6.2-02 (existing)	The Contractor shall ensure that electronic versions are stored in a State designated/approved central repository and remain the sole property of the State.
8.6.2-03 (existing)	The Contractor shall ensure that the delivery media shall be compatible with the State storage devices.
8.6.2-04 (existing)	In all cases, the Contractor shall verify the software's compatibility with the State's Contract Manager prior to the creation of delivery of any electronic documentation.

8.6.3 Media and Number of Copies

For each Informal Deliverable, the media and number of copies will be decided per mutual agreement between the State and the Contractor.

8.6.4 Informal Deliverable Review

The steps for State review of Informal Deliverables includes the following:

- The State will complete its review of each Informal Deliverable submitted in accordance with SOW Sections 8.7 – 8.13 and the Transition-In & Transformation Work Plan for initial submittal, and the CalHEERS M&O Master Plan and the Document Management Plan for subsequent submittals.
- The State will have a maximum of seven (7) Business Days for review of the Contractor's Informal Deliverables.
- The State will reject an Informal Deliverable submission if the Deliverable does not contain all content specified in the Deliverable requirements and/or contains formatting errors and/or typographical errors. The State will notify the Contractor of the rejection.
- If the State does not reject an Informal Deliverable within seven (7) Business Days, the Contractor can consider the Deliverable accepted.
- The State, at its request, may perform a formal review with signed approval for an informal deliverable.

8.6.5 Revised Deliverable Submission

For Informal Deliverables, the revised Deliverable submission process will be decided on a case-by-case basis per mutual agreement between the State and the Contractor. This process will be completed on an as-needed basis.

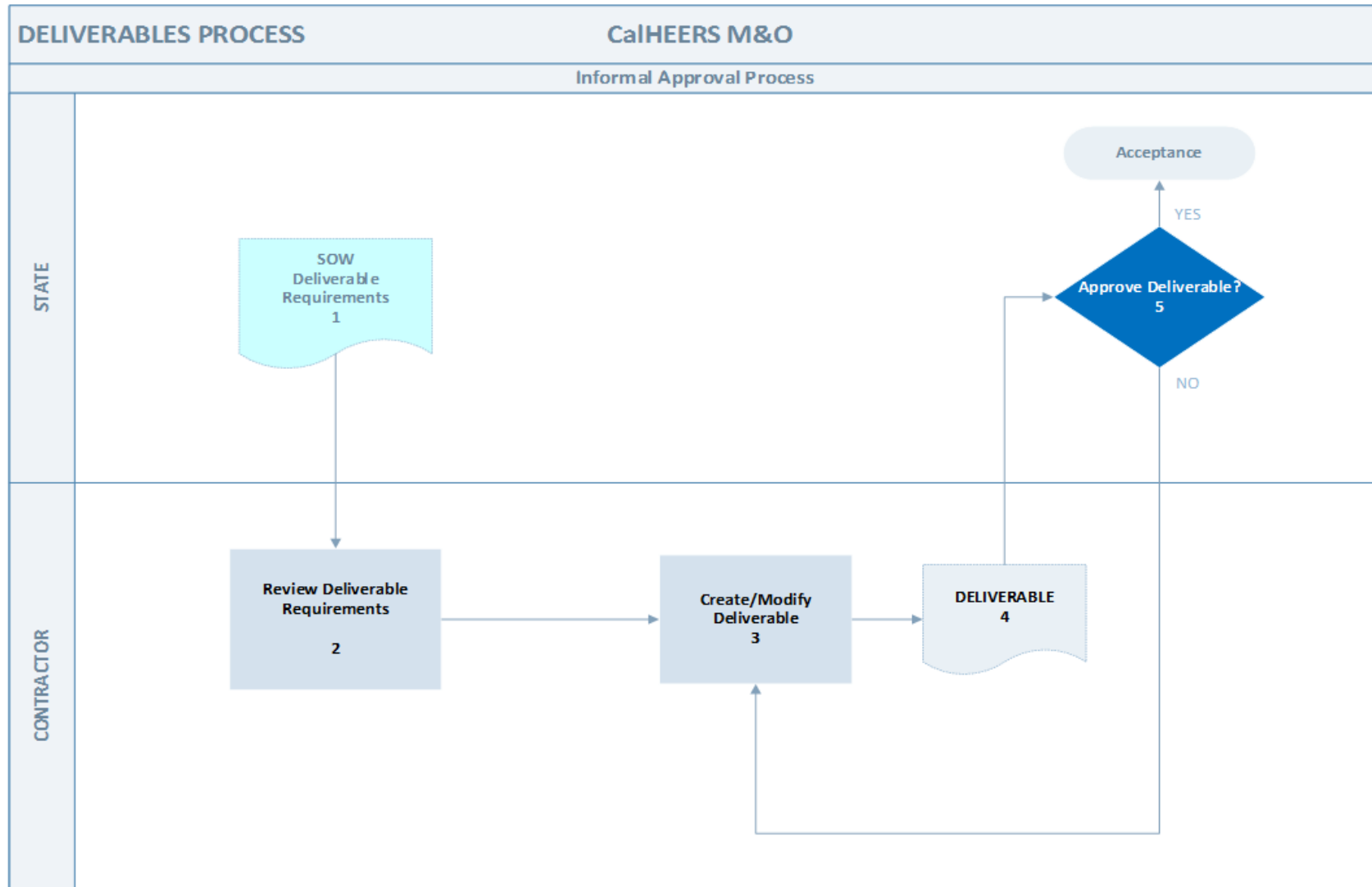
8.6.6 Noncompliance to Deliverable Submission Requirements

Informal Deliverables that are either not delivered per the Contract requirements or fall short on quality will be recorded by the State as noncompliant in the Issue Management tool for Contractor resolution.

8.6.7 Informal Deliverable Approval

For Informal Deliverables, the approval process will be decided on a case-by-case basis per mutual agreement between the State and the Contractor. This process will be completed on an as-needed basis.

Figure 8-2: Informal Approval Process



8.7 PROJECT MANAGEMENT DELIVERABLES

8.7.1 Project Management Deliverables

Table 8-15: Project Management Deliverables

Del #	Deliverables	Initial Submittal	DED Req'd?	Update Frequency	Approval Process	SOW Reference	SOW Req Ref
CD-3.1-1	Project Management Plan	Per approved TIP2 TIMP	No	Per State Approved Schedule	Formal	3.1.1 – Project Management	Table 3-1
CD-3.1-2	Contract Closeout Plan	Per approved TIP2 TIMP	No	Per State Approved Schedule	Formal	3.1.2 – Contract Closeout	Table 3-3

8.7.2 Schedule Management Deliverables

Table 8-16: Schedule Management Deliverables

Del #	Deliverables	Initial Submittal	DED Req'd?	Update Frequency	Approval Process	SOW Reference	SOW Req Ref
CD-3.2-1	Schedule Management Plan	Per approved TIP2 TIMP	No	Per State Approved Schedule	Formal	3.2.1 – Schedule Management Plan	Table 3-5

8.7.3 Cost/Cost Estimate Deliverables

Table 8-17: Cost/Cost Estimating Deliverables

Del #	Deliverables	Initial Submittal	DED Req'd?	Update Frequency	Approval Process	SOW Reference	SOW Req Ref
CD-3.3-1	Cost Management Plan	Per approved TIP2 TIMP	Yes	Per State Approved Schedule	Formal	3.3.1 – Cost Management Plan	Table 3-8
CD-3.3-2	Cost Tracking Tool / User Guide	Per approved TIP2 TIMP	Yes	Per State Approved Schedule	Formal	3.3.2 –Cost Tracking Tool & User Guide	Table 3-9

8.7.4 Human Resources Deliverables

Table 8-18: Human Resource Management Deliverables

Del #	Deliverables	Initial Submittal	DED Req'd?	Update Frequency	Approval Process	SOW Reference	SOW Req Ref
CD-3.4-1	Staffing Matrix	Per approved TIP2 TIMP	No	Per State Approved Schedule	Informal	3.4.1 – Staffing Matrix	Table 3-13
CD-3.4-2	Staffing Management Plan	Per approved TIP2 TIMP	No	Per State Approved Schedule	Informal	3.4.2 – Staffing Management Plan	Table 3-14

8.7.5 Risk and Issue Management Deliverables

Table 8-19: Risk, Issue, and Action Item Management Deliverables

Del #	Deliverables	Initial Submittal	DED Req'd?	Update Frequency	Approval Process	SOW Reference	SOW Req Ref
CD-3.5-1	Risk and Issue Management Plan	Per approved TIP2 TIMP	No	Per State Approved Schedule	Formal	3.5.1 – Risk and Issue Management	Table 3-18

8.7.6 Communication Management Deliverables

Table 8-20: Communication Management Deliverables

Del #	Deliverables	Initial Submittal	DED Req'd?	Update Frequency	Approval Process	SOW Reference	SOW Req Ref
CD-3.6-1	Communication Management Plan	Per approved TIP2 TIMP	No	Per State Approved Schedule	Formal	3.6.1 – Communication Management Plan	Table 3-22

8.7.7 Document Management Deliverables

Table 8-21: Document Management Deliverables

Del #	Deliverables	Initial Submittal	DED Req'd?	Update Frequency	Approval Process	SOW Reference	SOW Req Ref
CD-3.7-1	Document Management Plan	Per approved TIP2 TIMP	No	Per State Approved Schedule	Formal	3.7.1 – Document Management Plan	Table 3-27
CD-3.7-2	Project Artifact Inventory	Per approved TIP2 TIMP	Yes	Per State Approved Schedule	Informal	3.7.3 – Project Artifacts	Table 3-30
CD-3.7-3	Deliverable Hierarchy Diagram	Per approved TIP2 TIMP	Yes	Per State Approved Schedule	Formal	3.7.5.1 – Deliverable Hierarchy Diagram	Table 3-32

8.7.8 SOW Requirements Management Deliverables

Table 8-22: Contract Requirements Management Deliverables

Del #	Deliverables	Initial Submittal	DED Req'd?	Update Frequency	Approval Process	SOW Reference	SOW Req Ref
CD-3.8-1	SOW Requirements Management Plan	Per approved TIP2 TIMP	No	Per State Approved Schedule	Formal	3.8.1 – SOW Requirements Management Plan	Table 3-33

8.7.9 Quality Management Deliverables

Table 8-23: Quality Management Deliverables

Del #	Deliverables	Initial Submittal	DED Req'd?	Update Frequency	Approval Process	SOW Reference	SOW Req Ref
CD-3.10-1	Quality Management Plan	Per approved TIP2 TIMP	No	Per State Approved Schedule	Formal	3.10.1 – Quality Management Plan	Table 3-37
CD-3.10-2	Standards and Codes Tracker	Per approved TIP2 TIMP	Yes	Per State Approved Schedule	Formal	3.10.8 – Standards and Codes Tracker	Table 3-45

8.7.10 Contract Management Deliverables

Table 8-24: Contractor/Subcontractor Management Deliverables

Del #	Deliverables	Initial Submittal	DED Req'd?	Update Frequency	Approval Process	SOW Reference	SOW Req Ref
CD-3.11-1	Contract Management Plan	Per approved TIP2 TIMP	No	Per State Approved Schedule	Formal	3.11.1 – Contract Management Plan	Table 3-49
CD-3.11-2	Corrective Action Plan	Per approved TIP2 TIMP	No	Per State Approved Schedule	Formal	3.11.4 – Corrective Action Plan	Table 3-52

8.7.11 CalHEERS Project Enterprise Tools Deliverables

Table 8-25: CalHEERS Enterprise Tools Deliverables

Del #	Deliverables	Initial Submittal	DED Req'd?	Update Frequency	Approval Process	SOW Reference	SOW Req Ref
CD-3.12-1	Enterprise Tools	Per approved TIP2 TIMP	No	Per State Approved Schedule	Formal	3.12.1 –Enterprise Tools	Table 3-54

8.7.12 CalHEERS Project Processes Deliverables

Table 8-26: CalHEERS Project Processes Deliverables

Del #	Deliverables	Initial Submittal	DED Req'd?	Update Frequency	Approval Process	SOW Reference	SOW Req Ref
CD-3.13-1	CalHEERS Project Process Guide Plan	Per approved TIP2 TIMP	No	Per State Approved Schedule	Formal	3.13.1 – CalHEERS Project Process Guide Plan	Table 3-56

8.7.13 CalHEERS Project Training Deliverables

Table 8-27: CalHEERS Project Training Deliverables

Del #	Deliverables	Initial Submittal	DED Req'd?	Update Frequency	Approval Process	SOW Reference	SOW Req Ref
CD-3.14-1	CalHEERS Project Process Guide Training Plan	Per approved TIP2 TIMP	No	Per State Approved Schedule	Formal	3.14.1 - CalHEERS Project Process Guide Training Plan	Table 3-58
CD-3.14-2	CalHEERS Project Training Materials	Per approved TIP2 TIMP	No	Per State Approved Schedule	Formal	3.14.5 - CalHEERS Project Training Materials	Table 3-62

8.7.14 Strategic Planning and Management Deliverables

Table 8-28: Strategic Planning and Management Deliverables

Del #	Deliverables	Initial Submittal	DED Req'd?	Update Frequency	Approval Process	SOW Reference	SOW Req Ref
CD-3.15-1	CalHEERS Strategic Plan	Per approved TIP2 TIMP	No	Per State Approved Schedule	Formal	3.15.1 – CalHEERS Strategic Plan- ~~Plan~~	Table 3-64
CD-3.15-2	Strategic Roadmap	Per approved TIP2 TIMP	No	Per State Approved Schedule	Informal	3.15.2 – Strategic Roadmap	Table 3-65

8.7.15 Policy and Legislative Impact Analysis and Change Support Deliverables

Table 8-29: Policy and Legislative Impact Analysis and Change Support Deliverables

Del #	Deliverables	Initial Submittal	DED Req'd?	Update Frequency	Approval Process	SOW Reference	SOW Req Ref
CD-3.16-1	Policy and Legislative Impact Analysis and Change Support Plan	Per approved TIP2 TIMP	Yes	Per State Approved Schedule	Formal	3.16 – Policy and Legislative Analysis & Change Support Plan	Table 3-67

8.8 SYSTEM CHANGE & ENHANCEMENT DELIVERABLES

8.8.1 System/Software Development Life Cycle (SDLC) Deliverables

Table 8-30: Software Development Life Cycle (SDLC) Deliverables

Del #	Deliverables	Initial Submittal	DED Req'd?	Update Frequency	Approval Process	SOW Reference	SOW Req Ref
CD-4.1-1	System/Software Development Lifecycle (SDLC) Plan	Per approved TIP2 TIMP	No	Per State Approved Schedule	Formal	4.1.1 – SDLC Plan	Table 4-1
CD-4.1-2	System Technical Design Documents	Per approved TIP2 TIMP	No	Per State Approved Schedule	Formal	4.1.3 – System Technical Design Documents Deliverable	Table 4-3
CD-4.1-3	System Functional Design Documents	Per approved TIP2 TIMP	No	Per State Approved Schedule	Formal	4.1.5 – System Functional Design Documents Deliverable	Table 4-5

8.8.2 Change Management / Configuration Management (System) Deliverables

Table 8-31: Change Management / Configuration Management (System) Deliverables

Del #	Deliverables	Initial Submittal	DED Req'd?	Update Frequency	Approval Process	SOW Reference	SOW Req Ref
CD-4.2-1	Change Request Process	Per approved TIMP	No	Per State Approved Schedule	Formal	4.2.1 - Change Request Process	Table 4-7

Del #	Deliverables	Initial Submittal	DED Req'd?	Update Frequency	Approval Process	SOW Reference	SOW Req Ref
CD-4.2-2	CR Basis of Estimate (BOE) Deliverable	Per approved TIP2 TIMP	No	Per State Approved Schedule	Informal	4.2.3 – System Change ~~Cost~~ Estimating & Basis of Estimate (BOE)	Table 4-9
CD-4.2-3	Configuration Management Plan	Per approved TIP2 TIMP	No	Per State Approved Schedule	Formal	4.2.5 – Configuration Management Plan	Table 4-11
CD-4.2-4	Change Readiness Plan	Per approved TIP2 TIMP	No	Per State Approved Schedule	Informal	4.2.7 – Change Readiness Plan	Table 4-13
CD-4.2-5	Change Request Cost Summary	Per approved TIP2 TIMP	No	Each CR/Per the SW Release Work Plan	Formal	4.2.9 – Change Request Cost Summary	Table 4-15

8.8.3 Change/Refresh/Upgrades Deliverables

Table 8-32: Change/Refresh/Upgrades Deliverables

Del #	Deliverables	Initial Submittal	DED Req'd?	Update Frequency	Approval Process	SOW Reference	SOW Req Ref
CD-4.3-1	System Development Outline	Per approved TIP2 TIMP	No	Per State Approved Schedule	Formal	4.3.1 – System Development Outline	Table 4-17
CD-4.3-2	Architectural Design Document	Per approved TIP2 TIMP	No	Per State Approved Schedule	Formal	4.3.3 – Architectural Design Document	Table 4-19
CD-4.3-3	Detailed System Design Deliverable	Per approved TIP2 TIMP	No	Per State Approved Schedule	Formal	4.3.5 – Detailed System Design Deliverable	Table 4-21
CD-4.3-4	Commercial Off the Shelf Software Design Description	Per approved TIP2 TIMP	No	Per State Approved Schedule	Formal	4.3.7 – Commercial Off the Shelf Software Design Description	Table 4-23
CD-4.3-5	Logical Data Model	Per approved TIP2 TIMP	No	Per State Approved Schedule	Formal	4.3.9 – Logical Data Model	Table 4-25

8.8.4 Code Development Deliverables

Table 8-33: Code Development Deliverables

Del #	Deliverables	Initial Submittal	DED Req'd?	Update Frequency	Approval Process	SOW Reference	SOW Req Ref
CD-4.4-1	Software Engineering Standards	Per approved TIP2 TIMP	No	Per State Approved Schedule	Formal	4.4.1 – Software Engineering Standards	Table 4-26

8.8.5 System Requirements Management Deliverables

Table 8-34: Requirements Management (System) Deliverables

Del #	Deliverables	Initial Submittal	DED Req'd?	Update Frequency	Approval Process	SOW Reference	SOW Req Ref
CD-4.5-1	System Requirements Management Plan	Per approved TIP2 TIMP	No	Per State Approved Schedule	Formal	4.5.1 – System Requirements Management Plan	Table 4-28

8.8.6 Release Management Deliverables

Table 8-35: Release Management Deliverables

Del #	Deliverables	Initial Submittal	DED Req'd?	Update Frequency	Approval Process	SOW Reference	SOW Req Ref
CD-4.6-1	Release Management Plan	Per approved TIP2 TIMP	No	Per State Approved Schedule	Formal	4.6.1 – Release Management Plan	Table 4-32
CD-4.6-2	Business Product Deliverable	Per approved TIP2 TIMP	No	Per State Approved Schedule	Formal	4.6.5 – Business Product Deliverable	Table 4-36

8.8.7 Organizational Change Management Deliverables

Table 8-36: Business and Organizational Change Management Deliverables

Del #	Deliverables	Initial Submittal	DED Req'd?	Update Frequency	Approval Process	SOW Reference	SOW Req Ref
CD-4.7-1	Organizational and Business Change Management Plan	Per approved TIP2 TIMP	No	Per State Approved Schedule	Formal	4.7.1 – Organizational and Business Change Management Plan	Table 4-39

Del #	Deliverables	Initial Submittal	DED Req'd?	Update Frequency	Approval Process	SOW Reference	SOW Req Ref
CD-4.7-2	Organizational Change Management Tracking Tool	Per approved TIP2 TIMP	No	Per State Approved Schedule	Formal	4.7.3 – Organizational Change Management Tracking Tool	Table 4-41

8.8.8 Testing Deliverables

Table 8-37: Testing Deliverables

Del #	Deliverables	Initial Submittal	DED Req'd?	Update Frequency	Approval Process	SOW Reference	SOW Req Ref
CD-4.8-1	Test and Evaluation Master Plan	Per approved TIP2 TIMP	No	Per State Approved Schedule	Formal	4.8.1 – Test and Evaluation Master Plan	Table 4-42
CD-4.8-2	Release Test Plan	Per approved TIP2 TIMP	No	Per State Approved Schedule	Formal	4.8.5 – Release Test Plan	Table 4-46
CD-4.8-3	Performance Test Materials Packet	Per approved TIP2 TIMP	No	Per State Approved Schedule	Informal	4.8.10 – Performance Test Materials Packet	Table 4-51
CD-4.8-4	Performance Test Results Packet	Per approved TIP2 TIMP	No	Per State Approved Schedule	Informal	4.8.11 – Performance Test Results Packet	Table 4-52

8.8.9 Defect Management Deliverables

Table 8-38: Defect Management Deliverables

Del #	Deliverables	Initial Submittal	DED Req'd?	Update Frequency	Approval Process	SOW Reference	SOW Req Ref
CD-4.9-1	Defect Management Plan	Per approved TIP2 TIMP	No	Per State Approved Schedule	Formal	4.9.1 – Defect Management Plan	Table 4-55

8.9 PROGRAM SUPPORT DELIVERABLES

8.9.1 Program Support Services Deliverables

Table 8-39: Program Support Services Deliverables

Del #	Deliverables	Initial Submittal	DED Req'd?	Update Frequency	Approval Process	SOW Reference	SOW Req Ref
CD-5.1-1	Program Support Plan	Per approved TIP2 TIMP	Yes	Per State Approved Schedule	Formal	5.1.1 – Program Support	Table 5-1

8.10 OPERATIONS DELIVERABLES

8.10.1 Operations Planning and Management Deliverables

Table 8-40: Operations Planning and Management Deliverables

Del #	Deliverables	Initial Submittal	DED Req'd?	Update Frequency	Approval Process	SOW Reference	SOW Req Ref
CD-6.1-1	Operations Plan	Per approved TIP2 TIMP	No	Per State Approved Schedule	Formal	6.1.1 – Operations Plan	Table 6-1

8.10.2 Operations Manual

Table 8-41: Operations Manual Deliverables

Del #	Deliverables	Initial Submittal	DED Req'd?	Update Frequency	Approval Process	SOW Reference	SOW Req Ref
CD-6.2-1	Operations Manual	Per approved TIP2 TIMP	No	Per State Approved Schedule	Formal	6.2.1 – Operations Manual Requirements	Table 6-3
CD-6.2-2	Technical Change Management Plan	Per approved TIP2 TIMP	No	Per State Approved Schedule	Formal	6.2.3.1 – Technical Change Management Plan	Table 6-5
CD-6.2-3	Network Management Plan	Per approved TIP2 TIMP	No	Per State Approved Schedule	Formal	6.2.3.3 – Network Management Plan	Table 6-7
CD-6.2-4	Capacity Management Plan	Per approved TIP2 TIMP	No	Per State Approved Schedule	Formal	6.2.3.5 – Capacity Management Plan	Table 6-9

8.10.3 Operations Reporting Deliverables

Table 8-42: Operations Reporting Deliverables

Del #	Deliverables	Initial Submittal	DED Req'd?	Update Frequency	Approval Process	SOW Reference	SOW Req Ref
CD-6.3-1	Daily Production Status Report	Per approved TIP2 TIMP	No	Per State Approved Schedule	Formal	6.3.1 – Daily Production Status Report	Table 6-11
CD-6.3-2	Operations Reporting Dashboard	Per approved TIP2 TIMP	No	Per State Approved Schedule	Formal	6.3.3 – Operations Reporting Dashboard	Table 6-13

8.10.4 Interface Support Deliverables

Table 8-43: Interface Support Deliverables

Del #	Deliverables	Initial Submittal	DED Req'd?	Update Frequency	Approval Process	SOW Reference	SOW Req Ref
CD-6.5-1	Interface Control Document	Per approved TIP2 TIMP	No	Per State Approved Schedule	Formal	6.5.1 – Interface Control Document	Table 6-19

8.10.5 Technology Refresh Assessment Deliverables

Table 8-44: Technology Refresh Assessment Report

Del #	Deliverables	Initial Submittal	DED Req'd?	Update Frequency	Approval Process	SOW Reference	SOW Req Ref
CD-6.6-1	Technology Refresh Management Process	Per approved TIP2 TIMP	Yes	Per State Approved Schedule	Formal	6.6.1 – Technology Refresh Management Process	Table 6-21
CD-6.6-2	Technology Refresh Assessment Report	Per approved TIP2 TIMP	Yes	Per State Approved Schedule	Formal	6.6.2 – Technology Refresh Assessment & Findings Report	Table 6-22
CD-6.6-3	Technology Refresh Implementation Plan	Per approved TIP2 TIMP	Yes	Per State Approved Schedule	Formal	6.6.3 – Technology Refresh Planning/Technology Refresh Implementation Plan	Table 6-23

8.10.6 System Security Deliverables

Table 8-45: System Security Plan

Del #	Deliverables	Initial Submittal	DED Req'd?	Update Frequency	Approval Process	SOW Reference	SOW Req Ref
CD-6.7-1	System Security Plan	Per approved TIP2 TIMP	No	Per State Approved Schedule	Formal	6.7.1 – System Security Plan	Table 6-25
CD-6.7-2	Safeguard Security Report	Per approved TIP2 TIMP	Yes	Per State Approved Schedule	Formal	6.7.3 – Safeguard Security Report	Table 6-31

8.10.7 Data Retention, Backup and Recovery Deliverables

Table 8-46: Backup and Recovery Deliverables

Del #	Deliverables	Initial Submittal	DED Req'd?	Update Frequency	Approval Process	SOW Reference	SOW Req Ref
CD-6.8-1	Data Retention, Backup and Recovery Plan	Per approved TIP2 TIMP	No	Per State Approved Schedule	Formal	6.8.1 – Data Retention, Backup and Recovery Plan	Table 6-33

8.10.8 Data Integrity Plan

Table 8-47: Backup and Recovery Deliverables

Del #	Deliverables	Initial Submittal	DED Req'd?	Update Frequency	Approval Process	SOW Reference	SOW Req Ref
CD-6.9-1	Data Integrity Plan (Data Management Plan)	Per approved TIP2 TIMP	No	Per State Approved Schedule	Formal	6.9.1 – Data Integrity Plan	Table 6-35

8.10.9 Technology Recovery Deliverables

Table 8-48: Technology Recovery Deliverables

Del #	Deliverables	Initial Submittal	DED Req'd?	Update Frequency	Approval Process	SOW Reference	SOW Req Ref
CD-6.10-1	Technology Recovery Plan	Per approved TIP2 TIMP	No	Per State Approved Schedule	Formal	6.10.1 – Technology Recovery Plan	Table 6-37

8.10.10 Business Continuity Deliverables

Table 8-49: Business Continuity Deliverables

Del #	Deliverables	Initial Submittal	DED Req'd?	Update Frequency	Approval Process	SOW Reference	SOW Req Ref
CD-6.11-1	Business Continuity Plan	Per approved TIP2 TIMP	No	Per State Approved Schedule	Formal	6.11.1 – Business Continuity Plan	Table 6-40

8.10.11 System Performance Deliverables

Table 8-50: System Performance Deliverables

Del #	Deliverables	Initial Submittal	DED Req'd?	Update Frequency	Approval Process	SOW Reference	SOW Req Ref
CD-6.13-1	System Performance Plan	Per approved TIP2 TIMP	No	Per State Approved Schedule	Formal	6.13.1 – System Performance Plan	Table 6-43

8.10.12 System Hardware/Software Deliverables

Table 8-51: System Hardware/Software Deliverables

Del #	Deliverables	Initial Submittal	DED Req'd?	Update Frequency	Approval Process	SOW Reference	SOW Req Ref
CD-6.14-1	Hardware and Software Inventory Management Plan	Per approved TIP2 TIMP	No	Per State Approved Schedule	Formal	6.14.1 – Hardware and Software Inventory Management	Table 6-45

8.10.13 Problem Management Deliverables

Table 8-52: Problem Management Deliverables

Del #	Deliverables	Initial Submittal	DED Req'd?	Update Frequency	Approval Process	SOW Reference	SOW Req Ref
CD-6.15-1	Problem Management Plan	Per approved TIP2 TIMP	No	Per State Approved Schedule	Formal	6.15.1 – Problem Management Plan	Table 6-48

8.10.14 Help Desk Services Deliverables

Table 8-53: Help Desk Services Deliverables

Del #	Deliverables	Initial Submittal	DED Req'd?	Update Frequency	Approval Process	SOW Reference	SOW Req Ref
CD-6.16-1	Help Desk Ticket Resolution Process	Per approved TIP2 TIMP	No	Per State Approved Schedule	Formal	6.16 – Help Desk Services	Table 6-50

8.10.15 Hosting Services

Table 8-54: Hosting Services

Del #	Deliverables	Initial Submittal	DED Req'd?	Update Frequency	Approval Process	SOW Reference	SOW Req Ref
CD-6.17-1	Hosting Services Plan	Per approved TIP2 TIMP	No	Per State Approved Schedule	Formal	6.17.1 – Hosting Services Plan	Table 6-51

8.10.16 Project Support Services Deliverables

Table 8-55: Project Worksite Maintenance Plan

Del #	Deliverables	Initial Submittal	DED Req'd?	Update Frequency	Approval Process	SOW Reference	SOW Req Ref
CD-6.18-1	Project Worksite Maintenance Plan	Per approved TIP2 TIMP	No	Per State Approved Schedule	Formal	6.18.1 – Project Worksite Maintenance Plan	Table 6-53

8.10.17 Service Center Management Services Deliverables

Table 8-56: Service Center Management Plan

Del #	Deliverables	Initial Submittal	DED Req'd?	Update Frequency	Approval Process	SOW Reference	SOW Req Ref
CD-6.19-1	Service Center Management Plan	Per approved TIP2 TIMP	Yes	Per State Approved Schedule	Formal	6.19.1 – Service Center Management Plan	Table 6-59

8.10.18 Website Management Deliverables

Table 8-57: Web Content Management Plan

Del #	Deliverables	Initial Submittal	DED Req'd?	Update Frequency	Approval Process	SOW Reference	SOW Req Ref
CD 6.20-1	Web Content Management Plan	Per approved TIP2 TIMP	Yes	Annual	Formal	6.20.1 – Web Content Management Plan	Table 6-61

8.11 TRANSITION-IN PHASE 1 (TIP1) DELIVERABLES

8.11.1 Transition-In Planning

Table 8-58: Transition-In & Transformation Master Work Plan Deliverables

Del #	Deliverables	Initial Submittal	DED Req'd?	Update Frequency	Approval Process	SOW Reference	SOW Req Ref
CD-7.1-1	Transition-In Master Plan (TIMP)	Per approved TIP1 TIMP	Yes	One (1) Submission only	Formal	7.1.1 – Transition-In Master Plan	Table 7-1

8.11.2 Transition-In Meetings, Agendas, and Minutes

Table 8-59: Transition-In Meetings, Agenda and Minutes Deliverables

Del #	Deliverables	Initial Submittal	DED Req'd?	Update Frequency	Approval Process	SOW Reference	SOW Req Ref
CD-7.1-2	Transition Meetings, Agendas, and Minutes	Per approved TIP1 TIMP	Yes	Per State Approved Schedule	Informal	7.1.3 – TIP1 Meetings, Agendas, and Minutes	Table 7-3
CD-7.1-3	Transition Work Plan Meetings	Per approved TIP1 TIMP	Yes	Per State Approved Schedule	Formal	7.1.3.1 – TIP1 Transition Work Plan Meetings	Table 7-4
CD-7.1-4	Transition Manager Meeting Reports	Per approved TIP1 TIMP	Yes	Per State Approved Schedule	Formal	7.1.3.2 – TIP1 Transition Manager Meetings	Table 7-5
CD-7.1-5	Executive Meetings	Per approved TIP1 TIMP	Yes	Per State Approved Schedule	Formal	7.1.3.3 – TIP1 ~~Transition-In~~ Executive Meetings	Table 7-6

8.11.3 Transition-In Work Plan (Schedule)

Table 8-60: Transition-In Work Plan (Schedule) Deliverables

Del #	Deliverables	Initial Submittal	DED Req'd?	Update Frequency	Approval Process	SOW Reference	SOW Req Ref
CD-7.1-6	Transition-In Work Plan (Schedule)	Per approved TIP1 TIMP	Yes	Per State Approved Schedule	Formal	7.1.7 – TIP1 Work Plan (Schedule)	Table 7-10

8.11.4 Transition Components Worksheet

Table 8-61: Transition-In Components Worksheet Deliverables

Del #	Deliverables	Initial Submittal	DED Req'd?	Update Frequency	Approval Process	SOW Reference	SOW Req Ref
CD-7.1-7	Transition Components Worksheet	Per approved TIP1 TIMP	Yes	Per State Approved Schedule	Formal	7.1.8 – TIP1 Transition Components Worksheet	Table 7-11

8.11.5 Transition-In Service and Function Migration

Table 8-62: Transition-In Service and Function Migration Deliverables

Del #	Deliverables	Initial Submittal	DED Req'd?	Update Frequency	Approval Process	SOW Reference	SOW Req Ref
CD-7.1-8	Service and Function Migration Plan	Per approved TIP1 TIMP	Yes	Per State Approved Schedule	Informal	7.1.9.1 – TIP1 Service and Function Migration Work Plan	Table 7-12
CD-7.1-9	Project Management Service and Migration Plan	Per approved TIP1 TIMP	Yes	One (1) Submission only	Formal	7.1.9.2 – TIP1 Project Management Service and Function Migration Plan	Table 7-13
CD-7.1-10	System Change & Enhancements Service and Function Migration Plan	Per approved TIP1 TIMP	Yes	One (1) Submission only	Formal	7.1.9.3 – TIP1 System Change & Enhancements Service and Function Migration Plan	Table 7-14
CD-7.1-11	Program Service and Function Migration Plan	Per approved TIP1 TIMP	Yes	One (1) Submission only	Formal	7.1.9.4 – TIP1 Program Service and Function Migration Plan	Table 7-15

Del #	Deliverables	Initial Submittal	DED Req'd?	Update Frequency	Approval Process	SOW Reference	SOW Req Ref
CD-7.1-12	Operations Service and Function Migration Plan	Per approved TIP1 TIMP	Yes	One (1) Submission only	Formal	7.1.9.5 – TIP1 Operations Service and Function Migration Plan	Table 7-16

8.11.6 Transition-In Training and Knowledge Transfer

Table 8-63: Transition-In Service and Function Migration Deliverables

Del #	Deliverables	Initial Submittal	DED Req'd?	Update Frequency	Approval Process	SOW Reference	SOW Req Ref
CD-7.1-13	Transition-In Training and Knowledge Transfer Plan	Per approved TIP1 TIMP	Yes	Per State Approved Schedule	Formal	7.1.10 – TIP1 Training and Knowledge Transfer	Table 7-17

8.11.7 Transition-In Readiness

Table 8-64: Transition-In Readiness Deliverables

Del #	Deliverables	Initial Submittal	DED Req'd?	Update Frequency	Approval Process	SOW Reference	SOW Req Ref
CD-7.1-14	Transition Readiness Reviews	Per approved TIP1 TIMP	Yes	Per State Approved Schedule	Formal	7.1.11 – TIP1 Readiness Reviews	Table 7-18

8.11.8 Project Management Transition-In Test and Validation

Table 8-65: PM Transition-In Test and Validation Deliverables

Del #	Deliverables	Initial Submittal	DED Req'd?	Update Frequency	Approval Process	SOW Reference	SOW Req Ref
CD-7.1-15	Project Management Transition Test and Validation Plan	Per approved TIP1 TIMP	Yes	Per State Approved Schedule	Formal	7.1.12.1 – TIP1 Project Management Test and Validation	Table 7-19

8.11.9 System Change & Enhancements Transition-In Test and Validation

Table 8-66: System Change & Enhancements Transition-In Test and Validation Deliverables

Del #	Deliverables	Initial Submittal	DED Req'd?	Update Frequency	Approval Process	SOW Reference	SOW Req Ref
CD-7.1-16	System Change & Enhancements Transition Test and Validation Plan	Per approved TIP1 TIMP	Yes	Per State Approved Schedule	Formal	7.1.12.2 – TIP1 System Change & Enhancements Test and Validation	Table 7-20

8.11.10 Program Support Transition-In Test & Validation

Table 8-67: Program Support Transition-In Test & Validation Deliverables

Del #	Deliverables	Initial Submittal	DED Req'd?	Update Frequency	Approval Process	SOW Reference	SOW Req Ref
CD-7.1-17	Program Support Transition Test and Validation Plan	Per approved TIP1 TIMP	Yes	Per State Approved Schedule	Formal	7.1.12.3 – TIP1 Program Support Test and Validation	Table 7-21

8.11.11 Operations Transition-In Test & Validation

Table 8-68: Operations Transition-In Test & Validation Deliverables

Del #	Deliverables	Initial Submittal	DED Req'd?	Update Frequency	Approval Process	SOW Reference	SOW Req Ref
CD-7.1-18	Operations Transition Test and Validation Plan	Per approved TIP1 TIMP	Yes	Per State Approved Schedule	Formal	7.1.12.4 – TIP1 Operations Test and Validation	Table 7-22

8.12 TRANSITION-IN PHASE 2 (TIP2) DELIVERABLES

Table 8-69: Transition-In Plan Deliverables

Del #	Deliverables	Initial Submittal	DED Req'd?	Update Frequency	Approval Process	SOW Reference	SOW Req Ref
CD-7.2-1	TIP2 TIMP Updates	Per approved TIP1 TIMP	Yes	One Submission only	Formal	7.2.1 – TIP2 TIMP Updates	Table 7-23

Del #	Deliverables	Initial Submittal	DED Req'd?	Update Frequency	Approval Process	SOW Reference	SOW Req Ref
CD-7.2-2	TIP2 Transformation Meetings, Agendas, and Minutes	Per approved TIP2 TIMP	Yes	Per State Approved Schedule	Formal	SOW 7.2.2 – TIP2 Meetings, Agendas, and Minutes	Table 7-24
CD-7.2-3	TIP2 Project Work Plan Updates	Per approved TIP2 TIMP	Yes	Per State Approved Schedule	Formal	SOW 7.2.4 – TIP2 Project Work Plan Updates	Table 7-26

8.13 TRANSITION-OUT DELIVERABLES

8.13.1 Transition-Out Plan (TOP)

Table 8-70: Transition-Out Plan Deliverables

Del #	Deliverables	Initial Submittal	DED Req'd?	Update Frequency	Approval Process	SOW Reference	SOW Req Ref
CD-7.3-1	Transition-Out Plan Draft – Final Year Minus 8 Months	1 year, 8 months prior to end of Contract	Yes	One Submission only	Formal	7.3.1.1 – TOP Draft – Final Year Minus 8 Months	Table 7-33
CD-7.3-2	Transition-Out Plan – Final Year Update	Per approved Transition-Out Work Plan	Yes	One Submission only	Formal	7.3.1.2 – TOP – Final Year Update	Table 7-34

8.13.2 Transition-Out Walkthrough Tours

Table 8-71: Transition-Out Walkthrough Tour Deliverables

Del #	Deliverables	Initial Submittal	DED Req'd?	Update Frequency	Approval Process	SOW Reference	SOW Req Ref
CD-7.3-3	Transition-Out Walkthrough Tours	Per approved Transition-Out Work Plan	Yes	One Submission only	Formal	7.3.2 – Transition-Out Walkthrough Tours	Table 7-35

8.13.3 Transition-Out Work Plan (Schedule)

Table 8-72: Transition-Out Work Plan (Schedule)

Del #	Deliverables	Initial Submittal	DED Req'd?	Update Frequency	Approval Process	SOW Reference	SOW Req Ref
CD-7.3-4	Transition-Out Work Plan (Schedule)	With the initial submittal of the TOP	Yes	Per Schedule	Formal	7.3.3 – Transition-Out Work Plan (Schedule)	Table 7-36

8.13.4 Transition-Out Meeting Agendas/Minutes and Status Reports

Table 8-73: Transition-Out Meetings, Agendas, and Minutes

Del #	Deliverables	Initial Submittal	DED Req'd?	Update Frequency	Approval Process	SOW Reference	SOW Req Ref
CD-7.3-5	Transition-Out Meetings Agendas/Minutes and Status Reports	Per approved Transition-Out Work Plan	Yes	Per Schedule	Formal	7.3.4 - Transition-Out Meeting Agendas/Minutes and Status Reports	Table 7-37

8.13.5 Transition-Out Training and Training Materials

Table 8-74: Transition-Out Training and Training Materials

Del #	Deliverables	Initial Submittal	DED Req'd?	Update Frequency	Approval Process	SOW Reference	SOW Req Ref
CD-7.3-6	Transition-Out Training and Training Materials	Per approved Transition-Out Work Plan	Yes	Per Schedule	Formal	7.3.5 - Transition-Out Training and Training Materials	Table 7-38

APPENDIX A-4 - SOW EXHIBIT A SYSTEM REQUIREMENTS SPECIFICATION

Category	Sub Category	Req ID	Requirement
Accessibility			
Accessibility	Assister Management		
Accessibility	Assister Management	47235	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall allow a Family PACT provider site certifier to create an account for Family PACT.
Accessibility	Assister Management	47241	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall allow a provider site certifier to review, edit, and submit account information.
Accessibility	Assister Management	47242	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall allow a Family PACT provider site certifier to log in for Family PACT.
Accessibility	Assister Management	47243	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall display a Legal Notice to Family PACT provider site certifiers at each successful login attempt.
Accessibility	Assister Management	47244	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall display pending, active, and inactive Family PACT provider staff accounts on the Family PACT provider site certifier dashboard.
Accessibility	Assister Management	47245	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall allow a pending status for Family PACT staff account creation for after the provider site certifier submits the staff user information and before the staff user completes the account creation process.
Accessibility	Assister Management	47246	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall allow a Family PACT provider site certifier to add a Family PACT provider staff account for the provider site certifier's provider site location.
Accessibility	Assister Management	47250	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall allow a Family PACT provider site certifier to manage a pending Family PACT provider staff account that is associated with the provider site certifier's provider site location.
Accessibility	Assister Management	47251	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall allow a Family PACT provider site certifier to edit the following fields of a pending Family PACT provider staff account: 1. First Name 2. Middle Name (Optional) 3. Last Name 4. Email
Accessibility	Assister Management	47252	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall allow a Family PACT provider site certifier to resend the email invitation for the pending provider staff account.
Accessibility	Assister Management	47253	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall generate a new access code that is valid for 24 hours for the pending Family PACT provider staff when the provider site certifier resends the email invitation or sends an email invitation to a pending staff account that was edited.
Accessibility	Assister Management	47254	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall email the new access code to the Family PACT provider staff user's email address that was inputted by the provider site certifier.
Accessibility	Assister Management	47255	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall allow a Family PACT provider site certifier to revoke the email invitation for a pending Family PACT provider staff account.
Accessibility	Assister Management	47256	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall allow a Family PACT provider site certifier to disable a Family PACT provider staff account that is associated with the provider site certifier's provider site location.
Accessibility	Assister Management	47262	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall allow a provider staff to review, edit, and submit account information.
Accessibility	Assister Management	47263	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall allow a Family PACT provider site staff to log in for Family PACT.
Accessibility	Assister Management	47264	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall display a Legal Notice to Family PACT provider staff at each successful login attempt.
Accessibility	Assister Management	47280	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall disable the Family PACT provider site certifier and all provider staff accounts when a provider site location has been deactivated from the Family PACT program.
Accessibility	Assister Management	47487	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall allow a Family PACT super admin to disable an active Family PACT provider site certifier account that is associated with the provider site certifier's provider site location.
Accessibility	Assister Registration		
Accessibility	Assister Registration	47236	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall generate a access code that is valid for 24 hours for the Family PACT provider site certifier at each Family PACT provider site location that will be used to validate a Family PACT provider site certifier when they create a provider site certifier account on the Family PACT Portal.
Accessibility	Assister Registration	47237	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall email the access code to the Family PACT provider site certifier's email address that was inputted by the Family PACT admin user.
Accessibility	Assister Registration	47238	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall allow a provider site certifier to confirm their site access using the following elements: 1. Access Code 2. Location National Provider Identifier (NPI)
Accessibility	Assister Registration	47239	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall allow provider site certifier to create an account by entering the following information: 1. First Name 2. Middle Name (Optional) 3. Last Name 4. Email 5. Professional License Number 6. Date of Birth (Date of Birth) 7. Username 8. Password

Category	Sub Category	Req ID	Requirement
Accessibility	Assister Registration	47240	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall allow a provider site certifier to have the following fields pre-populated during account creation: 1. First Name 2. Middle Name (Optional) 3. Last Name 4. Email
Accessibility	Assister Registration	47247	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall allow a Family PACT provider site certifier to add Family PACT provider staff accounts for that provider site certifier's provider site location by inputting the following information: 1. First Name 2. Middle Name (Optional) 3. Last Name 4. Email
Accessibility	Assister Registration	47248	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall generate an access code for the Family PACT provider staff that was added by the provider site certifier that will be used by the provider staff to create an account.
Accessibility	Assister Registration	47249	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall email the access code to the Family PACT provider staff user's email address that was inputted by the provider site certifier.
Accessibility	Assister Registration	47257	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall allow a Family PACT provider staff to create an account for Family PACT.
Accessibility	Assister Registration	47258	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall generate an access code for the Family PACT provider staff at each Family PACT provider site location that will be used to validate a Family PACT provider staff when they create a provider site staff account on the Family PACT Portal.
Accessibility	Assister Registration	47259	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall email the access code to the Family PACT provider staff's email address that was inputted by the Family PACT provider site certifier.
Accessibility	Assister Registration	47260	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall allow a provider staff to confirm their site access using the following elements: 1. Access Code 2. Location National Provider Identifier (NPI)
Accessibility	Assister Registration	47261	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall allow a Family PACT provider staff to complete the account creation process using the following information: 1. First Name 2. Middle Name (Optional) 3. Last Name 4. Email 5. Professional License Number (Optional) 6. Date of Birth (DOB) 7. Username 8. Password
Accessibility	Consumer Management		
Accessibility	Consumer Management	47154	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall allow a client to create a Family PACT account to apply for the Family PACT program.
Accessibility	Consumer Management	47155	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall display a message to a Family PACT client to reach out for in case the client does not have an email or phone to register in the California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) system.
Accessibility	Consumer Management	47156	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall allow a client to use Family PACT login credentials to login so as to apply for the Family PACT program.
Accessibility	Consumer Management	47157	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall require a client to use different Family PACT login credentials than the login credentials used for the California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) SSApp
Accessibility	Consumer Management	47158	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall provide Log Out button for the user to log out of the California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) Family PACT portal.
Accessibility	Consumer Management	47159	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall allow a Family PACT client to complete the pre-application screener to determine potential eligibility.
Accessibility	Consumer Management	47160	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall allow a Family PACT client to skip the pre-application screener if the client has an existing Family PACT application or California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) Family PACT account.
Accessibility	Consumer Management	47161	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall allow a Family PACT client that is determined to be potentially eligible to be directed to account creation and apply for the Family PACT program.
Accessibility	Consumer Management	47224	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall require SSApp clients to create a new account to apply for the Family PACT program.
Accessibility	General Requirement		
Accessibility	General Requirement	45152	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System must provide Covered CA with the ability to change content in both the Header and Footer information. Covered CA must be able to control the look, feel and content of the header / footer displayed on all application pages.
Accessibility	General Requirement	45467	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall provide web-based Exchange access that complies with the following recognized usability standards (Reference: Affordable Care Act §155.210): A) American Disabilities Act (ADA) B) Older Americans Act, C) Rehabilitation Act D) California Accessibility

Appendix A-4 - SOW Exhibit A - System Requirements Specification
(Extracted from CalHEERS RTM)

Category	Sub Category	Req ID	Requirement
Accessibility	General Requirement	45487	The Vendor shall report its compliance with Section 508 of the Federal Rehabilitation Act and the World Wide Web Consortium (W3C) Web Accessibility Initiative, Section 508, (a)(1)(A)
Accessibility	General Requirement	45488	The Vendor shall report compliance with California policy regarding accessibility per Cal Gov Code 11135: Accessibility requirements of Section 508 of the Rehabilitation Act of 1973, as amended (29 U.S.C. Sec 794d), and regulations implementing that act as set forth in Part 1194 of Title 36 of the Federal Code of Regulations.
Accessibility	General Requirement	45489	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall allow customers to submit applications and appropriate documentation electronically with an electronic signature that complies with State, federal and agency requirements and standards.
Accessibility	General Requirement	45496	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall be developed and remain in compliance with Section 508 of the Federal Rehabilitation Act and the World Wide Web Consortium (W3C) Web Accessibility Initiative, Section 508, (a)(1)(A)
Accessibility	General Requirement	45497	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall be fully accessible from smart mobile devices
Accessibility	General Requirement	45498	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall be developed and remain in compliance with California policy regarding accessibility per Cal Gov Code 11135: Accessibility requirements of Section 508 of the Rehabilitation Act of 1973, as amended (29 U.S.C. Sec 794d), and regulations implementing that act as set forth in Part 1194 of Title 36 of the Federal Code of Regulations.
Accessibility	General Requirement	45502	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) system must increase the contrast ratio between the foreground text and background text in the Left Menu Navigation.
Accessibility	General Requirement	45503	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) system must increase the contrast ratio between the foreground text and background text in the Top Menu Navigation.
Accessibility	General Requirement	45504	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) system must increase the contrast ratio between the foreground text and background text for disabled buttons.
Accessibility	General Requirement	45505	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) system must increase the contrast ratio between the foreground text and background text and the size of the required field asterisk.
Accessibility	General Requirement	45506	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) system must use a text equivalent in additional to graphic images to communicate the progress of the application in the top menu navigation.
Accessibility	General Requirement	49070	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall clear the email and/or phone of the deactivated provider site certifier account.
Accessibility	General Requirement	49071	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall allow the cleared email and/or phone of the deactivated provider site certifier account to be used in a future account creation.
Accessibility	General Requirement	49072	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall not allow the username and password of a deactivated provider site certifier account to be used in a future account creation.
Accessibility	General Requirement	49090	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall clear the email and/or phone of the deactivated provider site certifier and staff accounts.
Accessibility	General Requirement	49091	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall allow the cleared email and/or phone of the deactivated provider site certifier and staff accounts to be used in a future account creation.
Accessibility	General Requirement	49092	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall not allow the username and password of a deactivated provider site certifier and staff accounts to be used in a future account creation.
Accessibility	General Requirement	49094	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall allow the provider account creation access code to be valid for 24 hours when a Family PACT super admin generates the access code for a Family PACT provider site certifier and when a Family PACT provider site certifier generates the access code for a Family PACT provider staff.
Accessibility	General Requirement	49095	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall restrict the use of the access code for pending Family PACT provider site certifier and provider staff accounts in the following ways: 1. The access code was generated more than 24 hours ago 2. The email invitation for account creation was resent 3. The email invitation for account creation was revoked
Accessibility	General Requirement	49096	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall clear the email and/or phone of the deactivated provider staff account.
Accessibility	General Requirement	49097	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall allow the cleared email and/or phone of the deactivated provider staff account to be used in a future account creation.
Accessibility	General Requirement	49098	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall not allow the username and password of a deactivated provider staff account to be used in a future account creation.
Accessibility	Notices		
Accessibility	Notices	43317	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall display to the Consumers the SAWS generated MAGI notices of action in Consumer’s secure mailbox in California Healthcare Eligibility, Enrollment and Retention System (CalHEERS)
Accessibility	Notices	43318	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall display to the Service Center staff and County Eligibility Workers the SAWS MAGI notices of action in Documents and Correspondence page
Admin Portal	Alerts and Notices		
Admin Portal	Alerts and Notices	46478	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall update the language that appears in the Case Status paragraph within the Case Status Admin Screen
Admin Portal	Alerts and Notices	46480	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall provide the functionality to turn on and off the FTR Codes. This functionality should be configurable by benefit year.
Admin Portal	Alerts and Notices	48102	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall provide the functionality to turn on and off the FTR Codes by benefit year. This functionality should be configurable by benefit year and when configuration is enabled for the same benefit year for which the application is being submitted, FTR codes will be considered during eligibility determination.

Appendix A-4 - SOW Exhibit A - System Requirements Specification
(Extracted from CalHEERS RTM)

Category	Sub Category	Req ID	Requirement
Admin Portal	Alerts and Notices	48103	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall make updates to the FTR configuration page to add code 011 - "Non-Tax Filer, and/or did not reconcile for two consecutive tax years".
Admin Portal	Assister Management		
Admin Portal	Assister Management	47459	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall allow Family PACT Admins to log in for Family PACT.
Admin Portal	Assister Management	47460	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall display a Legal Notice to Family PACT admins at each successful login attempt.
Admin Portal	Assister Management	47461	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall display the super admin dashboard when a Family PACT super admin logs in for Family PACT.
Admin Portal	Assister Management	47462	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall display the User Accounts Administration (UAA) screen when a Family PACT SCR admin logs in for Family PACT.
Admin Portal	Assister Management	47463	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall display the client management search screen when a Family PACT read-only admin logs in for Family PACT.
Admin Portal	Assister Management	47464	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall allow a Family PACT super admin to perform user account administration including the ability to create, activate, and disable, unlock user accounts.
Admin Portal	Assister Management	47465	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall allow a Family PACT super admin to search for all Family PACT user accounts using the following fields in UAA search: 1. User Type 2. First Name 3. Last Name 4. Username 5. Email 6. Phone Number
Admin Portal	Assister Management	47467	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall allow a Family PACT SCR admin to perform basic user account administration for Family PACT client, provider site certifier, and provider staff users.
Admin Portal	Assister Management	47468	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall allow a Family PACT SCR admin to search for all Family PACT client, provider site certifier, and provider staff user accounts using the following fields in UAA search: 1. User Type 2. First Name 3. Last Name 4. Username 5. Email 6. Phone Number
Admin Portal	Assister Management	47470	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall display pending, active, and inactive Family PACT provider site certifier accounts on the Family PACT super admin dashboard.
Admin Portal	Assister Management	47471	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall allow a pending status for Family PACT site certifier account creation for after the super admin submits the site certifier user information and before the site certifier user completes the account creation process.
Admin Portal	Assister Management	47472	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall allow a Family PACT super admin to add Family PACT provider site certifier accounts from the super admin dashboard.
Admin Portal	Assister Management	47475	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall email the access code to the Family PACT provider site certifier user's email address that was inputted by the super admin.
Admin Portal	Assister Management	47476	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall allow a Family PACT super admin to manage a pending Family PACT provider site certifier account that is associated with the provider site location.
Admin Portal	Assister Management	47477	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall allow a Family PACT super admin to edit the following fields of a pending Family PACT provider site certifier account: 1. First Name 2. Middle Name (Optional) 3. Last Name 4. Email
Admin Portal	Assister Management	47478	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall allow a Family PACT super admin to resend the email invitation for the pending provider site certifier account.
Admin Portal	Assister Management	47479	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall generate a new access code for the pending Family PACT provider site certifier when the super admin resends the email invitation or sends an email invitation to a pending site certifier account that was edited.
Admin Portal	Assister Management	47480	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall email the new access code to the Family PACT provider site certifier user's email address that was inputted by the super admin.
Admin Portal	Assister Management	47481	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall allow a Family PACT super admin to revoke the email invitation for a pending Family PACT provider site certifier.
Admin Portal	Assister Management	47482	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall allow a Family PACT super admin to change a pending provider site certifier and to change an active provider site certifier.
Admin Portal	Assister Management	47483	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall disable the active Family PACT provider site certifier or revoke the email invitation for a pending provider site certifier and add a new provider site certifier for the respective provider site location when a Family PACT super admin submits a change a site certifier action.

Category	Sub Category	Req ID	Requirement
Admin Portal	Assister Management	47484	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall allow a Family PACT super admin to add a new pending provider site certifier or an active provider site certifier by inputting the following information when changing a provider site certifier: 1. First Name 2. Middle Name (Optional) 3. Last Name 4. Email
Admin Portal	Assister Management	47486	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall email the access code to the Family PACT provider site certifier user's email address that was inputted by the super admin.
Admin Portal	Assister Registration		
Admin Portal	Assister Registration	47473	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall allow a Family PACT super admin to add a Family PACT provider site certifier account for that provider site location by inputting the following information: 1. First Name 2. Middle Name (Optional) 3. Last Name 4. Email
Admin Portal	Case Management		
Admin Portal	Case Management	47495	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall allow a Family PACT super admins to manage the Family PACT client's case on behalf of a client.
Admin Portal	Case Management	47496	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall allow a Family PACT super admin or read-only admin to enter HAP card number for existing Family PACT consumers known to HAP.
Admin Portal	Case Management	47497	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall prompt a Family PACT super admin to ask the consumer client during initial application, "Have you ever had Family PACT services in the past?"
Admin Portal	Case Management	47498	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall allow a Family PACT super admin to view/edit a Family PACT client's client details
Admin Portal	Case Management	47500	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall allow a Family PACT super admin to view a Family PACT application history and transaction history.
Admin Portal	Case Management	47501	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall allow a Family PACT super admin to change a Family PACT client's date of birth (DOB) after initial Family PACT application submission.
Admin Portal	Case Management	47502	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall allow a Family PACT read-only admin to view a Family PACT client's client details.
Admin Portal	Case Management	47503	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall allow a Family PACT read-only admin to view a Family PACT client's case notes.
Admin Portal	Case Management	47504	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall allow a Family PACT read-only admin to view a Family PACT client's application history and transaction history.
Admin Portal	Case Management	48628	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall display adequate details in the search results table for all members of a household to allow for admin to adequately identify other members of the household
Admin Portal	Case Management	48629	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall display the DOB for all members displayed for a case in the search results table
Admin Portal	Case Management	48630	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall display the last 4 of the SSN for all members displayed for a case in the search results table
Admin Portal	Case Management	48631	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall not display the Pseudo ID field for all members of the household in the search results table
Admin Portal	Case Management	48632	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall add a [Preferred Contact] field in the search results table.
Admin Portal	Case Management	48633	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall navigate to the case specific Flex landing page on click of Flexible app in the dropdown on the search results page
Admin Portal	Consumer Management		
Admin Portal	Consumer Management	47488	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall have the ability for a Family PACT super admin and a Family PACT read-only admin to search for a Family PACT client.
Admin Portal	Consumer Management	47489	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall have the ability for a Family PACT super admin and a Family PACT read-only admin to search for a Family PACT client by using the following information that returns a full, exact match: 1. HAP ID 2. Date of Birth (DOB)
Admin Portal	Consumer Management	47490	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall have the ability for a Family PACT super admin and a Family PACT read-only admin to search for a Family PACT client by using the following information that returns a full, exact match: 1. First Name 2. Last Name 3. Date of Birth (DOB) 4. Sex 5. Zip Code
Admin Portal	Consumer Management	47491	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall have the ability for a Family PACT super admin or Family PACT read-only admin to search for a Family PACT client using the following information that returns a full, exact match: 1. Application Number
Admin Portal	Consumer Management	47492	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall only show search results to the Family PACT super admin or Family PACT read-only admin if the inputted search criteria returns a single result that fully matches the fields used for the search.

Category	Sub Category	Req ID	Requirement
Admin Portal	Consumer Management	47493	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall display the following fields when a search result is displayed to a Family PACT super admin or Family PACT read-only admin: 1. Client Name 2. HAP ID 3. Coverage Status 4. Application Status 5. Date of Birth (DOB) 6. Eligibility Effective Dates
Admin Portal	Consumer Management	48934	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall allow California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) Help Desk Staff to manually lift a Carry Forward Status for an individual from the California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) portal.
Admin Portal	Enrollment		
Admin Portal	Enrollment	48736	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall provide an informational message to privileged user when they are reinstating a policy and there were changes for the enrollee details in the HBX system.
Admin Portal	Enrollment	48738	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall include a navigation link back to enrollment dashboard from the health and dental plan shopping page.
Admin Portal	Enrollment	48741	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall update "Premium Start Date" to "Premium Effective Date" in the enrollment dashboard and enrollment details pages and display this date consistently on both Health and Dental pages.
Admin Portal	General Requirement		
Admin Portal	General Requirement	46634	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall select the checkbox for "Send 834" and make this the default setting in the Enrollment override page.
Admin Portal	General Requirement	47494	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall keep a record of client management search transactions performed by a Family PACT super admins and Family PACT read-only admins.
Admin Portal	General Requirement	47505	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall allow Family PACT admins to view a Family PACT client's eligibility related information.
Admin Portal	General Requirement	47507	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall display a client's Family PACT eligibility results history to the Family PACT admin including the eligibility status, aid code, eligibility factors, and eligibility effective dates in the California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) Portal.
Admin Portal	General Requirement	47509	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall allow a Family PACT super admin to send messages to a Family PACT client's message center informing the client of the notices generated in the Family PACT portal.
Admin Portal	General Requirement	47510	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall provide a link for Family PACT super admins or Family PACT read-only admins to navigate to search for Family PACT providers on the familypact.org website in a new tab on behalf on Family PACT clients.
Admin Portal	General Requirement	48737	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall provide an informational message to privileged user when they are reinstating a policy and there were changes for the subscriber address in the HBX system.
Admin Portal	General Requirement	48966	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall display the following Negative Actions added via Disposition on the Negative Action Configuration page with no ability to modify the configuration: - Gets Duplicate Aid - Out of the Home - Duplicate/Hidden Person - Other
Admin Portal	General Requirement	48967	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall display the following Negative Actions added via Disposition on the Manual Verification page with no ability to remove the Negative Action: - Gets Duplicate Aid - Out of the Home - Duplicate/Hidden Person - Other
Admin Portal	General Requirement	49073	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall allow a Family PACT super admin and read-only admin to view a Family PACT client's change log.
Admin Portal	Issuer Profile Management		
Admin Portal	Issuer Profile Management	47454	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall allow a Family PACT super admin to add other Family PACT super admin, Family PACT service center representative (SCR) admin, and Family PACT read-only admin accounts.
Admin Portal	Issuer Profile Management	47455	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall provision an initial set of Family PACT super admin accounts for California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) staff and DHCS/OFP staff based on a list provided by California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) and DHCS/OFP. by following the existing California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) Service Now (SNOW) ticket process.

Category	Sub Category	Req ID	Requirement
Admin Portal	Issuer Profile Management	47456	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall allow a Family PACT super admin to add a new Family PACT super admin, SCR admin, or read-only admin by inputting the following information: 1. First Name 2. Middle Name (Optional) 3. Last Name 4. Email 5. Date of Birth (DOB) 6. User Type
Admin Portal		47457	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall generate the username and a temporary password for the newly added Family PACT admin user
Admin Portal		47458	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall send an email notification with the username and a temporary password to the newly added Family PACT admin user
Application Maintenance			
Application Maintenance	Application Submission and Update		
Application Maintenance	Application Submission and Update	38269	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall add a business rule to unlock the DOB field on the Household Primary Contact page and the Household Members page if the SSN verification cache is cleared.
Application Maintenance	Application Submission and Update	43292	"The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall require all users to manually complete a Consumer's Date of Birth field in MM/DD/YYYY format on the following pages: - Account Creation (User Information) - Primary Contact - Household Member - Flexible Application Entry"
Application Maintenance	Application Submission and Update	45471	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall notify the consumer notify the consumer throughout the application process regarding Data saves, mandatory fields, and expiration of incomplete applications.
Application Maintenance	Case Management		
Application Maintenance	Case Management	43109	The "Note to Employers and Employees" statement on the Household Member page must be removed from the Individual portal as this is in reference to SHOP.
Application Maintenance	Eligibility Determination		
Application Maintenance	Eligibility Determination	40897	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall capture the Punjabi and Hindi languages as a selection for spoken and written language preferences on Authorized Representative Information screen and Contact Preferences screen on California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) Portal, as well as FlexiApp.
Application Maintenance	Eligibility Determination	41132	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall include language in the CoveredCA portal to advise the applicant of the length of the postpartum coverage.
Application Maintenance	Eligibility Determination	46420	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall display Schema Validation issue for the response code HE007000 when received from CMS for IFSV, ESI and Non-ESI Service at the Individual Level on the Personal Verification Page in the Error Code(s) column.
Application Maintenance	General Requirement		
Application Maintenance	General Requirement	38235	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall add functionality to allow designated users to close and reopen cases. Reopening a case does not restore eligibility or enrollments to previous state.
Application Maintenance	General Requirement	38236	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall add functionality to ensure that an HX40 transaction is not generated when eligibility ends as a result of closing a case that is indicated as a duplicate.
Application Maintenance	General Requirement	38237	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall add messaging and a preventative measure for consumers accessing a closed case from their login accounts.
Application Maintenance	General Requirement	38238	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall add functionality to allow admin roles to access closed case summary information.
Application Maintenance	General Requirement	38239	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall add functionality to allow admin roles to close or reopen a case.
Application Maintenance	General Requirement	39123	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall display a flashy message on Consumer Portal's home page around tax season that states where consumers should go in order to view/download 1095 tax forms.
Application Maintenance	General Requirement	39124	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) system shall display the message only if there is at least one 1095 available for the previous benefit year in the secure inbox.
Application Maintenance	General Requirement	39125	The message shall stop displaying on or around April 16th of each year.

Appendix A-4 - SOW Exhibit A - System Requirements Specification
(Extracted from CalHEERS RTM)

Category	Sub Category	Req ID	Requirement
Application Maintenance	General Requirement	40445	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall split the California Franchise Tax Board henceforth FTB data received monthly into California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) customers and California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) non-customers. California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall host the customers data on the HBX database, and the entire FTB data file is retained on-premise FTB database
Application Maintenance	General Requirement	40448	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall modify existing logic in CALEXT_PR_FETCH_540_INCOME stored procedure code to first lookup data locally in HBX database, and if a record is not found, then CALEXT_PR_FETCH_540_INCOME stored procedure code will retrieve the record using database link on FTB database hosted on Exadata on-premise hardware. California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall then insert this record in HBX database locally as it is a California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) customer
Application Maintenance	General Requirement	40449	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall modify existing FTB-1000-IB-01.sh shell script or build a new process to split California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) customers after monthly FTB data is loaded in on-premise FTB database
Application Maintenance	General Requirement	40450	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall modify the connection string in FTB_540_properties file to point to new FTB on-premise database created to hold all FTB data
Application Maintenance	General Requirement	40451	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall modify existing FTB-1000-IB-01.sh shell script or build a new process to TRUNCATE and INSERT California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) customers data into HBX table
Application Maintenance	General Requirement	42147	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall remove the Back to Application Menu link when consumers are in the Review Application flow (view-only navigation).
Application Maintenance	General Requirement	42148	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall exclude inactive cases from the Renewal batch process.
Application Maintenance	General Requirement	44034	The vendor shall establish and operate Inventory and Asset Management software and associated processes.
Application Maintenance	General Requirement	44035	The vendor shall include include in DEL 7 - Equipment and Software Acquisition Plan Equipment & Software acquisition Plan and Deliverable 33 O&M Manual the state's inventory and asset management requirements.
Application Maintenance	General Requirement	44036	The vendor shall implement an Asset Management Software (AMS) platform that enables the discovery and managegement of software assets across the California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) platform.
Application Maintenance	General Requirement	44037	The vendor shall implement an Asset Management Software (AMS) platform that provides desktop to datacenter software asset management functionality, including surveys of software installations and usage.
Application Maintenance	General Requirement	44038	The vendor shall implement an Asset Management Software (AMS) platform that provides purchased versus installed license reconciliation.
Application Maintenance	General Requirement	44039	The vendor shall implement an Asset Management Software (AMS) platform that enables the vendor to identify and evaluate areas of compliance concern and take required actions when warranted.
Application Maintenance	General Requirement	44040	The vendor shall implement an Asset Management Software (AMS) platform that will track and manage hardware assets consistent with Contractor's Alternative CalHEERS technology Infrastructure proposal in Exh. F.
Application Maintenance	General Requirement	44041	The vendor shall implement an Asset Management Software (AMS) platform that integrates with the ITSM service management platform's Configuration Management Database (CMDB) application.
Application Maintenance	General Requirement	44042	The vendor shall provide required staffing for implementation and operation of the AMS.
Application Maintenance	General Requirement	44043	The vendor shall provide required staffing for inventory control and management –related interaction with theExcahnge, IV&V contractors and the inventory and audit personnel.
Application Maintenance	General Requirement	44044	The vendor shall provide a datafile from the Asset Management Software (AMS) to the Excahnge and IV&V as requested.
Application Maintenance	General Requirement	44045	The vendor shall provide required staffing for ongoing asset inventory functions based in the D&I Sacramento facility.
Application Maintenance	General Requirement	44046	The vendor shall determine, document and detail the inventory control and asset management requirements, including tagging, surveys, reporting and other operational aspects will be included in DEL 7 - Equipment and Software Acquisition Plan Equipment & Software Acquisition Plan and Deliverable 33 O&M Manual.
Application Maintenance	General Requirement	44047	The vendor shall implement an Asset Management Software (AMS) platform that provides reporting functionality in support of functions including oversight and audit.
Application Maintenance	General Requirement	44048	The vendor shall provide all details of ongoing inventory and asset management activities in Deliverable 33 O&M Manual and associated work products.
Application Maintenance	General Requirement	44049	The vendor shall manage the procurement, licensing, configuration, implementation and maintenance of the assets for the duration of the contract.
Application Maintenance	General Requirement	44050	The vendor shall provide inventory and asset management services from procurement through disposal of the asset based on federal and state requirements.
Application Maintenance	General Requirement	44051	The vendor shall develop the processes required to conduct inventory and asset management.
Application Maintenance	General Requirement	44052	The vendor shall configure the AMS platform to support the defined processes
Application Maintenance	General Requirement	44053	The vendor shall define and create specified documentation and reports for software inventory management and software license compliance.

Category	Sub Category	Req ID	Requirement
Application Maintenance	General Requirement	44054	The vendor shall load asset management data management data including maintenance, warranty and contract data into the AMS platform.
Application Maintenance	General Requirement	44055	The vendor shall verify received equipment against orders and affix asset control tags per specifications
Application Maintenance	General Requirement	44056	The vendor shall track installation, moves, adds and changes of hardware and update the AMS data on an ongoing basis
Application Maintenance	General Requirement	44057	The vendor shall provide periodic reporting, detailing updates to the hardware and software asset base.
Application Maintenance	General Requirement	44058	The vendor shall answer questions and reconcile discrepancies identified as a result of review of reports.
Application Maintenance	General Requirement	44059	The vendor inventory and asset management staff shall interact with the Exchange staff or designees
Application Maintenance	General Requirement	44060	The vendor shall detail Accenture and Exchange Roles & Responsibilities in Deliverable 33 Operations and Maintenance Manual
Application Maintenance	General Requirement	44061	The vendor shall include specific inventory audit information and audit related process requirements in Deliverable 33 Operations and Maintenance Manual
Application Maintenance	General Requirement	44062	The vendor shall support annual inventory audits by providing reports detailing the current status and location of state assets, coordinating site visits to the data center and project facilities.
Application Maintenance	General Requirement	44063	The vendor shall provide access for the Excahnge or designated auditors to inspect assets in accordance with security protocols and procedures; providing assistance with the identification of assets; providingresources to resolve discrepancies or issues generated by audit activity.
Application Maintenance	General Requirement	44064	The vendor shall track procurement activities against the proposed bill of materials
Application Maintenance	General Requirement	44065	The vendor shall define in scope and out of scope assets to be tracked and managed.
Application Maintenance	General Requirement	44066	The vendor shall define lost/stolen asset process.
Application Maintenance	General Requirement	44067	The vendor shall define how peripherals inventory is maintained.
Application Maintenance	General Requirement	44068	The vendor shall define equipment and software purchases and ongoing maintenance and support, including software license agreements, and financial information required for asset and inventory management, and audit purposes.
Application Maintenance	General Requirement	44069	The vendor shall provide information on where Flexera will reside • Environment(s) • Interfaces • Accessibility • Usability • Reliability • Backup and recovery
Application Maintenance	General Requirement	44070	The vendor shall provide information on Flexera Security • Overall security of the tool • Administrative Overview
Application Maintenance	General Requirement	44071	The vendor shall provide Flexera Reporting • Reports to be provided • Exportability • Time frame for compliance reporting • Ability for Ad hoc reports
Application Maintenance	General Requirement	44072	The vendor shall detail Accenture and Exchange Roles & Responsibilities in DEL 7 - Equipment and Software Acquisition Plan Equipment & Software Acquisition Plan.
Application Maintenance	General Requirement	44073	The vendor shall include specific inventory audit information and audit related process requirements in DEL 7 - Equipment and Software Acquisition Plan Equipment & Software Acquisition Plan.
Application Maintenance	General Requirement	44075	The vendor shall update Del 33 O&M Manual to reflect inventory and asset management activities as appropriate.
Application Maintenance	General Requirement	44076	The vendor shall provide a work plan (i.e., schedule) in Del 33 O&M Manual to reflect inventory and asset management tasks as appropriate.

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(Extracted from CalHEERS RTM)

Category	Sub Category	Req ID	Requirement
Application Maintenance	General Requirement	46024	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall migrate the functionalities mentioned below from the Akamai CDN to AWS Cloufront CDN. 1 - WAF (Web Application Firewall) Services 2 - Waiting Room 3 - Content Delivery 4 - DDOS (Denial of Services)
Application Maintenance	Verify Application Information		
Application Maintenance	Verify Application Information	46451	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall update the English and Spanish Translations for the below Error Response code on the California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) Portal and Flexi App Screen: RIDP - HE000050-RF2, HE200026, HE200027, HX005001, HE007000, HE007004, HE007005. FARS - HS000000-RF2, HE007004, HE007005
Application Maintenance	Verify Application Information	46452	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall deprecate the following Error Response Code mock rules and their interpretation on the California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) Portal and Flexi App Screen as CMS has deprecated the error codes at their end. RIDP - HE200024, HE200025, HE200028, HE200029, HE200030, HE200031, HE200037, HE200038, HE200039, HE200042, HX005000, HX200004, HX200005, HX200008, HX200009, HX200010 FARS - HE200001, HE200002, HE200003, HE200013, HE200014, HE200015, HE200016.
Architecture			
Architecture	Appeal		
Architecture	Appeal	44491	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) team will configure and deploy the paper application workflow.
Architecture	Eligibility Determination		
Architecture	Eligibility Determination	45244	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) system shall separate the application logic from post-eligibility processing into separate services.
Architecture	Enrollment		
Architecture	Enrollment	45245	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) system shall separate Enrollment Processing logic from other post-eligibility processing into a separate service.
Architecture	General Requirement		
Architecture	General Requirement	39547	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall have a configuration to toggle the State Subsidy program on and off, based on a specified effective date.
Architecture	General Requirement	39583	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall have functionality at the Dynamic Application CheckPoint 4 to determine a divorce or separation instrument order/execution/modification date as required for alimony income.
Architecture	General Requirement	39584	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall have functionality at the Dynamic Application CheckPoint 4 to determine a divorce or separation instrument order/execution/modification date as required for alimony paid deduction.
Architecture	General Requirement	39585	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall have functionality at the Dynamic Application CheckPoint 3 to pass a divorce or separation instrument order/execution/modification date along with alimony income.
Architecture	General Requirement	39586	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall have functionality at the Dynamic Application CheckPoint 3 to pass a divorce or separation instrument order/execution/modification date along with alimony paid deduction.
Architecture	General Requirement	41398	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall provide infrastructure for production and non-production environments for replacing OHS server with Apache HTTP web server.
Architecture	General Requirement	41399	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall install Apache HTTP web server for production and non-production environments.
Architecture	General Requirement	41400	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall customize the default Apache HTTP web server configurations (mod plugins) as per the requirements in California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) project.
Architecture	General Requirement	41401	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall install the ForgeRock web agents on the Apache HTTP web server.
Architecture	General Requirement	41402	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall modify Build and Deployment (B&D) scripts for deploying React code on Apache HTTP web server.
Architecture	General Requirement	41403	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall point Akamai to the Apache Load Balancer.
Architecture	General Requirement	41404	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall configure monitoring for the Apache HTTP web server
Architecture	General Requirement	41405	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall conduct regression, system, and performance testing with the replaced web server.
Architecture	General Requirement	41570	The System shall align with Anonymous Screening rules via OPA (Oracle Policy Automation) for eligibility determination.
Architecture	General Requirement	41571	The System shall have a Quick Sort calculator to quickly determine a customer's eligibility based on a series of question regarding APTC and FPL . (i.e. number of people living in your family, pregnancy, income level, disability, county, preferred language, etc.)
Architecture	General Requirement	41572	The System shall apply a set of business rules to determine eligibility. (see Quick Sort Business Rules)
Architecture	General Requirement	41583	The System shall bring in FPL information as a data source table (Excel Spreadsheet)
Architecture	General Requirement	41584	The System shall have a source table with counties and county phone numbers for routing the customer in case they need to be transferred to the county (e.g., a Medical Specialist).
Architecture	General Requirement	41652	The CRM system shall integrate with Pinnacle's IVR/CTI system (Avaya)
Architecture	General Requirement	41653	"For telephony initiated searches, the System shall automatically search for existing contacts in RightNow by ANI or Agent License No and screen pop to: a) Contact Detail View for exact match b) Contact List View for multi-match c) Contact Search View for no match "

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Category	Sub Category	Req ID	Requirement
Architecture	General Requirement	41654	The System shall display search results for the purpose of identification including: a) Last Name (individual only) b) First Name (individual only) c) Middle Initial (individual only) d) Zip Code (pertinent for multiple Contact types) e) Contact Role (pertinent for all Contact types) f) Phone Number (pertinent for multiple Contact types)
Architecture	General Requirement	41655	The System shall associate unique information associated with an agent/broker's Contact record: a) Business Address b) Company Name c) ANI (or business phone) d) Email Address e) Agent/Broker ID (if available) f) Agent/License No
Architecture	General Requirement	41656	The System shall not store Quick Sort data. Record of Quick Sort use and Quick Sort outcome shall be noted in CRM Incident.
Architecture	General Requirement	41740	The System shall batch load Contact records from existing California Health Programs targeted for lead outreach and conversion to Covered California Health Plans.
Architecture	General Requirement	42273	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall reuse the Foundation Components, Reference Data Cache, Centralized Configuration for all property key/values, Common Set of Utilities and The Endpoints in LW_Common Service that were developed in LW Phase 1, as part of this change.
Architecture	General Requirement	42274	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall implement the following endpoints in LW_HouseHold 1 - /discontinious/getdetails (GET) that were carried over from the LW Phase 2 scope, as apart of this change.
Architecture	General Requirement	42275	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall implement Dashboard and Correspondence java code that exists in the monolith application in the following Light Weight components: 1) LW_Noticesservice 2) LW_IndvHome 3) LW_SalesForce_Mail 4) LW_securemailbox 5) LW_AemNotices 6) LW_LoginPublic 7) LW_LoginRegister 8) LW_IdentityService 9) LW_PrivilegeAdmin 10) LW_SecurityAPI
Architecture	General Requirement	42276	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall implement the endpoints documented in "CorrespondenceMonolithEndpoints" Tab in Lightweight services
Architecture	General Requirement	42277	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall use Spring Boot 2.4.X and OpenJDK11 in the Lightweight services deployed using the container based deployment architecture
Architecture	General Requirement	42278	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall create the following new endpoints in LW_Noticesservice for the following functionalities. 1 - NOD01 Event Persistence 2 - NOD61 Event Persistence 3 - NOD70 Event Persistence 4 - Download Notice
Architecture	General Requirement	42279	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall provision infrastructure, software and monitoring tools for production and non-production environments for deploying and monitoring Lightweight services using the container based deployment architecture
Architecture	General Requirement	42280	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall conduct regression, system and performance testing for Lightweight services using the container based deployment architecture
Architecture	General Requirement	42281	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall create/update the Build and Deployment scripts to provide deployment capabilities for container based deployment architecture
Architecture	General Requirement	42292	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall reuse the Foundation Components, Reference Data Cache, Centralized Configuration for all property key/values, Common Set of Utilities and The Endpoints in LW_Common Service that were developed in LW Phase 1, as part of this change.
Architecture	General Requirement	42293	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall create and reuse a new LightWeight called LW_CommonUtilitiesService that will have the endpoints for commonly used Business Functionalities like EPin and Waiting Room that can be called from multiple LightWeights, as part of this change.
Architecture	General Requirement	42294	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall implement the following endpoints in LW_HouseHold 1- /application/keep/switch/coverage (PUT) 2 - /application/{pendingAppld}/eligdetermination (PUT) that were carried over from the LW Phase 2 scope, as apart of this change.

Category	Sub Category	Req ID	Requirement
Architecture	General Requirement	42295	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall implement Eligibility related java code that exists in the monolith application in the following Light Weight components: 1) LW_Fars 2) LW_Eligibility 3) LW_VLP 4) LW_DocMgmt 5) LW_DivsService 6) LW_SSA
Architecture	General Requirement	42296	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall implement the endpoints documented in "EligibilityMonolithEndpoints" Tab in Lightweight services
Architecture	General Requirement	42297	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall use Spring Boot 2.4.X and OpenJDK11 in the Lightweight services deployed using the container based deployment architecture
Architecture	General Requirement	42298	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall migrate the functionalities mentioned below from the Portal WS to LW components without changing any existing functionalities. 1 - Eligibility Service call Orchestration 2 - Waiting Room 3 - PIN Validation 4 - Change Log 5 - Case Persistence 6 - Determine BRE call required or not 7 - Determine Verification Indicator for External call required or not 8 - SSA Call from Eligibility Orchestration 9 - VLP Call from Eligibility Orchestration 10 - Identify Member call 11 - VIED Request payload preparation 12 - Call VIED Service 13 - VIED Response payload processing 14 - Eligibility & Budget Data persist 15 - Verification status and data persist 16 - BPM Task creation for Other QLE Reason 17 - DER/DER-U Event persist 18 - Notice Event persist 19 - Non-Magi Referral processing 20 - Subsidy Calculation – APTC/State subsidy 21 - COR Update 22 - Account Transfer 23 - Generate Access Code 24 - ROP Eligibility Determination Simulation
Architecture	General Requirement	42299	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall make the required changes to the endpoints being called from Portal WS to LW Eligibility Orchestration for the following batch jobs 1- Eligibility Determination batch that includes RAC and Renewal 2 - CCHIP Age Out/Renewal Eligibility Determination 3 - DIVs Eligibility Determination 4 - PDM Verification - Eligiblity Determination 5 - Keep or Switch - Eligiblity Determination 6 - VLP - Eligibility Determination
Architecture	General Requirement	42300	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall make the required changes to the endpoints called from Portal WS to LW Eligibility Orchestration for EDR/Disposition on OSB Poller
Architecture	General Requirement	42301	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall track all Eligibility endpoint calls and their returned status' and persist the data in Eligibility Event table
Architecture	General Requirement	42302	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall provision infrastructure, software and monitoring tools for production and non-production environments for deploying and monitoring Lightweight services using the container based deployment architecture
Architecture	General Requirement	42303	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall conduct regression, system and performance testing for Lightweight services using the container based deployment architecture
Architecture	General Requirement	42304	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall create/update the Build and Deployment scripts to provide deployment capabilities for container based deployment architecture

Category	Sub Category	Req ID	Requirement
Architecture	General Requirement	42305	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall implement the Security Best Practices comments mentioned in the NUW SIR#180595 for the following Lightweights 1) LW_Fars 2) LW_Eligibility 3) LW_VLP 4) LW_DocMgmt 5) LW_DivsService 6) LW_SSA
Architecture	General Requirement	42409	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall implement related java code that exists in the monolith application in the following Light Weight components: 1)LW_Account 2)LW_PrivilegeAdmin 3)LW_ConsumerSearch 4)LW_AccountAdmin 5)LW_Admin_Verification 6)LW_Internal_config 7)LW_AuthRep 8)LW_DevTools
Architecture	General Requirement	42410	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall implement the endpoints documented in "Admin&AccountMonolithEndpoints" Tab in Lightweight services
Architecture	General Requirement	42411	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall use Spring Boot 2.4.X and OpenJDK11 in the Lightweight services deployed using the container based deployment architecture
Architecture	General Requirement	42412	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall migrate the jsp pages mentioned below to the React Framework. 1)Specialized Account Creation 2) Certified Insurance Agent - Account Creation 3) Approved Admin Staff - Account Creation 4) Insurance Agency - Account Creation 5) Certified Enrollment Counselor - Account Creation 6) Health Insurance Plan - Account Creation 7) Authorized Representative - - Account Creation 8) Case Status(To Be converted to a Modal) 9) Program Overridden 10) Case Note(To Be converted to a Modal) 11) Outstanding Verification Date Update 12) Update Consent for Verification 13) Update Tax Filling Attestation 14) CCHIP Page(To Be converted to a Modal) 15) Renewal Page(To Be converted to a Modal) 16)Admin - Manual Verification Page 17)Admin Search Page 18)Budget Worksheet
Architecture	General Requirement	42413	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall provision infrastructure, software and monitoring tools for production and non-production environments for deploying and monitoring Lightweight services using the container based deployment architecture
Architecture	General Requirement	42414	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall conduct regression, system and performance testing for Lightweight services using the container based deployment architecture
Architecture	General Requirement	42415	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall create/update the Build and Deployment scripts to provide deployment capabilities for container based deployment architecture
Architecture	General Requirement	42416	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall implement the SecurityBest Practices comments mentioned in the NUW SIR#180595 for the following Lightweights 1)LW_Account 2)LW_PrivilegeAdmin 3)LW_ConsumerSearch 4)LW_AccountAdmin 5)LW_Admin_Verification 6)LW_Internal_config 7)LW_AuthRep 8)LW_DevTools
Architecture	General Requirement	44492	The California Healthcare Eligiblity, Enrollment and Retention System (CalHEERS) team will configure and deploy the SEP Other workflow.
Architecture	General Requirement	44493	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) team will configure and deploy the manual verification.

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Category	Sub Category	Req ID	Requirement
Architecture	General Requirement	44834	Vendor shall design and document California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) Exchange Lifecycle (ELC, the process) that is aligned to the CMS Exchange Reference Architecture: Foundation Guidance and Collaborative Environment and Life Cycle Governance – ERA Supplement.
Architecture	General Requirement	44835	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) Business Process Model shall comply with: A) CMS Exchange Reference Architecture: Foundation Guidance (ERA Foundation Guidance Draft 0 99_03162011.pdf) B) Medicaid Information Technology Architecture (MITA) (http://www.cms.gov/MedicaidInfoTechArch/04_MITAFramework.asp#TopOfPage)
Architecture	General Requirement	44966	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) Business Processes shall comply with the following Business Transaction standards as mandated by Affordable Care Act: A) HIPAA Transaction Standards: Adopt HIPAA transaction standards for electronic health care transactions. B) Electronic Eligibility and Enrollment rules: California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) Electronic Eligibility and Enrollment transactions shall comply to the set of operating rules as described in HIT Policy and Standards found at http://healthit.hhs.gov/portal/server.pt?open=512&mode=2&objID=3161 . C) Exchange Data Standard: Standardize Information Exchange Model based on NIEM as required by the Affordable Care Act. The details can be found at: Appendix B Core Data Analysis: http://healthit.hhs.gov/pdf/electronic-eligibility/appendix-b.pdf
Architecture	General Requirement	44976	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) Business Processes shall be documented using Business Process Modeling Notation (BPMN) and WS-BPEL standards.
Architecture	General Requirement	45003	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) Business Process Models shall include A) Static views and Dynamic views of business processes B) An input and output message structure C) Business events D) Exception business events E) Exception Event Actions for the five core Exchange Business Areas
Architecture	General Requirement	45018	The Vendor shall design and document the California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) Business Process Models for each of the following business functions: A) Eligibility and Enrollment B) Plan Management C) Financial Management D) Consumer Assistance E) Reports and Notices
Architecture	General Requirement	45019	The Vendor shall provide a Business Process Management System (BPMS) to design, implement and manage the California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) Business Process Management (BPM) lifecycle including the following functions (at the minimum): A) Analyze B) Model C) Design D) Deploy E) Manage F) Monitor
Architecture	General Requirement	45042	The Vendor shall provide a Business Capability Matrix (BCM) and a transformation roadmap for each California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) Business Process Model that describes the MITA Maturity Model Refer to the Bidders Library: MITA 2.0 [Part I Chapter 3 Maturity Model, Part I Chapter 4, Business Process Model, and Part I Chapter 5, Business Capability Matrix, respectively])
Architecture	General Requirement	45047	The Vendor shall provide a Business Activity Monitoring (BAM) tool to design, implement and manage business performance analytics.
Architecture	General Requirement	45055	The Vendor shall provide a California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) Conceptual Data Model (CDM) that is designed, built, and maintained in compliance with NIEM and HL7 reference models.
Architecture	General Requirement	45057	Vendor shall define and implement an end-to-end Service Analysis and Design Methodology process for Business Process Analysis and Modeling, Service Identification and Specification, based on the following standards, process and best practices including, but not limited to: A) SOA Architectural Styles B) Service Oriented Modeling and Architecture (SOMA) C) Model Driven Architecture (MDA) D) XML Schema design best practices.
Architecture	General Requirement	45065	The Vendor shall define, document and implement process tools and technologies for a comprehensive Data Management Strategy covering at a minimum the following topics: A) Data Governance B) Data Architecture C) Storage Architecture D) Master Data Management (MDM) E) Data Sharing Architecture F) Data Warehouse and Business Intelligence Refer to bidders library: MITA 2.0, [MITA Part II Chapter 2 Data Management Strategy]
Architecture	General Requirement	45079	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) Service Bus shall be used to mediate the transfer of information between various health and human services systems such as but not limited to California Healthcare Eligibility, Enrollment and Retention System (CalHEERS), SAWS, MEDS, CWS/CMS and CMIPS.

Category	Sub Category	Req ID	Requirement
Architecture	General Requirement	45082	The Vendor shall design, build, and maintain California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) Physical Data Model (PDM) based in NIEM and HL7 reference model including: A) Persistent Data Model B) Core XML Schema Model C) Message XML Schema Model
Architecture	General Requirement	45105	The Vendor shall design and implement Technical Services that comply with principles and standards from MITA 2.0 Technical Services specification, Part III Chapter 6-Technical Services Specification.
Architecture	General Requirement	45106	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) Technical architecture shall provide interoperability and reusability capabilities by creating a Shared Services Infrastructure that adheres to Open technology standards Refer to the Bidders Library: MITA 2.0 Interoperability Capability described in PART III Chapter 6 Technical Services.pdf.
Architecture	General Requirement	45107	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall comply with the recommendations issued pursuant to section 1561 of the Affordable Care Act and shall externalize all the business rules from the application.
Architecture	General Requirement	45108	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) technical architecture shall align with the "Zoned Architecture" defined in CMS Exchange Reference Architecture: Foundation Guidance.
Architecture	General Requirement	45157	The Vendor shall provide and implement an industry standard Business Rules Management System (BRMS) for the maintenance of California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) business rules.
Architecture	General Requirement	45158	The Vendor shall implement a single centralized business rules repository in a consistent, standards-based, human readable format.
Architecture	General Requirement	45159	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) Business Rules shall be expressed using a consistent, technology-neutral standard format congruent with NIEM standards.
Architecture	General Requirement	45160	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall conform to N-Tiered web architecture that will realize and enable a Service Oriented Architecture (SOA) design.
Architecture	General Requirement	45161	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) Service Bus shall be the single point-of-access to all California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) web services.
Architecture	General Requirement	45191	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) Enterprise Service Bus shall provide centralized services for: A) Logging B) Auditing C) Exception Management functions
Architecture	General Requirement	45192	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) Service Bus shall provide the following service integration features: A) Request Validation (V) B) Request Enrichment (E) C) Inbound and outbound data Transformation (T) D) Dynamic Routing (R) E) Virtualized service Operation (O) F) Messaging G) Event Driven Architecture (EDA)
Architecture	General Requirement	45193	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) environments shall centrally manage services including the following functions: deployment, versioning, monitoring and administration.
Architecture	General Requirement	45208	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) environments shall provide centralized implementation, management, monitoring, administration and governance of security compliance policies.
Architecture	General Requirement	45217	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) cloud document storage implementation shall operate in a functionally consistent manner to the current WCC document solution.
Architecture	General Requirement	45218	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) cloud document storage implementation shall include the migration of the existing WCC document repository contents to cloud storage.
Architecture	General Requirement	45219	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) cloud document storage implementation shall include the decommissioning of appropriate databases, servers, and other components able to be deprecated based on this solution.
Architecture	General Requirement	45220	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) system shall extend security governance and risk management processes around control implementation maintenance to the cloud document storage.
Architecture	General Requirement	45221	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) system shall extend security governance and risk management processes around policy, procedures, standards, and guidelines to the cloud document storage.
Architecture	General Requirement	45222	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) system shall extend security governance and risk management processes around communications and awareness to the cloud document storage.
Architecture	General Requirement	45223	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) system shall extend security governance and risk management processes around industry and regulatory compliance to the cloud document storage.
Architecture	General Requirement	45224	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) system shall extend security technology and / or processes around firewalls and network security to the cloud document storage.
Architecture	General Requirement	45225	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) system shall extend digital identity technology and / or processes around user provisioning to the cloud document storage.

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(Extracted from CalHEERS RTM)

Category	Sub Category	Req ID	Requirement
Architecture	General Requirement	45226	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) system shall extend digital identity technology and / or processes around identity integration to the cloud document storage.
Architecture	General Requirement	45227	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) system shall extend data privacy and protection technology and / or processes around data encryption at rest and in transit to the cloud document storage.
Architecture	General Requirement	45228	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) system shall extend data privacy and protection technology and / or processes around data access control to the cloud document storage.
Architecture	General Requirement	45229	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) system shall extend cyber defense technology and / or processes around SIEM to the cloud document storage.
Architecture	General Requirement	45230	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) system shall extend operations management technology and / or processes around system and service monitoring to the cloud document storage.
Architecture	General Requirement	45231	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) system shall extend operations management technology and / or processes around environments configuration and management to the cloud document storage.
Architecture	General Requirement	45232	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) system shall extend operations management technology and / or processes around backup, restore, archival, and recovery to the cloud document storage.
Architecture	General Requirement	45233	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) system shall extend data management technology and / or processes around data lifecycle management to the cloud document storage.
Architecture	General Requirement	45234	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) system shall extend performance and availability management technology and / or processes around availability and performance monitoring to the cloud document storage.
Architecture	General Requirement	45235	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) system shall extend performance and availability management technology and / or processes around IT capacity management to the cloud document storage.
Architecture	General Requirement	45236	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) system shall extend software configuration management technology and / or processes around release management to the cloud document storage.
Architecture	General Requirement	45238	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) system shall support document retrieval and storage in cloud.
Architecture	General Requirement	45247	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) system shall separate MEDS Notification logic from other post-eligibility processing into a separate service.
Architecture	General Requirement	45248	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) system shall separate DER Outbound Processing logic from other post-eligibility processing into a separate service.
Architecture	General Requirement	45249	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) system shall build each service, listed in TR1, such that it is separately maintainable and deployable from other services.
Architecture	General Requirement	45250	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) system shall build each service, listed in TR1, such that it supports production monitoring by passing a correlation ID with each request to any child service that is called.
Architecture	General Requirement	45251	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) system shall build each service, listed in TR1, to support authentication of requests via a JWT Token passed in the header.
Architecture	General Requirement	45252	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) system shall build each service, listed in TR1, such that it supports production monitoring by providing service request logging: --Service request failure --Service system information if a failure occurs --Service request success
Architecture	General Requirement	45253	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) system shall build each service, listed in TR1, such that it supports production monitoring by providing service request logging of data attributes: • Service name and operation name. • Business description of operation called. • If request failed, failure reason, if known. • If request failed, timestamp of failure • If request failed, business impact, if known • If request failed, corrective action (user retry, intervention required – if known) • User (or system process) that initiated request
Architecture	General Requirement	45255	The Vendor shall implement open standard based Service Repository/Registry that supports: Service Governance and Runtime Discovery/Binding.
Architecture	General Requirement	45256	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) services shall be portable across platforms.
Architecture	General Requirement	45257	The Vendor shall develop and expose web services to consumers using the following open standards: A) XML B) WSDL C) SOAP D) WS-I Web Services E) WS-Security
Architecture	General Requirement	45258	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) system shall build each service, listed in TR1, such that it supports production monitoring by providing a health check operation that includes DB connection health and inter-service connectivity health.

Category	Sub Category	Req ID	Requirement
Architecture	General Requirement	45259	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) system shall build each service, listed in TR1, such that has a unique property file that drives service configuration different that other service property files.
Architecture	General Requirement	45262	The NICE application shall support call record retrieval and storage in cloud.
Architecture	General Requirement	45263	The cloud call recordings storage implementation shall operate in a functionally consistent manner to the current NICE application solution.
Architecture	General Requirement	45264	The cloud call recording storage implementation shall include the migration of the existing NICE voice call recordings archives to cloud storage.
Architecture	General Requirement	45265	The cloud call recordings storage implementation shall include the decommissioning of appropriate databases, servers, and other components able to be deprecated based on this solution.
Architecture	General Requirement	45266	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) system shall extend security governance and risk management processes around control implementation maintenance to the cloud call recordings storage.
Architecture	General Requirement	45267	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) system shall extend security governance and risk management processes around policy, procedures, standards, and guidelines to the cloud call recordings storage.
Architecture	General Requirement	45268	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) system shall extend security governance and risk management processes around communications and awareness to the cloud call recordings storage.
Architecture	General Requirement	45269	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) system shall extend security governance and risk management processes around industry and regulatory compliance to the cloud call recordings storage.
Architecture	General Requirement	45270	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) system shall extend security technology and / or processes around firewalls and network security to the cloud call recordings storage.
Architecture	General Requirement	45271	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) system shall extend digital identity technology and / or processes around user provisioning to the cloud call recordings storage.
Architecture	General Requirement	45272	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) system shall extend digital identity technology and / or processes around identity integration to the cloud call recordings storage.
Architecture	General Requirement	45273	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) system shall extend data privacy and protection technology and / or processes around data encryption at rest and in transit to the cloud call recordings storage.
Architecture	General Requirement	45274	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) system shall extend data privacy and protection technology and / or processes around data access control to the cloud call recordings storage.
Architecture	General Requirement	45275	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) system shall extend cyber defense technology and / or processes around SIEM to the cloud call recordings storage.
Architecture	General Requirement	45276	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) system shall extend operations management technology and / or processes around system and service monitoring to the cloud call recordings storage.
Architecture	General Requirement	45277	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) system shall extend operations management technology and / or processes around backup, restore, archival, and recovery to the cloud call recordings storage.
Architecture	General Requirement	45278	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) system shall extend data management technology and / or processes around data lifecycle management to the cloud call recordings storage.
Architecture	General Requirement	45279	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) system shall extend performance and availability management technology and / or processes around availability and performance monitoring to the cloud call recordings storage.
Architecture	General Requirement	45280	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) system shall extend performance and availability management technology and / or processes around IT capacity management to the cloud call recordings storage.
Architecture	General Requirement	45281	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) system shall extend software configuration management technology and / or processes around release management to the cloud call recordings storage.
Architecture	General Requirement	45298	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) services shall be reusable as an enterprise resource with agnostic functional contexts.
Architecture	General Requirement	45311	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) system should support running development, test, and tools environments in cloud.
Architecture	General Requirement	45312	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) system shall extend security technology and / or processes around firewalls and network security to the cloud development, test, and tools environments.
Architecture	General Requirement	45313	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) system shall extend security technology and / or processes around system hardening to the cloud development, test, and tools environments.
Architecture	General Requirement	45314	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) system shall extend security technology and / or processes around system integrity to the cloud development, test, and tools environments.
Architecture	General Requirement	45315	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) system shall extend digital identity technology and / or processes around user provisioning to the cloud development, test, and tools environments.
Architecture	General Requirement	45316	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) system shall extend digital identity technology and / or processes related to directory services to the cloud development, test, and tools environments.
Architecture	General Requirement	45317	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) system shall extend digital identity technology and / or processes around access management to the cloud development, test, and tools environments.
Architecture	General Requirement	45318	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) system shall extend data privacy and protection technology and / or processes around data encryption at rest and in transit to the cloud development, test, and tools environments.
Architecture	General Requirement	45319	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) system shall extend data privacy and protection technology and / or processes around data access audit to the cloud development, test, and tools environments.

Appendix A-4 - SOW Exhibit A - System Requirements Specification
(Extracted from CalHEERS RTM)

Category	Sub Category	Req ID	Requirement
Architecture	General Requirement	45320	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) system shall extend cyber defense technology and / or processes around vulnerability management to the cloud development, test, and tools environments.
Architecture	General Requirement	45321	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) system shall extend cyber defense technology and / or processes around SIEM to the cloud development, test, and tools environments.
Architecture	General Requirement	45322	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) system shall extend security operations management technology and / or processes around patch management to the cloud development, test, and tools environments.
Architecture	General Requirement	45323	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) system shall extend security governance and risk management processes around strategy and risk management to the cloud development, test, and tools environments.
Architecture	General Requirement	45324	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) system shall extend security governance and risk management processes around control implementation maintenance to the cloud development, test, and tools environments.
Architecture	General Requirement	45325	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) system shall extend security governance and risk management processes around policy, procedures, standards, and guidelines to the cloud development, test, and tools environments.
Architecture	General Requirement	45326	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) system shall extend security governance and risk management processes around communications and awareness to the cloud development, test, and tools environments.
Architecture	General Requirement	45327	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) system shall extend security governance and risk management processes around industry and regulatory compliance to the cloud development, test, and tools environments.
Architecture	General Requirement	45328	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) system shall extend security technology and / or processes around server and endpoint security to the cloud development, test, and tools environments.
Architecture	General Requirement	45329	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) system shall extend security technology and / or processes around IDS and IPS to the cloud development, test, and tools environments.
Architecture	General Requirement	45330	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) system shall extend security technology and / or processes around malware treatment to the cloud development, test, and tools environments.
Architecture	General Requirement	45331	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) system shall extend digital identity technology and / or processes around identity integration to the cloud development, test, and tools environments.
Architecture	General Requirement	45332	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) system shall extend operations management technology and / or processes around automation and scheduling to the cloud development, test, and tools environments.
Architecture	General Requirement	45333	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) system shall extend operations management technology and / or processes around system and service monitoring to the cloud development, test, and tools environments.
Architecture	General Requirement	45334	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) system shall extend operations management technology and / or processes around server configuration and management to the cloud development, test, and tools environments.
Architecture	General Requirement	45335	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) system shall extend operations management technology and / or processes around environments configuration and management to the cloud development, test, and tools environments.
Architecture	General Requirement	45336	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) system shall extend operations management technology and / or processes around backup, restore, archival, and recovery to the cloud development, test, and tools environments.
Architecture	General Requirement	45337	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) system shall extend data management technology and / or processes around data lifecycle management to the cloud development, test, and tools environments.
Architecture	General Requirement	45338	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) system shall extend performance and availability management technology and / or processes around capacity planning to the cloud development, test, and tools environments.
Architecture	General Requirement	45339	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) system shall evaluate and, if compatible with the California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) application, implement performance and availability management technology and / or processes around autoscaling to the cloud development, test, and tools environments.
Architecture	General Requirement	45340	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) system shall extend performance and availability management technology and / or processes to performance tune the cloud development, test, and tools environments.
Architecture	General Requirement	45341	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) system shall extend performance and availability management technology and / or processes around availability and performance monitoring to the cloud development, test, and tools environments.
Architecture	General Requirement	45342	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) system shall extend performance and availability management technology and / or processes around IT capacity management to the cloud development, test, and tools environments.
Architecture	General Requirement	45343	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) system shall extend software configuration management technology and / or processes around release management to the cloud development, test, and tools environments.
Architecture	General Requirement	45344	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) cloud development, test, and tools environments implementation shall include the decommissioning of appropriate databases, servers, and other components able to be deprecated based on this solution.
Architecture	General Requirement	45345	The Vendor shall implement service access patterns (e.g. "External Gateway Pattern", "EDI Gateway" etc.) to provide unique access point to the California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) services from various access channels.
Architecture	General Requirement	45346	The Vendor shall establish a data warehouse for storing, and maintaining California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) data.
Architecture	General Requirement	45347	The Vendor shall provide a Business Intelligence System with a minimum of ten [10] simultaneous users.
Architecture	General Requirement	45355	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) Software services architecture shall enable the capabilities to deploy the services in the cloud environment.
Architecture	General Requirement	45356	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) services and capabilities shall be available as Software-as-a-Service (SaaS) within California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) and across various county, State, federal and private agencies.

Appendix A-4 - SOW Exhibit A - System Requirements Specification
(Extracted from CalHEERS RTM)

Category	Sub Category	Req ID	Requirement
Architecture	General Requirement	45358	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) system should support the billing system running in cloud.
Architecture	General Requirement	45359	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) implementation of the cloud billing system shall operate in a functionally consistent manner to the current on-premise billing solution.
Architecture	General Requirement	45360	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) cloud billing system implementation shall include the decommissioning of appropriate databases, servers, and other components able to be deprecated based on this solution.
Architecture	General Requirement	45377	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall have the capability to bundle correspondence/notices for printing, storage, reprinting and emailing.
Architecture	General Requirement	45378	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) Architecture shall align with the CMS Exchange Reference Architecture's (ERA) framework.
Architecture	General Requirement	45379	The Vendor shall document the California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) Technical Capability Matrix to various MITA 2.0 Maturity Levels (MITA Maturity Model, MMM).
Architecture	General Requirement	45380	The Vendor shall expose the California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) services consistent with WS-I web service guidelines and interoperability tests that are based on Service Contract Specification.
Architecture	General Requirement	45381	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) Enterprise Service Bus shall support the following architectures and standards: A) Medi-care information technology architecture (MITA) B) WS-I guidelines C) NIEM D) HL7
Architecture	General Requirement	45387	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) Service Bus shall provide the following connectivity services at a minimum: A) Web Services Connectivity: SOAP, REST B) Data Source Connectivity: connectivity adaptors to MEDS and SAWS data sources C) Transport Services: (S)FTP, HTTP(s), JMS providers, RMI, web services, CORBA, DCOM, and e-mail (POP, SMTP, IMAP)
Architecture	General Requirement	45388	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) Access Channel/Application Layer shall provide application access for the States eligibility and enrollment services for consumers, providers, and assisters.
Architecture	General Requirement	45393	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) Access Channel/Application Layer shall provide access to California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) by the following methods: A) Web Portal B) Smart Mobile Device C) Interactive Voice Response (IVR) D) Fax Interface
Architecture	General Requirement	45397	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) system shall extend security governance and risk management processes around control implementation maintenance to the cloud billing system.
Architecture	General Requirement	45398	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) system shall extend security governance and risk management processes around policy, procedures, standards, and guidelines to the cloud billing system.
Architecture	General Requirement	45399	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) system shall extend security governance and risk management processes around communications and awareness to the cloud billing system.
Architecture	General Requirement	45400	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) system shall extend security governance and risk management processes around industry and regulatory compliance to the cloud billing system.
Architecture	General Requirement	45401	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) system shall extend security technology and / or processes around firewall and network security to the cloud billing system.
Architecture	General Requirement	45402	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) system shall extend security technology and / or processes around system hardening to the cloud billing system.
Architecture	General Requirement	45403	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) system shall extend security technology and / or processes around system integrity to the cloud billing system.
Architecture	General Requirement	45404	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) system shall extend security technology and / or processes around server and endpoint security to the cloud billing system.
Architecture	General Requirement	45405	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) system shall extend security technology and / or processes around IDS and IPS to the cloud billing system.
Architecture	General Requirement	45406	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) system shall extend security technology and / or processes around malware treatment to the cloud billing system.
Architecture	General Requirement	45407	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) system shall extend digital identity technology and / or processes around user provisioning to the cloud billing system.
Architecture	General Requirement	45408	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) system shall extend digital identity technology and / or processes related to directory services to the cloud billing system.
Architecture	General Requirement	45409	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) system shall extend digital identity technology and / or processes around access management to the cloud billing system.
Architecture	General Requirement	45410	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) system shall extend digital identity technology and / or processes around identity integration to the cloud billing system.
Architecture	General Requirement	45411	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) system shall extend data privacy and protection technology and / or processes around data encryption at rest and in transit to the cloud billing system.

Appendix A-4 - SOW Exhibit A - System Requirements Specification
(Extracted from CalHEERS RTM)

Category	Sub Category	Req ID	Requirement
Architecture	General Requirement	45412	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) system shall extend data privacy and protection technology and / or processes around data access audit to the cloud billing system.
Architecture	General Requirement	45413	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) system shall extend data privacy and protection technology and / or processes around data access controls to the cloud billing system.
Architecture	General Requirement	45414	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) system shall extend cyber defense technology and / or processes around vulnerability management to the cloud billing system.
Architecture	General Requirement	45415	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) system shall extend security cyber defense processes around SIEM to the cloud billing system.
Architecture	General Requirement	45416	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) system shall extend operations management technology and / or processes around automation and scheduling to the cloud billing system.
Architecture	General Requirement	45417	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) system shall extend operations management technology and / or processes around system and service monitoring to the cloud billing system.
Architecture	General Requirement	45418	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) system shall extend operations management technology and / or processes around server configuration and management to the cloud billing system.
Architecture	General Requirement	45419	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) system shall extend operations management technology and / or processes around workstation configuration and management to the cloud billing system.
Architecture	General Requirement	45420	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) system shall extend operations management technology and / or processes around environments configuration and management to the cloud billing system.
Architecture	General Requirement	45421	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) system shall extend operations management technology and / or processes around backup, restore, archival, and auto recovery to the cloud billing system.
Architecture	General Requirement	45422	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) system shall extend data management technology and / or processes around data lifecycle management to the cloud billing system.
Architecture	General Requirement	45423	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) system shall extend performance and availability management technology and / or processes around capacity planning and auto scaling to the cloud billing system.
Architecture	General Requirement	45424	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) system shall extend performance and availability management technology and / or processes around performance tuning to the cloud billing system.
Architecture	General Requirement	45425	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) system shall extend performance and availability management technology and / or processes around performance profiling to the cloud billing system.
Architecture	General Requirement	45426	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) system shall extend performance and availability management technology and / or processes around availability and performance monitoring to the cloud billing system.
Architecture	General Requirement	45427	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) system shall extend performance and availability management technology and / or processes around IT capacity management to the cloud billing system.
Architecture	General Requirement	45428	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) system shall extend security operations management technology and / or processes around patch management to the cloud billing system.
Architecture	General Requirement	45429	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) system shall extend software configuration management technology and / or processes around release management to the cloud billing system.
Architecture	General Requirement	45430	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) system shall extend software configuration management technology and / or processes around version source management to the cloud billing system.
Architecture	General Requirement	45434	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System web portal shall have the ability to collect feedback from users regarding (functionality, features, web portal problems, performance, accessibility (ADA and languages) etc.)
Architecture	General Requirement	45528	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall create the foundation components required for deploying the Lightweight services with container based deployment architecture and also create the framework components required as part of this change.
Architecture	General Requirement	45529	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall migrate the code for Data Access Validation filter from monolith application to a new LW_Common Service
Architecture	General Requirement	45530	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall migrate the code for Error Service used for logging exceptions in HBX_MONITOR and HBX_ERROR table from monolith application to a new LW_Common Service
Architecture	General Requirement	45531	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall tag the exceptions logged in HBX_MONITOR table as business exception or technical exception based on the type of exception logged
Architecture	General Requirement	45532	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall create Reference Data cache to be used by Lightweight services deployed using container based deployment architecture to avoid database calls.
Architecture	General Requirement	45533	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall create new endpoints in LW_Common Service that can be used by other Lightweight services to retrieve the reference data values.
Architecture	General Requirement	45534	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall maintain centralized configuration/service for all property key/values and it should be available for all LW components deployed using container based deployment architecture
Architecture	General Requirement	45535	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall use a new log message format from all Lightweight projects deployed using the container based deployment architecture for issue analysis and debug
Architecture	General Requirement	45536	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall implement log rotation policy for the Lightweight projects deployed using the container based deployment architecture

Appendix A-4 - SOW Exhibit A - System Requirements Specification
(Extracted from CalHEERS RTM)

Category	Sub Category	Req ID	Requirement
Architecture	General Requirement	45537	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall create a common set of Utilities that can be used by all Lightweight projects deployed using the container based deployment architecture
Architecture	General Requirement	45538	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall use service discovery process to automate discovery of new instances of Lightweight services deployed using container based architecture
Architecture	General Requirement	45539	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall implement IVR & Demographics java code that exists in the monolith application in the following Light Weight components: 1) LW_CommonServices 2) LW_AppStart 3) LW_PendingApp 4) LW_Household 5) LW_Income 6) LW_HealthCare 7) LW_AppPdf 8) LW_Citizenship 9) LW_AppSignature 10) LW_IVR
Architecture	General Requirement	45540	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall implement the endpoints documented in "Demographic Monolith Endpoints" Tab in Lightweight services
Architecture	General Requirement	45541	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall use Spring Boot 2.3.X and OpenJDK11 in the Lightweight services deployed using the container based deployment architecture
Architecture	General Requirement	45542	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall provision infrastructure, software and monitoring tools for production and non-production environments for deploying and monitoring Lightweight services using the container based deployment architecture
Architecture	General Requirement	45543	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall conduct regression, system and performance testing for Lightweight services using the container based deployment architecture
Architecture	General Requirement	45544	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall create/update the Build and Deployment scripts to provide deployment capabilities for container based deployment architecture
Architecture	General Requirement	45663	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall prevent Non-Admin user account passwords from being changed more than 1 time per calendar day
Architecture	General Requirement	45664	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall have messaging for users who attempted to change passwords more than 1 time per calendar day
Architecture	General Requirement	45665	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall have messaging after a user changes a password that it cannot be changed again until the next calendar day
Architecture	General Requirement	45666	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall update password criteria to include messaging that passwords must not be changed more than once per calendar day
Architecture	General Requirement	45667	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall mask the Date of Birth field for the Consumer and Authorized Representative to display only the day and month, masking the year, after the application has been submitted
Architecture	General Requirement	45668	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall change the "My Profile" Date of Birth field to a read only label by default, with a button to edit
Architecture	General Requirement	45669	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall add messaging to the profile page indicating that the data changes made in the profile page will not impact application data
Architecture	General Requirement	45670	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall require users (Authorized Reps and Consumers) to enter a OTP to access tax forms less than or equal to 2021 tax year
Architecture	General Requirement	45671	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall add messaging to inform the user (Authorized Reps and Consumers) that OTP set up is required to access tax forms
Architecture	General Requirement	45672	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall provide enhanced messaging on Verify Your Account/OTP pages to enhance visibility of hint text
Architecture	General Requirement	45673	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall capture audit trail to record all the OTP transactions performed by Consumer and Auth Rep to access the tax forms less than or equal to 2021 tax year
Architecture	General Requirement	45709	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) system shall be restrict the use of database management utilities to only authorized database administrators,Prevent users from accessing database data files at the logical data view, field, or field-value level, Implement table-level access control
Architecture	General Requirement	45710	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) system shall be define and Document separates duties of individuals as necessary to prevent malevolent activity
Architecture	General Requirement	45711	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) system shall be enforce role-based access control policies over all subjects and objects
Architecture	General Requirement	45712	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) system shall be maintain a limited group of administrators with access based upon the users' roles and responsibilities
Architecture	General Requirement	45713	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) system shall be configured databases containing federal information in accordance with the organizational security administration guide to provide role-based access controls, enforcing assigned privileges and permissions at the file, table, row, column, or cell level, as appropriate
Architecture	General Requirement	45714	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) system shall be constrained a subject that has been granted access to information from doing any of the following: (i) Passing the information to unauthorized subjects or objects; (ii) Granting its privileges to other subjects; (iii) Changing one or more security attributes on subjects, objects, the information system, or information system components; (iv) Choosing the security attribute and attribute values to be associated with newly created or modified objects.
Architecture	General Requirement	45715	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) system shall be limit IRS data access to identified US Resources

Category	Sub Category	Req ID	Requirement
Architecture	General Requirement	45716	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) system shall be limit FTB data access to identified resources
Architecture	General Requirement	45717	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) Technology Refresh - Oracle to RDS Aurora PostgreSQL Database - Database - HIGH AVAILABILITY
Architecture	General Requirement	45718	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) system shall be support fault tolerance at compute and storage level of database
Architecture	General Requirement	45719	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) system shall be automatically and quickly failover to standby database to minimize downtime
Architecture	General Requirement	45720	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) system shall be ensure no or minimum amount of data loss during a database failure
Architecture	General Requirement	45721	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) system shall be able to manually failover and failback to minimize downtime during planned maintenance
Architecture	General Requirement	45764	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall conduct regression, system, Integration and performance testing for Lightweight services using the container based deployment architecture
Architecture	General Requirement	45765	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall implement related java code that exists in the monolith application in the following Light Weight components: 1)LW_Enrollment 2)LW_UpdateMemberOutbound 3)LW_UpdateMemberInbound 4)LW_DER 5)LW_Meds 6)LW_Disposition 7)LW_MEDS_Alert 8)LW_Individual 9)LW_ROP 10)LW_Account_Transfer 11)LW_BulkTransfer 12)LW_SalesforceBPM
Architecture	General Requirement	45766	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall implement the endpoints documented in "MEDS&SAWSMonolithEndpoints" Tab in Lightweight services
Architecture	General Requirement	45767	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall migrate the functionalities mentioned below from the Portal WS to LW components without changing any existing functionalities. 1 - CompanionEligibilityDeterminationEndPoint 2 - CancelDER
Architecture	General Requirement	45768	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall use Spring Boot 2.6.6 and OpenJDK11 in the Lightweight services deployed using the container based deployment architecture
Architecture	General Requirement	45769	CALHEERS shall implement ENUM removal for 18 screens and related Java codes as part of code optimization.

Category	Sub Category	Req ID	Requirement
Architecture		45816	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall migrate the JSF pages mentioned below to the React Framework. 1) Apply for Health Insurance 2) HouseHold Primary Contact - Apply for Health Insurance 3) Identify Proofing - HouseHold Primary Contact a)Upload Documents - Confirm Your Identity b)Identify Proofing Options c)Confirm your Address d)Unable to Validate Address e)Confirm Identity f)Confirmation g)Session Expired h)Not Able to verify i)Help Me Decide j)Identify Confirmation Failed 4) Primary Contact - Name - HouseHold Primary Contact 5) Primary Contact Home Address - HouseHold Primary Contact 6) Primary Contact Mailling Address - HouseHold Primary Contact 7) Communication and Language Preferences - HouseHold Primary Contact 8) Application Assosiation - Apply for Health Insurance 9) Consent For Verification - Apply for Health Insurance 10) HouseHold Members a) Person 1 i)General ii)Address & Contact iii)Relationships iv)Demographic Info v)Tax information vi)Health Insurance Information vii)Optional Data viii)Income 11) Income Summary 12) Notes 13) Create corresspondence
	General Requirement		
Architecture	General Requirement	45817	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall use React 17 for the migration of Flexi App(JSF page) to React.
Architecture	General Requirement	45818	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall implement separate Lightweight for the backend service of FlexiApp using Spring Boot 2.6.6 and OpenJDK11 deployed using the container based deployment architecture
Architecture	General Requirement	45819	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall migrate all the Endpoints across all the Lightweights as mentioned in RemainingEndpoints tab for which the Monolithic code was not migrated until 22.9 which needs to be migrated with 23.2 and needs to deploy the Lightweight components which are currently deployed in Weblogic should be deployed to OCP except OSB,OPA,SOA and GI.
Architecture	General Requirement	45820	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall provision infrastructure, software and monitoring tools for production and non-production environments for deploying and monitoring Lightweight services using the container based deployment architecture
Architecture	General Requirement	45821	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall conduct regression, system, Integration and performance testing for Lightweight services using the container based deployment architecture
Architecture	General Requirement	45822	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall create/update the Build and Deployment scripts to provide deployment capabilities for container based deployment architecture

Category	Sub Category	Req ID	Requirement
Architecture		45823	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall implement the Security Best Practices comments mentioned in the NUW SIR#180595 for the following Lightweights 1)LW_Enrollment 2)LW_UpdateMemberOutbound 3)LW_UpdateMemberInbound 4)LW_DER 5)LW_Meds 6)LW_Disposition 7)LW_MEDS_Alert 8)LW_Individual 9)LW_ROP 10)LW_Account_Transfer 11)LW_BulkTransfer 12)LW_SalesforceBPM
	General Requirement		
Architecture	General Requirement	45824	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall migrate the monolithic code(legacy/existing business logic) from the ECM Service component to LW components without changing any existing functionalities.
Architecture	General Requirement	45825	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall migrate the monolithic code from Portal Service to Batch components without changing any existing functionalities
Architecture	General Requirement	46007	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) system shall extend security governance and risk management processes around strategy and risk management to the cloud billing system.
Architecture	General Requirement	46206	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall reuse the Foundation Components, Reference Data Cache, Centralized Configuration for all property key/values, Common Set of Utilities and The Endpoints in LW_Common Service that were developed in LW Phase 1, as part of this change.
Architecture	General Requirement	46207	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall move all the ENUM listed in the "EnumMigration" tab for the screens which were part of the LW Phase 5 CR 200355 to the reference data caching.
Architecture	General Requirement	46567	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall provide infrastructure for production and non-production environments for implementation of micro-batch architecture.
Architecture	General Requirement	46568	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) will incorporate micro batch architecture extending SAWS renewals to be processed outside the batch window. This will allow faster processing of combined SAWS renewal (resulted from CalWIN migration into CalSAWS).
Architecture	General Requirement	46569	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) will Incorporate Interface (CMS/ FTB/ EDD) Governor Limits management which will automatically throttle-up and throttle-down to maximize the interface calls and keep interface calls within the allowed boundaries for SAWS batch (Regular Batch EDR + Monthly Renewal EDR).
Architecture	General Requirement	46570	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall conduct Performance testing for SAWS renewal volumes using the container-based deployment architecture
Architecture	General Requirement	46714	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall enhance the code logic to allow plan loading for a future year
Architecture	General Requirement	46715	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall incorporate Replace Year action to add or replace plan data for a given year for PlanRateData job.
Architecture	General Requirement	46716	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall enhance the base framework of the Shop and Compare utility to support batch processing of data.
Architecture	General Requirement	46717	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall incorporate Batch processing for all Actions of the PlanRateData job - Replace All, Append Year, Replace Year.
Architecture	General Requirement	46718	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall make necessary updates to the build and deployment job pipeline to incorporate Replace Year action.
Architecture	General Requirement	46719	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall be able to deploy and revert (if Needed) Shop and Compare plans during off business hours.
Architecture	General Requirement	46857	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall provision infrastructure and software for production and non-production environments for deploying Fuse services using the container based deployment architecture
Architecture	General Requirement	46858	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall migrate the EHIT transaction related OSB services to Red Hat Fuse

Category	Sub Category	Req ID	Requirement
Architecture		46859	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall migrate all the below OSB services to Red Hat Fuse. 1. California Healthcare Eligibility, Enrollment and Retention System (CalHEERS)EHITInterface_v2 2. DER_v3 3. InterfaceEvents_v3 4. InterfaceEventsInbound_v1 5. PollCalifornia Healthcare Eligibility, Enrollment and Retention System (CalHEERS)EHITLogInterface 6. PollCancelDER_v1 7. PollDERBatchCalWINCompanion_v1 8. PollDERBatchLeaderCompanion_v1 9. PollDERCalWINCompanion_v1 10. PollDERCalWINInterfaceEvents_v2 11. PollDERCWBatch_v1 12. PollDERLDBatch_v1 13. PollDERLeaderCompanion_v1 14. PollDERLeaderInterfaceEvents_v2 15. PollDisposition_v1_1 16. PollDisposition_v1_2 17. PollDisposition_v1_3 18. PollEDRCaWIN_v1 19. PollEDRCaWINBatch_v1 20. PollEDRCaWINBatchCompanion_v1 21. PollEDRCaWINCompanion_v1 22. PollEDRLD_v1 23. PollEDRLDBatch_v1 24. PollEDRLeaderBatchCompanion_v1 25. PollEDRLeaderCompanion_v1 26. PollLogLeader 27. PollLogCaWIN_v1 28. PollUpdateMemberInbound_v1 29. PollUpdateMemberOutboundCW_v1 30. PollUpdateMemberOutboundLD_v1
	General Requirement		
Architecture		46860	Build common Fuse service for all the EHIT transactions to be exposed to SAWS for inbound transactions . Build common Fuse service for all the Outbound EHIT transactions to invoke SAWS. And Pollers related to EHIT should perform below operations 1. Poll for the newly inserted records in the inbound table. 2. Read the payload and transform it into the request format of LightWeight Services. 3. Invoke LightWeight Services. 4. Process the payload received from LightWeight Services 5. Based on the response from LightWeight Services endpoint update/insert the records in the inbound and outbound tables.
	General Requirement		
Architecture	General Requirement	46861	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall migrate the FDSH transaction related OSB services to Red Hat Fuse
Architecture		46862	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall migrate all the below OSB services to Red Hat Fuse. 1. FraudArchivingReportingSystem_v1 2. RemoteIDProofing_v2 3. VerifyAnnualHouseHoldIncome_v3 4. VerifyESIMEC_v2 5. VerifyNonESIMEC_v3 6. VerifyFTB540Income_v1 7. VerifyCurrentIncome_v1 8. EmployeeIncome_v2 9. AIM_v1 10. PollFTBHCSOutbound_v1
	General Requirement		

Category	Sub Category	Req ID	Requirement
Architecture	General Requirement	46863	Fuse FDSH related services should perform below operations 1. Accept the request received from source/invoking system. 2. Validate the request received against the schema configured. 3. Log the request payload in the Interface_Log table. 4. Invoke the Hub service. 5. Log the response payload in the Interface_Log table. 6. Respond back with the payload.
Architecture	General Requirement	46864	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall migrate the MEDS transaction related OSB services to Red Hat Fuse
Architecture	General Requirement	46865	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall migrate all the below OSB services to Red Hat Fuse. 1. GetMEDSCreateApplicationInterfaceEvents_v2 2. GetMEDSCreateEligibilityInterfaceEvents_v2 3. IdentifyMember_v3 4. EligibilityService_v3 5. MEDSInterfaceEvents_v1 6. PollMEDSInterfaceEvents_v1
Architecture	General Requirement	46866	Fuse MEDS related services shall perform below operations 1. Accept the request received from source/invoking system. 2. Validate the request received against the schema configured. 3. Log the request payload in the Interface_Log table. 4. Invoke the Hub service. 5. Log the response payload in the Interface_Log table. 6. Respond back with the payload.
Architecture	General Requirement	46867	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall migrate the below common OSB services to Red Hat Fuse, which are primarily used for logging the payloads into the log tables. 1. LoggingService_v1 2. IRSLoggingService_v1 3. IRSResponseLoggingService_v1
Architecture	General Requirement	46868	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall migrate the VIED related SOA services to Red Hat Fuse
Architecture	General Requirement	46869	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall migrate all the below VIED related SOA services to Red Hat Fuse. 1. VIEDService 2. VIEDVerifyAnnualHouseHoldIncome 3. VIEDVerifyNonESIMECBPEL 4. VerifyESIMEC 5. VIEDInquireMember 6. VIEDIRSLoggingService 7. VIEDLoggingService
Architecture	General Requirement	46870	Fuse VIED related services should perform below operations 1. Accept the request from LightWeights 2. Logg the request in the log table 3. Read and transform the request paylaod 4. Invoke the verifications services/cache tables paralelly with the respective transformed payloads, based on the indicators received from LightWeights. 5. Club the responses received from all the verification sources and build OPA request file. 6. Log the OPA request file and invoke OPA endpoint. 7. Log the response receievd from OPA in logging table. 8. Transform the OPA response payload into VIED response payload and respond back to the LightWeights.
Architecture	General Requirement	46871	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall migrate the AIM related SOA services to Red Hat Fuse
Architecture	General Requirement	46872	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall migrate all the below AIM related SOA services to Red Hat Fuse. 1. BEPLAIM 2. BEPLAIMSSAComposite
Architecture	General Requirement	46873	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall migrate the RRV/PVC payload generation related SOA services to Red Hat Fuse

Category	Sub Category	Req ID	Requirement
Architecture	General Requirement	46874	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall migrate all the below RRV/PVC payload generation related SOA services to Red Hat Fuse. 1. DSH_Payload_creation 2. VCI_RVV_Payload_Creation 3. Medicare_RVV_Payload_Creation
Architecture			Fuse RRV/PVC payload generation related services should perform below operations 1. Based on the request received, read the records from the RRV/PVC request tables. 2. Based on the mock rules, build the mock file by using transformation file. 3. Place the mock file in the SFTP location. 4. Respond back with the status of file generation
Architecture			California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall conduct regression, system, integration, security and performance testing for Fuse services using the container based deployment architecture
Architecture	General Requirement	46877	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) should update the B&D scripts to provide deployment capabilities for container based deployment architecture
Architecture	Interfaces		
Architecture	Interfaces	49148	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall implement a mechanism to control the flow of CalSAWS Case Search requests, ensuring California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) system stability and preventing performance degradation during transaction spikes.
Architecture	Non-Functional Requirement		
Architecture	Non-Functional Requirement	45886	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall provision infrastructure and software for production and non-production environments for developing Drools rule engine services using the container based deployment architecture.
Architecture	Non-Functional Requirement	45887	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall update the build and deployment scripts to provide deployment capabilities for Drools rule engine artifacts.
Architecture	Non-Functional Requirement	45888	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall migrate the Oracle Policy Automation (OPA) policies to Red Hat's Drools based policies.
Architecture	Non-Functional Requirement	45889	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall migrate all the OPA rules present in Word files and Excel spreadsheets, including HBX OPA spreadsheets, to corresponding Drools artifacts while retaining functional equivalency to the existing OPA rules.
Architecture	Non-Functional Requirement	45890	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall replace the application's OPA integrations with Drools
Architecture	Non-Functional Requirement	45891	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall replace existing OPA integrations corresponding to the 4 checkpoints in the portal with Drools integration
Architecture	Non-Functional Requirement	45892	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall replace OPA integrations in SOA service that supports ONLINE, BATCH and SAWS eligibility determinations.
Architecture	Notices		
Architecture	Notices	43321	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall build a SAWS configurable dual architecture.
Architecture	Notices	45246	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) system shall separate Notice Triggering logic from other post-eligibility processing into a separate service.
Architecture	Web Portal Online Help		
Architecture	Web Portal Online Help	38802	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) system shall have portal pages associated with "Secure Mailbox" functionality migrated to React based framework.
Assister Portal	Assister Management		
Assister Portal	Assister Management	46218	Organization Setup - Agent Admin Provision - Entity Admin Provision - SSO
Assister Portal	Assister Management	46220	New Agency Onboarding - Internal - Review pending Agency Application - Check CDI Information - Payments - LMS Training - DocuSign - Approve Application - Deny Application

Category	Sub Category	Req ID	Requirement
Assister Portal	Assister Management	46222	New Entity Onboarding - Internal - Review pending Entity Application - LMS Training - Background Check - Review Documents - Approve Application - Deny Application
Assister Portal	Assister Management	46223	Add Users - Agency: AS add AM1, AS add A2, AS add A1, AS add AAS2, AS add AAS1, AM2 add AM1, AM2 add A2, AM2 add A1, AM2 add AAS1, AM2 add AAS2, AM2, AM1 add AM1, AM1 add A2, AM1 add A1, AM1 Add AAS1, AM1 add AAS2, AAS2 add A1, AAS2 add A2 - Entity: PC add CEC/CAC, PC add PBE, PC add MMCPE,
Assister Portal	Assister Management	46224	Add Users - Contract - Learning + Certification Exam - User Complete Profile Creation - Attestations
Assister Portal	Assister Management	46225	Add Agent - Agent Admin Review - Review Pending User Application - Check CDI Information - Send Payment Portal Envelope - DocuSign - Deny User
Assister Portal	Assister Management	46226	Add AAS - Agent Admin Review - Review Pending User Application - LMS Training - AAS Background Check - Approve User - Deny User
Assister Portal	Assister Management	46227	Add Users - Entity Admin Review - Review Pending User Application - LMS Training - Contracts/Documents - Approve User - Deny User - CEC/CAC Badges - User Complete Profile Creation
Assister Portal	Assister Management	46228	Enroller List - Agency Enroller List - Community View - Agency Enroller List - Admin View - Entity Enroller List - Community View - Entity Enroller List - Admin View
Assister Portal	Assister Management	46229	Agency/Entity List - Agency List - Admin View - Entity List - Admin View - View My Agency/Entity Profile
Assister Portal	Assister Management	46230	Edit Agency/Entity Profile - Agencies - Admin/AFR/SCRL/SCR - Entities Admin/NR/SCRL/SCR - Authorized Signer - Agency Manager L1/2 - AAS2 - Primary Contact - Change Legal Business Name - SSN to FEIN Change
Assister Portal	Assister Management	46231	Edit My Profile - AS, AM2, AM1, A2, A1, AAS1, AAS2 - PC, CEC/CAC/CEE, PBE, MMCPE

Category	Sub Category	Req ID	Requirement
Assister Portal	Assister Management	46232	Edit Other User's Profile - Agent Admin edit AS/AM1/AM2/A1/A2/AAS2/AAS1 - AS edit AM1/A1/A2/AAS2/AAS1 - AM1 edit AM1/A1/A2/AAS2/AAS1 - A2 edit A2/A1 - AAS2 edit A2/A1 - Entity Admin edit PC, AC, CEC/CAC, MMCPE, PBE - PC Edit CEC/CAC/PBE/MMCPE
Assister Portal	Assister Management	46233	View Other User's Profile - Agent Admin view AM2/AM1/AS/A1/A2/AAS2/AAS1 - AS view AM2/AM1/AS/A1/A2/AAS2/AAS1 - AM2 view AM2/AM1/AS/A1/A2/AAS2/AAS1 - AM1 view AM2/AM1/AS/A1/A2/AAS2/AAS1 - A2 view AM2/AM1/AS/A1/A2/AAS2/AAS1 - A1 view AM2/AM1/AS/A1/A2/AAS2/AAS1 - AAS2 view AM2/AM1/AS/A1/A2/AAS2/AAS1 - AAS1 view AM2/AM1/AS/A1/A2/AAS2/AAS1 - Entity Admin view PC, AC, CEC/CAC, MMCPE, PBE - PC view CEC/CAC/PBE/MMCPE - CAC view CEC/CAC/PBE/MMCPE - PBE view CEC/CAC/PBE/MMCPE - MMCPE view CEC/CAC/PBE/MMCPE
Assister Portal	Assister Management	46234	Consumer Information (Admin) - Agencies BoB View – Admin/AFR/SCRL/SCR - Entities BoB View – Admin/NR/SCRL/SCR - Admin/AFR/SCRL/SCR edit Consumer Info in HBX - Admin/NR/SCRL/SCR edit Consumer Info in HBX
Assister Portal	Assister Management	46235	Consumer Information - Agency BoB View – AM2/AM1/A2/AAS2 - Entity BoB View - PC - Agent BoB View – AM2/AM1/A2/A1 - Enroller BoB View – CEC/CAC/PBE/MMCPE - Edit Consumer Info in HBX – AM2/AM1/A2/A1 - Edit Consumer Info in HBX – CEC/CAC/PBE/MMCPE - Start Consumer App in HBX – AM2/AM1/A2/A1/AAS1/AAS2 - Start Consumer App in HBX – CEC/CAC/PBE/MMCPE
Assister Portal	Assister Management	46236	Delegations (Admin) - View All Pending Requests: Admin/AFR/SCRL/SCR - View All Pending Requests: EAdmin/NR/SCRL/SCR - Transfer delegations: Admin/AFR/SCRL/SCR - Transfer delegations: Admin/NR/SCRL/SCR

Category	Sub Category	Req ID	Requirement
Assister Portal	Assister Management	46237	Delegations - View My Agency's Pending Requests: AM2/AM1/A2/AAS2/AAS1 - View My Entity's Pending Requests: PC - View My Pending Requests: AM2/AM2/A2/A1 - Requests: CEC/CAC/PBE/MMCPE - Accept Pending Requests: AM2/AM1/A2/A1/AAS2/AAS1 - Accept Pending Requests: CEC/CAC/PBE/MMCPE - Decline Pending Requests: AM2/AM1/A2/A1/AAS2/AAS1 - Decline Pending Requests: CEC/CAC/PBE/MMCPE - Self Delegation Tool - AM2/AM1/A2/A1/AAS1/AAS2 - Self Delegation Tool - CEC/CAC/PBE/MMCPE - Approve Transfer to another Agency: AM2/AM1 - Approve Transfer to another Entity: PC - Transfer Delegation within my Agency: AM2/AM1/A2/AAS2 - Transfer Delegation within my Entity: PC - Revoke any Delegation within my Agency: AM2/AM1/A2/AAS1/AAS2 - Revoke my Delegation: AM2/AM1/A2/A1 - Revoke any Delegation within my Entity: PC - Revoke my Delegation: CEC/CAC/PBE/MMCPE
Assister Portal	Assister Management	46238	Delegation History - View any Agent's Delegation History within my Agency: AM2/AM1/AAS1/AAS2 - View any Enroller's Delegation History within my Entity: PC - View my delegation history: AM2/AM1/A2/A1/CEC/CAC/PBE/MMCPE - View any Agent's Delegation History: Admin/AFR/SCRL/SCR - View any Entity Enroller's Delegation History: Admin/NR/SCRL/SCR
Assister Portal	Assister Management	46239	Organizatio Setup - Distribution Services Permission - ASC Lead Permission - ASC Permission - Agent Field Rep Permission - Navigator Field Rep Permission
Assister Portal	Assister Management	46240	Terminated Vested - AM2 Quitting/Retiring - Primary Contact Quitting/Retiring - Downline AM1/A2/A1/CE/CEC/CAC/PBE/MMCPE Quitting or Retiring - Remove user login access - Transfer BoB
Assister Portal	Assister Management	46241	Terminated for Cause - (Agency) CDI License Expired - Certification Expired (Annual) - Other - Remove user login access - Transfer BoB
Assister Portal	Assister Management	46242	Deceased - AM2 Deceased - Primary Contact Deceased - Downline AM1/A2/A1/CEC/CAC/PBE/MMCPE Deceased or Retiring - Remove user login access - Transfer BoB
Assister Portal	Assister Management	46243	Salesforce Alerts - Secure Mailbox - Pending Delegation
Assister Portal	Assister Management	46244	Emails - Onboarding Email Templates
Assister Portal	Assister Management	46245	Location Services - SmartyStreets

Category	Sub Category	Req ID	Requirement
Assister Portal	Assister Management	46246	eLearning Integration - LMS - Recertification
Assister Portal	Assister Management	46247	HBX/PCAP Integration - HBX - BoB Integration - Manage Delegates Page - Consumer Request Delegation - Consumer Revoke Delegation
Assister Portal	Assister Management	46248	Public Site - Find Local Help - Find Local Help Spanish
Assister Portal	Assister Management	46979	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall create a related list on Lead profiles to identify duplicate profiles existing within the system.
Assister Portal	Assister Management	46980	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall add Federal Poverty Level percentage to the Enroller Portal Book of Business.
Assister Portal	Assister Management	46981	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall make English the default language in multi-select picklists for Enroller portal applications and downline profile forms.
Assister Portal	Assister Management	46982	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall include a summary of estimated number of Individuals served for each Location
Assister Portal	Assister Management	46983	CalHEERs shall include a spoken languages summary at the Account level for Agency and Entity Accounts.
Assister Portal	Assister Management	46984	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall allow Agent and Entity Admins to update Certification/Approval Date for Contacts.
Assister Portal	Assister Management	46985	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall allow Entity Admins to bulk send Counselor agreements for Contacts and Leads.
Assister Portal	Assister Management	46986	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall allow Entity Admins to bulk send Entity agreements for Leads
Assister Portal	Assister Management	46987	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall update the Onboarding Email for newly Approved Entities to add more details related to next steps for Primary/Authorized Contacts and Counselors.
Assister Portal	Assister Management	46988	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall allow Internal Salesforce users to see historical information for Location.
Assister Portal	Assister Management	46989	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall display Hours of Operation for Agencies in Find Local Help.
Assister Portal	Assister Management	46990	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall allow internal Salesforce users to send targeted prompts and notifications to Enroller Portal users (Agent Alerts and Community Partner Alerts).
Assister Portal	Assister Management	46991	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall add the NMA Contract Number and MA Contract Number fields to the Contact Object and Agency Manager, Authorized Signer and Agent page layouts to drive the NMA and MA DocuSign Contracting processes.
Assister Portal	Assister Management	46992	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall streamline DocuSign fields in Agency Lead, Contact, and Account page layouts
Assister Portal	Assister Management	46993	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall restrict all internal users from editing Criminal Record Disclosure forms.
Assister Portal	Assister Management	46994	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall display a list view or a report for Lead Applications whose Criminal Record Disclosures are outstanding.
Assister Portal	Assister Management	46995	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall display a list view of Lead Applications whose Criminal Record Disclosures are submitted.
Assister Portal	Assister Management	46996	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall have the ability for an Agency Manager Level 2 choose to be changed to an Agent Level 1 or Agent Level 2 when adding a new MA holder to the Agency
Assister Portal	Assister Management	46997	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall have the ability for an Agency Manager Level 2 to change role to an Agent Level 1 or Agent Level 2
Assister Portal	Assister Management	46998	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall have the ability for an Approved Admin Staff Level 1 to change role to an Approved Admin Staff Level 2 (and vice versa)
Assister Portal	Assister Management	46999	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall add further filtering options for Bulk Certification/Approval Status Updates page.
Assister Portal	Assister Management	47000	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall only allow monetary contract holders whose version number includes “IFP Only” to make updates to their mailing address.
Assister Portal	Assister Management	47895	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall add Strike Lockout Subsidy to Salesforce Consumer Contact related Object.
Assister Portal	Assister Management	47896	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall add Strike Lockout Subsidy to BoB report
Assister Portal	Assister Management	47897	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall push the Strike Lockout Subsidy from HBX to the Enroller Portal when a user accesses the Get Real Time Consumer Information button.
Assister Portal	Assister Management	47898	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall update the Enroller Portal with the Strike/Lockout Subsidy amount during the nightly Data Warehouse incremental load.
Assister Portal	Assister Management	47899	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall add California Premium Credit Subsidy to Salesforce Consumer Contact related Object.
Assister Portal	Assister Management	47900	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall add California Premium Credit Subsidy to BoB report
Assister Portal	Assister Management	47901	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall push the California Premium Credit Subsidy from HBX to the Enroller Portal when a user accesses the Get Real Time Consumer Information button.
Assister Portal	Assister Management	47902	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall update the Enroller Portal with the California Premium Credit Subsidy amount during the nightly Data Warehouse incremental load.

Category	Sub Category	Req ID	Requirement
Assister Portal	Assister Management	47903	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall automatically transfer an Agent Level 1 or Agent Level 2 consumer delegations to the Agency's AM1 or AM2 when an Agent Admin updates an Agent's Certification/Approval Status to 'Terminated'.
Assister Portal	Assister Management	47904	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall automatically transfer an Agent Level 1 or Agent Level 2 consumer delegations to the Agency's AM1 or AM2 when an Agent Admin updates an Agent's Certification/Approval Status to 'Deceased'.
Assister Portal	Assister Management	48299	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall create a new Agency Manager 2 role in HBX
Assister Portal	Assister Management	48300	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall map existing Agency Manager 2 in Salesforce to HBX
Assister Portal	Assister Management	48301	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall update a users role in HBX after role conversion is performed in Salesforce.
Assister Portal	Assister Management	48302	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall display or hide the Enroller Primary Location address on Find Local Help by adding a flag in HBX, and SF will always auto-populate OtherAddress with the Enroller Primary Location address regardless of the flag.
Assister Portal	Assister Management	48303	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall allow for the creation of user accounts with the same personal information for multi-affiliated Enroller Portal users at different organizations with the same record type.
Assister Portal	Assister Management	48304	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall allow enrollers to have both an Enroller Portal user account and Consumer accounts.
Assister Portal	Assister Management	48571	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall not display Enrollers in Find Local Help that do not have the California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) Username populated in their Salesforce Contact record.
Assister Portal	Assister Management	48572	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall apply flag to record when SmartyStreet API/Lightweight service does not provide a response
Assister Portal	Assister Management	48573	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall display the "Unable to Validate Address" message when SmartyStreet API/Lightweight service does not provide a response
Assister Portal	Assister Management	48574	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall apply flag to record when Enroller selects original address instead of one of the Smarty Street recommended addresses.
Assister Portal	Assister Management	48575	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall display the number of unread messages in HBX secure mailbox on the Enroller Portal
Assister Portal	Assister Management	48709	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall implement an On/Off switch in the Salesforce custom metadata to allow System Admins to turn OFF the Secure Mailbox message count functionality when there is a need to improve performance.
Assister Portal	Assister Management	48710	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall add a BOT Broker user checkbox on the Contact and Account Object to differentiate external BOT Broker users from standard Enroller Portal users and exclude BOT Broker users with this checkbox checked from the API that supports the Secure Mailbox message count functionality.
Assister Portal	Assister Management	48711	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall add a Spinner to the Quick Links component which will appear until the data load is complete to alert the user that their Secure Mailbox message count is being calculated.
Assister Portal	Assister Management	48827	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall update Salesforce to allow the Agent and Entity Admin team to update Delegation Start Date on a Consumer's Case
Assister Portal	Assister Management	48828	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall allow creation of PBE account for the same user who already has an Issuer (IER, IR) account in California Healthcare Eligibility, Enrollment and Retention System (CalHEERS)
Assister Portal	Assister Management	48829	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall allow creation of IER and IR accounts for the same user who already has a PBE account in the Salesforce.
Assister Portal	Assister Management	48830	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall allow users enter a valid United States zip code on the Find Local Help pages for Agents and Counselors.
Assister Portal	Assister Management	48831	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall update the Zip Code label on Find Local Help pages for Agents and Counselors from 'Zip Code' to 'Your ZIP Code'
Assister Portal	Assister Management	48832	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall change the default Distance on Find Local Help pages for Agents and Counselors from '5' to 'ANY'.
Assister Portal	Assister Management	48833	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall allow Distribution Service/Agent Admin/Entity Admin to create new delegation requests.
Assister Portal	Assister Management	48834	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall allow Distribution Service/Agent Admin/Entity Admin to create multiple new delegation requests.
Assister Portal	Assister Registration		
Assister Portal	Assister Registration	46219	New Agency Onboarding - AM2 Submit Agency Application - AS Submit Agency Application - Complete Agency Manager Information - Complete AS Information - Pending Agency Application - Add Downline Agent Information - Pending Downline Agent Information
Assister Portal	Assister Registration	46221	New Entity Onboarding - PC Submit CEC Application - PC Submit CAE Application - Complete PC Information - Pending Entity Application - Add Downline CEC/CAC Information - Pending Downline CEC/CAC Information
Assister Portal	Assister Registration	46558	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall have the ability for Agent Admin/Entity Admin to submit new leads to onboard a new Agency/Entity from the Internal Salesforce Portal.

Appendix A-4 - SOW Exhibit A - System Requirements Specification
(Extracted from CalHEERS RTM)

Category	Sub Category	Req ID	Requirement
Assister Portal	Assister Registration	46559	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall have the ability for Agent Admin/Entity Admin to submit new leads for adding Enrollers (AM1, A1/2, Counselors) and Staff (AS, AAS1/2, PC, AC) to Certified/Approved Agency and Entity from the internal Salesforce portal
Assister Portal	Assister Registration	46560	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall have the ability for Approved Primary Contact (PC)/Authorized Contact (AC) to add an additional PC/AC to certified Entity from Enroller Portal.
Assister Portal	Assister Registration	46561	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall have the ability for an Entity Admin to send an updated Counselor Agreement to a Certified Enroller using a new Send Counselor Agreement button.
Assister Portal	Assister Registration	46562	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall have the ability for Internal Users to capture the following: ATI Number, Criminal Record Disclosure Completion Date, NLI checkbox, and NLI Completion Date.
Assister Portal	Assister Registration	46563	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall have the ability for Agent/Entity Admin to update all address fields on any Object from Internal Salesforce Portal
Assister Portal	Assister Registration	46564	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall have the ability for Agent Admin to capture the E&O Expiration Date.
Assister Portal	Assister Registration	46565	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) should not allow Agent Level 1s to see other Agent profiles within the Agency's roster.
Assister Portal	Assister Registration	46697	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall have the ability for Agent Admin/Entity admin to bulk Suspend and Re-Certify Agency/Entity Staff and Enroller's Certification/Approval Status.
Assister Portal	Assister Registration	46698	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall have the ability to send bulk suspension/recertification status updates for Agency and Entity staff members from Salesforce to HBX.
Assister Portal	Assister Registration	46699	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall display a warning message when Agent Admin/Entity Admin selects an Enroller with active delegation for bulk suspension.
Assister Portal	Assister Registration	46700	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall include a CCSB checkbox on the Agency application.
Assister Portal	Assister Registration	46701	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall allow an Agency Manager Level 2 and an Authorized Signer to add an Authorized Signer to an existing Agency.
Assister Portal	Assister Registration	46702	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall allow an Authorized Signer to add an Agency Manager Level 2 to an existing Agency.
Assister Portal	Assister Registration	46703	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall prompt the enroller to correct their data if they have more than one Site Served marked as an Enroller's primary location.
Assister Portal	Assister Registration	46704	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall have the ability for Agency Managers to be converted to Agents (and vice versa) regardless of level.
Assister Portal	Assister Registration	46705	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall accommodate a code change that will invoke a security update within ForgeRock to allow Agent Level 1, Agent Level 2, and Agency Managers to change roles within the HBX system.
Assister Portal	Assister Registration	46706	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall implement a checkbox to allow applicants to choose whether their Location address should appear in Find Local Help results.
Assister Portal	Assister Registration	46707	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall modify Enroller Portal search result columns by removing: Contact Owner Alias and Certification/Approval Status and adding California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) Case/Application ID, Case Status, Application Status, and Date of Birth.
Assister Portal	Assister Registration	46708	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall add 2 new fields (Case Status and Application Status) on the Consumer Contact Object.
Assister Portal	Assister Registration	46709	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall update Case Status and Application Status for individual Consumer Contacts on an incremental basis.
Assister Portal	Assister Registration	46710	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall update Case Status and Application Status for all historical records in Salesforce on the Consumer Contact Object with the latest individual values.
Assister Portal	Assister Registration	46711	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall add the following columns to the Account list for the Global Search feature: FEIN, Agency Certification/Approval Status, Agency/Entity Name, Role, Name of the AM2 or AS, Agency License Number, Account Record Type
Assister Portal	General Requirement		
Assister Portal	General Requirement	46942	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall updated Company Name to Legal Business name for DocuSign Templates.
Assister Portal	General Requirement	46943	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall update error message on Lead so that it does not state the user must verify Secretary of State fields in order to certify an enroller, and only make Secretary of State fields required for Corporate Agency Leads/Accounts.
Assister Portal	General Requirement	46944	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall update the functionality of the Cancel button on the add subsite flow to prevent a subsite from being saved.
Assister Portal	General Requirement	46945	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall display a customized maintenance page when there is an Enroller Portal deployment with no HBX inteference.
Assister Portal	General Requirement	46946	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall allow Enroller Portal users to search amongst Active Delegations for a specific case (by Name, Application , SSN , DOB, or case number)
Assister Portal	General Requirement	46947	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall update error messages and bell notifications to display specific wording based on the role or the action the user is performing.
Assister Portal	General Requirement	46948	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall track contract status changes on Agency Staff DocuSign Status related list
Assister Portal	General Requirement	46949	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall update the DocuSign Status related list view columns
Assister Portal	General Requirement	46950	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall create a report for DocuSign Status grouped by Agency – Active and Inactive
Assister Portal	General Requirement	46951	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall allow enroller portal users to remove a site served location and track whether locations are active or inactive.
Assister Portal	General Requirement	46952	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall update the OtherAddress field when the Enroller Primary Location is updated on the Contact object.
Assister Portal	General Requirement	46953	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall display a warning message for the Agent Admin notifying them that attempting to change the Legal Business Name or Federal Tax ID will display a warning message of the fields that will be changed with this action.
Assister Portal	General Requirement	46954	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall implement a new button on the internal and external Lead, Contact, and Agency/Entity (Account) records to launch a custom file upload component.

Category	Sub Category	Req ID	Requirement
Assister Portal	General Requirement	48418	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall display the next benefit year in the Year Dropdown and enable Issuer Enrollment Representatives to search for and view enrollments for the next benefit year as soon as Renewals begins.
Assister Portal	General Requirement	48419	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall update the message displayed to Issuer Admins, Issuer Representatives, and Issuer Enrollment Representatives on the My Profile Page to prevent navigation to the Consumer Portal.
Audit Support			
Audit Support	Case Management		
Audit Support	Case Management	38268	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall have an ROP transaction definition in the Transaction History Table.
Audit Support	General Requirement		
Audit Support	General Requirement	42913	FGA audit records will be retained online for 90 days and offline for 7 years.
Audit Support	General Requirement	42914	Application log data will be retained and available online for 60 days and moved offline in line with retention policy.
Audit Support	General Requirement	44309	The Vendor shall actively participate and assist Exchange auditors in conducting annual audits. The Vendor shall work collaboratively with these auditors and provide complete and accurate information and Documentation in a timely manner.
Audit Support	General Requirement	45142	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall provide the automated functionality to log and audit all changes to the business information.
Audit Support	General Requirement	45143	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) audit trails shall have the flexibility and scalability to monitor all application, data, security and System events and internal and external user activity.
Audit Support	General Requirement	45435	The Vendor shall maintain records and supporting documentation under audit or involved in litigation for a period of three (3) years, or as directed the Exchange following the conclusion of the litigation or audit and the date that the Exchange submits the last expenditure report to the Federal Department of Health and Human Services (DHHS). The Vendor shall verify this period with the Exchange prior to storing any confidential information.
Audit Support	General Requirement	45436	The Vendor shall conduct monthly physical security audit of selected requirements to ensure HIPAA compliance.
Audit Support	General Requirement	45437	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall implement PHI access audit capability (e.g. monitor PHI received, access, and purpose for use).
Audit Support	General Requirement	45438	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall provide audit reports to the Exchange for the purpose of tracking users and associated security groups, roles, settings, passwords, and duplicate IDs.
Audit Support	General Requirement	45439	The Vendor shall ensure that Exchange's third-party auditors shall have security access at the Vendor's Facility as authorized in writing by Exchange.
Audit Support	General Requirement	45440	The Vendor shall provide written explanation, cause, resolution, and timeframe for correction of the any audit discrepancies.
Audit Support	General Requirement	45441	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall have the capability to configure the frequency and content of security audit reports.
Audit Support	General Requirement	45446	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall provide the automated functionality to log and audit all changes to the business information.
Audit Support	General Requirement	45455	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall log and examine System activity in accordance with audit policies and procedures adopted by the Exchange, State and federal healthcare agencies.
Audit Support	General Requirement	45456	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) audit trails shall have the flexibility and scalability to monitor all application, data, security and System events and internal and external user activity.
Audit Support	General Requirement	45457	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) application-level audit trails shall monitor and log user and System activities, including data files opened and closed, specific actions (e.g., reading, editing, and deleting records or fields), and printing reports.
Audit Support	General Requirement	45458	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall have the capability to provide the following program checks: A) Record counts B) Total records C) Limit checks D) Dollar totals
Audit Support	Monitor Compliance		
Audit Support	Monitor Compliance	38608	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall acquire a renewal for AirMagnet software.
Audit Support	Reports		
Audit Support	Reports	38866	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall create a report that tracks issuer contractual timeliness and accuracy as evidenced by the 834 transactions.
Audit Support	Reports	38867	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall be able to provide Total number of outbound 834 transactions specific to a benefit year where Exchange successfully received TA1 and/or 999 file from issuer within 3 business days
Audit Support	Reports	38868	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall be able to provide Total number of effectuation and cancellation notices received from issuer for a benefit year
Audit Support	Reports	38869	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall be able to provide Total number of enrollment responses (effectuations and cancellations) for the a benefit year where Exchange received notice within 60 days of coverage effective date or transaction timestamp
Audit Support	Reports	38870	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall be able to provide Total number of termination notices (for non-payment terminations only) received from issuer for the a benefit year
Audit Support	Reports	38871	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall be able to provide Total number of termination notices (for non-payment terminations only) for the a benefit year received from the issuer within 10 days of expiration of the applicable grace period (30 days for non-APTC and 3 months for APTC)
Audit Support	Reports	38873	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall be able to provide the total number of outbound 834 transactions specific to a benefit year sent by Exchange to issuer

Category	Sub Category	Req ID	Requirement
Audit Support	Reports	39105	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) analytics solution shall provide a summary metrics view from which plan management end users may assess issuer contractual timeliness and accuracy as evidenced by the 834 transactions
Audit Support	Reports	39106	The analytics solution shall provide the plan management end user with the means to drilldown into the transactional data for the purposes of understanding metric counts through association with transactional data
Audit Support	Reports	39107	The analytics solution shall be able to extract/process large source data volume.
Audit Support	Reports	39108	The analytics solution shall have the potential for more curated metrics and reports.
Backup/Recovery			
Backup/Recovery	General Requirement		
Backup/Recovery	General Requirement	40453	Post implementation of R21.2, California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) will backup HBX database (excluding non-customer FTB data) to AWS
Backup/Recovery	General Requirement	44031	The Vendor shall provide a Primary Data Center (PDC) Site Facility and Backup Data Center (BDC) Site Facility that meet the Uptime Institute Tier III – Concurrently Maintainable Site Infrastructure requirements. The State encourages the Vendor to provide Facilities that comply with U.S. Building Council Leadership in Energy and Environmental Design (LEED) requirements for a Silver rating.
Backup/Recovery	General Requirement	44032	The Vendor shall demonstrate the execution of the disaster recovery/business continuity plan for all critical System components at a remote site once during the first year after initial system go-live and annually thereafter. The demonstration at the remote site shall be performed for all functions.
Backup/Recovery	General Requirement	44033	The Vendor shall be responsible to perform the disaster recovery / business continuity plan demonstrations at no additional cost to the Exchange. A successful demonstration, as determined by the State, shall be considered a key decision criteria factor for Implementation/Go-Live. Failure to successfully demonstrate the procedures may be considered grounds for termination of this contract. The Exchange reserves the right to waive or defer part or all of the demonstrations. In the event the Vendor's demonstration is deemed by the Exchange to be unsuccessful, the Vendor shall continue to perform the demonstration until satisfactory to the Exchange, at no additional cost.
Backup/Recovery	General Requirement	44117	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall have sufficient redundancy and modularity to prevent down time due to failure of any single component or part of a component fails.
Backup/Recovery	General Requirement	45447	The Vendor shall develop and maintain a business resumption plan for recovering from a service outage at the PDC Facility and/or Backup Facility.
Backup/Recovery	General Requirement	45459	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall provide Real Time Replication of Data from the Production location to the backup location. All data shall be synchronized in real time in order to minimize recovery periods.
Backup/Recovery	General Requirement	45462	The Vendor shall provide a Backup Facility that replicates the PDC data and provide compute capacities for disaster recovery purposes.
Backup/Recovery	General Requirement	45694	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) Technology Refresh - Oracle to RDS Aurora PostgreSQL Database - Security- Auditing
Backup/Recovery	General Requirement	45695	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) will define the events to be audited. The events to be audited are accepted and approved by the Authorizing Official
Backup/Recovery	General Requirement	45696	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) system shall be audit User log-on and log-off (successful or unsuccessful) in database
Backup/Recovery	General Requirement	45697	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) system shall be audit modification of privileges and access on database
Backup/Recovery	General Requirement	45698	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) system shall be audit start up and shut down of database
Backup/Recovery	General Requirement	45699	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) system shall be audit account creation, modification, or deletion
Backup/Recovery	General Requirement	45700	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) system shall be audit read access to sensitive information
Backup/Recovery	General Requirement	45701	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) system shall be audit modification to sensitive information
Backup/Recovery	General Requirement	45702	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) system shall be audit successful and unsuccessful attempts to create, read, write, modify, and/or delete extracts containing PII from a database or data repository
Backup/Recovery	General Requirement	45703	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) system shall be audit privileged activities or system level access to PII
Backup/Recovery	General Requirement	45704	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) system shall be audit concurrent logons from different workstations - excluding service accounts
Backup/Recovery	General Requirement	45705	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) system shall be audit administrator activities
Backup/Recovery	General Requirement	45706	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) system shall be audit override of access control mechanisms
Backup/Recovery	General Requirement	45707	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) system shall be generates audit records containing information that specifies: a. Date and time of the event; b. Component of the information system (e.g., software component, hardware component) where the event occurred; c. Type of event; d. User/subject identity; e. Outcome (success or failure) of the event; f. Execution of privileged functions; and g. Command line (for process creation events). all Process creation events for Interactive or not interactive command
Backup/Recovery	General Requirement	45708	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) Technology Refresh - Oracle to RDS Aurora PostgreSQL Database - Security- ACCESS CONTROL
Batch			
Batch	Application Submission and Update		
Batch	Application Submission and Update	45472	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall automatically expire incomplete applications saved but not completed within 30 calendar days if the application initiation date falls outside of the Open Enrollment period.
Batch	Application Submission and Update	45473	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall automatically expire incomplete applications the date after Open Enrollment ends if the 30th day after the application initiation date falls within the Open Enrollment period.

Category	Sub Category	Req ID	Requirement
Batch	Assister Management		
Batch	Assister Management	39759	The system shall generate an EDI 834 transaction to the Carrier for the impacted enrollment records when the Agent Admin Team updates Agent information in the Broker Admin Portal.
Batch	Case Management		
Batch	Case Management	38247	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall have an automated process to identify consumers that are conditionally eligible for CCP/APTC/CSR programs due to verification inconsistencies for at least 1 of the following attributes: - Citizenship - Lawful Presence - Incarceration - Deceased
Batch	Case Management	38772	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) system shall have an automated process to identify consumers that are conditionally eligible for APTC, CSR, (CCP not included) programs due to verification inconsistencies for at least 1 of the following attributes that is added to the existing list of verification: - Household Income - Subsidy
Batch	Disenrollment		
Batch	Disenrollment	38601	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System must provide the functionality to flag the records within the weekly data files provided by the SAWS as defined below: - California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) will flag ""4"" for the records known to California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) and SAWS; - California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) will flag ""1"" for the records known to California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) but not in SAWS; - California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) will flag ""2"" for the records known to SAWS but not in California Healthcare Eligibility, Enrollment and Retention System (CalHEERS).
Batch	Disenrollment	38650	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System must provide the functionality to apply a data fix to the records flagged with the number "4" to inactivate the California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) cases in the weekly data files provided by the SAWS.
Batch	Disenrollment	38651	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System must provide the functionality to populate the MEDS code "P" in the data for Bucket #1 (Canceled Determination Eligibility Response [DERs] from SAWS).
Batch	Disenrollment	38652	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System must provide the functionality to consume the denial or discontinuance reason code to populate appropriate case comments as defined in the "Bucket Specific Description in California Healthcare Eligibility, Enrollment and Retention System (CalHEERS)" table in CR 33806.
Batch	Disenrollment	38653	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System must provide the functionality to flag the records that are not successfully processed with "3
Batch	Disenrollment	38655	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System must provide the functionality to stage the file in the California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) SFTP server for SAWS and MEDS retrieval.
Batch	EDI Validations		
Batch	EDI Validations	42374	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall submit health enrollment records for effectuated, cancelled and terminated enrollments until CMS no longer requires records to be sent for that coverage year.
Batch	Eligibility Determination		
Batch	Eligibility Determination	38249	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall have an automated process to discontinue APTC/CSR/CCP program eligibility and enrollments due to expiration of consumer's reasonable opportunity period to resolve verification inconsistencies for: - Citizenship - Lawful Presence - Incarceration - Deceased
Batch	Eligibility Determination	38323	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) system shall update the RRV Batch to exclude unsubsidized applications.
Batch	Eligibility Determination	39688	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall perform a one-time data update for individuals with a tax filing status of Married Filing Jointly and a relationship of spouse, and does not have a spouse relationship with more than one individual, to create the tax filing status association of Married Filing Jointly. Eligibility will NOT be run after this one time data update.
Batch	Enrollment		
Batch	Enrollment	38295	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall obtain and store the benchmark premium amount during the enrollment process for unsubsidized applications.
Batch	Enrollment	43205	IRS reporting should begin using the new business rules implemented as part of this CR, which includes changes to financial amounts and corresponding effective dates
Batch	Enrollment	43206	There shall be a one-time data conversion for all 2015 enrollment data as part of this CR
Batch	Enrollment Dashboard		
Batch	Enrollment Dashboard	42377	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall provide an ability to run multiple instances of the batch to generate SBMI files for Coverage Year and HIOS ID combination.
Batch	Enrollment Dashboard	42378	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall store PBP data sent in SBMI files in Database tables.

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(Extracted from CalHEERS RTM)

Category	Sub Category	Req ID	Requirement
Batch	General Requirement		
Batch	General Requirement	37982	Pinnacle shall secure transfer Encrypted 1095 XLM report to California Healthcare Eligibility, Enrollment and Retention System (CalHEERS)
Batch	General Requirement	37983	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall unencrypt the file, and then re-encrypt he Pinnalce file using CMS certificates and upload to CMS via California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) IRS exisiting interface
Batch	General Requirement	37984	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall download CMS / IRS response files and unencrypt the file. CAIHEERS shall encrypt and secure transport CMS response to Pinnacle
Batch	General Requirement	38119	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall be updated to use the HHS ACA XML Library version 8.18 for Market Reporting.
Batch	General Requirement	38120	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall update the following: Within the Common folder and the IRS-CAC.xsd file: 1. Removed xmlns:xml=http://www.w3.org/XML/1998/namespace from the namespace declarations 2. Removed EmployeeCoverage data element 3. Added new element PersonAddressGrp with PersonAddressGrpType 4. Removed PediatricDentalPlanPremiumInd from AssociatedPolicyType 5. Added EmployeeShareOfPremiumForEmployerPlanAmt to EmployerMECType as OPTIONAL (minOccurs=""0) element 6. In HouseholdType changed AssociatedPolicy to OPTIONAL (minOccurs=""0) element 7. In InsuranceCoverageType removed PediatricDentalPlanPremiumInd 8. In InsuranceCoverageType added SLCSPPMonthlyPremiumAmt as OPTIONAL (minOccurs=""0) element 9. Added PersonAddressGrpType as a choice element between USAddressGrp and ForeignAddressGrp 10. In PersonInformationType replaced USAddressGrp with PersonAddressGrp
Batch	General Requirement	38121	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall update the following: Within the Common folder and the IRS-CBC.xsd file: 1. Added new element EmployeeShrPremForEmplrPlanAmt as AmountType 2. Removed InternalDocumentSystemFileNm element 3. Changed the version Effective Date of the ResponseCodeDescription element 4. Added new element SLCSPPMonthlyPremiumAmt as AmountType 5. Removed VersionEffectiveBeginDt attribute from the Timestamp element 6. Changed the type of the USStateCd from USStateCdType to StateType
Batch	General Requirement	38122	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall update the following: Within the Common folder and the IRS-SDT.xsd file: 1. Removed InternalDocumentSystemFileNameType 2. Replaced USStateCdType with StateType (US state code to accept all valid USPS state abbreviations including military and US territories)
Batch	General Requirement	38123	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall implement the new HHS-IRS-IndividualExchangePeriodicData.xml provided based on the new schema definitions.
Batch	General Requirement	38124	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall implement the new HHS-IRS-EPDIndividualErrorResponse.xml provided based on the new schema definitions.
Batch	General Requirement	38248	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall exclude consumers in an APTC Carry Forward Status (CFS) from the ROP Batch (with the CFS transition flag).
Batch	General Requirement	38641	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) executes queries to extract two datasets from their database. Each dataset is a CSV file that is zipped with password protection. California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) zips then loads the files to the DRU SFTP server for delivery to DHCS: YYMMDD_Backlog_Pending_Medi_Cal_with_CINs.csv – This file has a list of CINs from the California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) records with a Medi Cal status of ELIGIBLE, CONDITIONAL ELIGIBLE, or PENDING. This file is processed according to Appendix D – Mainframe Processing Steps. In 2015, California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) changed their value from “CONTINGENT ELIGIBLE” to “CONDITIONAL ELIGIBLE”. This change was documented deep in a release notes document at the time and DHCS was not aware of the change. As a result, the processing of this file failed until the program could be updated. Now the program will accept either value in case a change is made back to the original.
Batch	General Requirement	38642	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) executes queries to extract two datasets from their database. Each dataset is a CSV file that is zipped with password protection. California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) zips then loads the files to the DRU SFTP server for delivery to DHCS: YYMMDD_pending.csv – This file is a data extract of all California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) application records that have a Medi Cal status of PENDING. This file is downloaded to the current week’s processing folder on the Z drive. This file contains date fields that should be checked for the correct format and values after loading.
Batch	General Requirement	38643	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) creates added individuals list and sends to DHCS: Each week there are new applications for individuals that are added to existing cases in California Healthcare Eligibility, Enrollment and Retention System (CalHEERS). If the case has already been dispositioned, these are not considered in-take applications and therefore not part of the population that are reviewed and processed. California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) has developed a query that identifies these applications. It is run each week and the results sent to the Backlog Team so that the applications can be excluded from AE processing.
Batch	General Requirement	38644	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) stages CINs to create master NIM list: The CIN list sent to California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) by DHCS (YYMMDD_NIM_CIN_LIST.txt) is loaded into a staging table for processing.
Batch	General Requirement	38645	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) runs process to pull data for master NIM list based on staged CINs: California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) runs a query that extracts application data for each record that is associated with a CIN that is in the staging table. A second file is also generated that selects all Medi-Cal ELIGIBLE or CONDITIONAL ELIGIBLE applications from California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) that do not have a CIN associated. DHCS DRU splits (by county) and distributes Rivera Mailing List for prior week to counties Each Friday, the Batch Team sends the “Weekly Rivera Extract” data file to DRU for delivery to the Office of State Publishing for the Rivera Notices of Inaction (NOI) mailing. On Monday, DRU provides the file to the counties letting them know what applicants received a NOI.

Appendix A-4 - SOW Exhibit A - System Requirements Specification
(Extracted from CalHEERS RTM)

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Category	Sub Category	Req ID	Requirement
Batch	General Requirement	38646	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) sends NIM list files: California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) creates two files for the applications that have a status of Eligible or Conditional Eligible. The first – YYMMDD_NIM.csv – is created from the list of CINs sent in the file YYMMDD_NIM_CIN_LIST.txt produced in an earlier step. The second – YYMMDD_Null_CIN.csv – contains the Eligible or Conditional Eligible applications with a Null CIN. These files are sent to the Batch Team for processing. These files contain SSN and date fields that should be checked for the correct format and values after loading.
Batch	General Requirement	38647	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) sends latest STNA cases to DHCS for exclusion process: Each week counties send cases to California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) that are subject to Short Term Negative Action. California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) consolidates these cases and provides a list to the Batch team so that they can be excluded from batch processing.
Batch	General Requirement	38648	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) runs queries to extract AE, Demographics, Renewals, and Rivera Mailing files Using the extract files, California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) creates four export files: • AE Sweep – California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) status data for the applications identified as AE Candidates. • Demographics – for each record that will be sent to the counties for review, California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) extracts the first name, last name, date of birth (DOB), and SSN. This data is added to the county file to assist county workers with identifying the applicant. • Renewals – for each record that will be sent to the counties for review, California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) checks to see which are currently in Renewal status. • Rivera Mailing – for each record that will be sent to the counties for review, California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) extracts the name and mailing address data for the Head of Household and for the Applicant.
Batch	General Requirement	38649	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) delivers results of the queries for the AE, Demographics, Renewals, and Rivera Mailing files: The four files identified above are extracted, zipped, and delivered to the DHCS team via SFTP. They are loaded into the Master and Sweeper databases as appropriate and are used in the subsequent processing. The four files are extracted, zipped, and delivered to the DHCS team via SFTP
Batch	General Requirement	39464	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall do a data conversion to convert admin verified SSN to e-verified SSN under the following conditions: - Individual's SSN is admin verified and SSN e-verification exists for the same SSN which was admin verified
Batch	General Requirement	39934	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall create a new batch to send emails using Salesforce Marketing Cloud transactional REST APIs.
Batch	General Requirement	39935	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall disable EML-1000-DD-02 , EML-1000-DD-03 and EML-1000-DD-04 batches as they are no longer needed with Salesforce Marketing Cloud integration
Batch	General Requirement	42149	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall make the Passive Renewal Eligibility Batch (BAT10B) configurable to add parameters to limit the number of records that get processed for an execution.
Batch	General Requirement	44524	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall utilize the Renewal Batch Job to perform an Eligibility Simulation for the State Subsidy Program
Batch	General Requirement	44617	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall be updated to use the HHX ACA XML Library most current available for both the IRS and CMS policy level reporting. The current version currently is 8.8 for Market Reporting V2.
Batch	General Requirement	44618	"The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall use the following: Within the Common folder and the IRS-CAC.xsd file, the Dependent data element which used the EPDPersonType has been replaced by a Dependent Person data element which uses a DependentPersonType for both the IRS and CMS policy level reporting. The data elements which define the DependentPerson remain the same as for the Dependent (CompletePersonName, SSN, and BirthDt). "
Batch	General Requirement	44619	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall be updated to use the most current manifest schema, as enbaded in the most current BSD for transmission to CMS for both IRS and CMS policy level reporting.
Batch	General Requirement	45203	General – California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall have the ability to run SAWS Batch jobs for a specific California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) case and/or specific date range.
Batch	General Requirement	45204	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall have the ability to run the County Of Responsibility (COR) enablement batch (SAW-5000-DD-01) for a specific case and/or specific date range.
Batch	General Requirement	45205	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall have the ability to run the IAP Discontinuance (ELG-1004-DD-01) batch job for a specific case and/or specific date range.
Batch	General Requirement	45206	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall be avaiable for testing with SAWS for a period of 2 weeks
Batch	General Requirement	45384	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall utilize a job scheduling tools that control batch jobs by transaction type.
Batch	General Requirement	45385	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall have the capability to sequence multiple jobs based on outcome of each successive job.
Batch	General Requirement	45386	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall provide automatic program checks for: A) Controlling data files B) Verifying correct processing C) Ensuring data integrity
Batch	General Requirement	45442	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall provide for and support the ability to control batch job execution: A) By time of day B) Date C) Processing cycle (daily, weekly, Monthly, Yearly, Quarterly) D) Upon request.

Appendix A-4 - SOW Exhibit A - System Requirements Specification
(Extracted from CalHEERS RTM)

Category	Sub Category	Req ID	Requirement
Batch	General Requirement	45443	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall provide for and support the ability to sequence multiple jobs with multiple dependencies on jobs, files, exceptions, etc.
Batch	General Requirement	47099	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall provide infrastructure for production and non-production environments for implementation of batch framework enhancements.
Batch	General Requirement	47100	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) will enhance Spring batch Version from 2.1.9 RELEASE to 4.3.8 RELEASE for the identified batches : VER-2000-DD-01, VER-2001-OB-01, VER-2002-FM-01, VER-2003-EC-01, VER-2004-DD-02, VER-2004-IB-01, VER-2005-DC-01, VER-2005-DD-02, VER-3000-DD-01, VER-3000-DD-02, VER-4000-DD-01, VER-4000-OB-01
Batch	General Requirement	47101	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall enhance the Spring framework version from 3.2.2 RELEASE to 5.3.25 RELEASE for the identified batches: VER-2000-DD-01, VER-2001-OB-01, VER-2002-FM-01, VER-2003-EC-01, VER-2004-DD-02, VER-2004-IB-01, VER-2005-DC-01, VER-2005-DD-02, VER-3000-DD-01, VER-3000-DD-02, VER-4000-DD-01, VER-4000-OB-01
Batch	General Requirement	47102	CalHeers shall enhance the Java Version from 1.7 to 1.8 for the identified batches : VER-2000-DD-01, VER-2001-OB-01, VER-2002-FM-01, VER-2003-EC-01, VER-2004-DD-02, VER-2004-IB-01, VER-2005-DC-01, VER-2005-DD-02, VER-3000-DD-01, VER-3000-DD-02, VER-4000-DD-01, VER-4000-OB-01
Batch	Health & Dental Plan Shopping		
Batch	Health & Dental Plan Shopping	42375	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall send SBMI payment files only for Health enrollments.
Batch	Interfaces		
Batch	Interfaces	42380	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall assign unique File Name (Combination of File ID, File Create Date/Time, TenantId) to each SBMI submitted to CMS.
Batch	Interfaces	42381	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall enable bi-directional SBMI and SBMR files transmission with CMS over encrypted channel via secure Electronic File Transfer (EFT) using the SFTP/SSH protocol.
Batch	Interfaces	42382	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall automate the exchange of PBP files with CMS via Secure File Transfer Protocol (SFTP) for test and production servers.
Batch	Interfaces	42383	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall ensure and validate that the SBMI file naming convention is according to the CMS guidelines. SBMI files shall include Application ID of EPS indicating the SBMI files are intended for Enrollment and Payments System (EPS) application. Naming Convention to CMS: SMBI File Name = TradingPartnerID.AppId.FuncCode.Date.Time.EnvCode.Direction (Sample: FEP0099CA.EPS.SBMI.D210101.T002623413.T.IN)
Batch	Interfaces	42384	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall validate all the SBMR response files to follow the proper naming conventions with the below standards. Naming Convention from CMS: SBMR File Name: SourceID.FuncCode.Date.Time.EnvCode.Direction (Sample: FEP0099CA.SBMR.D211112.T075212015.T.OUT)
Batch	Interfaces	42385	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall adhere to the CMS submission cycle deadlines to ensure processing of all SBMI files prior to the defined CMS Payment cycles.
Batch	Interfaces	42386	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall maintain and provide unique Exchange Assigned Policy IDs in the SBMI files for use in reporting and payment.
Batch	Interfaces	42387	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall assign a new Exchange Assigned Policy ID when a plan or product changes within a specific Issuer due to the change in 14-digit QHP ID.
Batch	Interfaces	42403	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall update the references to the new PCAP Enrollment tables in the existing 1095/3895 void process to fetch the Enrollment Codes in the IRS-5000-DD-00 batch for all the identified cases that requires void reporting.
Batch	Notices		
Batch	Notices	39247	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall populate the renewal due date as [last batch sweep date] if the case is flagged for the last batch sweep at the time that the NOD12 is generated
Batch	Notices	39248	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall generate NOD12s based on defined prioritization.
Batch	Notices	43314	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall receive the final (i.e., accepted by EW and sent to print in SAWS) MAGI notices of action generated by SAWS System or Eligibility Worker in PDF format via a daily batch (eHIT inbound to California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) transaction #7 tagged as NOA) from each of the SAWS.
Batch	Notices	43315	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall receive the final (i.e., accepted by EW and sent to print in SAWS) MAGI notices of action imaged by Eligibility Worker in SAWS in image format via a daily batch (eHIT inbound to California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) transaction #7 tagged as NOA) from each of the SAWS.
Batch	Notices	49321	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall implement optimization of NOD01 Notices staging and generation process to meet increased load for the NOD01 notices
Batch	Notices	49322	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall optimize the NOD01 A/B - Intake , Renewal staging process to a chunk /case based staging process
Batch	Notices	49323	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall implement a chunk-oriented processing for batch jobs that require additional processing cycles.

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(Extracted from CalHEERS RTM)

Category	Sub Category	Req ID	Requirement
Batch	Plan and Benefit Assistance		
Batch	Plan and Benefit Assistance	42379	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall send a single SBMI file per Issuer per Coverage Year to CMS on a month-to-month schedule.
Batch	Renewal		
Batch	Renewal	40720	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall exclude cases with terminated enrollments from the Passive Renewal eligibility determination batch process.
Batch	Renewal	40721	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall allow multiple last batch sweeps
Batch	Renewal	42388	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall maintain the same Exchange Assigned Policy ID for CSR Variant ID changes.
Batch	Renewal	42389	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall validate for the enrollment and financial data accuracy during data retrieval for SBMI file generation.
Batch	Renewal	42390	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall validate SBMI files generated before sending them out via EFT.
Batch	Renewal	42391	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall validate the SBMI XML files created based on the XSD provided by CMS.
Batch	Renewal	42392	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall ensure to review the SBMR files received from CMS and address the errors/warnings based on the final disposition status (rerun or next run) in order to facilitate accurate payment processing for CMS.
Batch	Renewal	42393	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall process the SBMR files received from CMS to update the File Level Status, Warnings and Log Error messages/rejections received.
Batch	Renewal	42394	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall process the SBMR files and generate an operational report based on the data in the Error Log Tables.
Batch	Renewal	42395	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall triage and correct the errors and warning received from CMS and retrigger the SBMI files based on the Final Disposition Status received.
Batch	Renewal	42396	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall send prorated Monthly Total Premium Amount, Monthly Total Individual Responsibility Amount, Monthly APTC Amount and Monthly CSR Amount for partial month coverage under Financial Information Tag.
Batch	Renewal	42397	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall create the new Staging batch to extract the enrollment data from PCAP Enrollment Tables for 1095/3895 Process.
Batch	Renewal	42398	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall use the new staging batch to extract enrollment data from PCAP Enrollment Tables for the 1095 Process.
Batch	Renewal	42399	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall use the new staging batch to extract enrollment data from PCAP Enrollment Tables for the 3895 Process.
Batch	Renewal	42400	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall update the references to the new PCAP Enrollment tables in the existing 1095/3895 process to extract the latest rates, rate's effective start/end dates & Enrollment Codes information in IRS-1000-DD-02 batch for all the identified cases that require annual/monthly reporting.
Batch	Renewal	42401	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall update the references to the new PCAP Enrollment tables in the existing 1095/3895 process to extract the latest rates, rate's effective start/end dates & Enrollment Codes information in IRS-3000-DD-02 batch for all the identified cases that require correction.
Batch	Renewal	42402	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall update the references to the new PCAP Enrollment tables in the existing 1095/3895 correction process to fetch the Enrollment Codes in the IRS-3000-DD-05 batch that requires additional business validation from California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) for all the identified cases that require correction.
Batch	Renewal	42404	The enrollment details (snippets) associated with NOD 62 A, B, C, and D shall be populated from the California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) PCAP module.
Batch	Renewal	42405	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall update the naming convention of the Batch Table Name and Column names to remove references of the current COTS vendor.
Batch	Renewal	48578	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall implement additional batch processing cycle for timely completion of OE passive renewal cycle.
Batch	Renewal	48579	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall implement a fuse poller based architecture for batch jobs that require portioned execution.
Batch	Renewal	48580	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall implement common framework for the batch project to be used for batch modularization by functional area initiatives in the batch modernization roadmap.
Batch	Renewal	48581	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall implement governor limits for interfaces as applicable.
Batch	Renewal	48582	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall enhance the Spring Batch version from 2.1.9 to 5.1.x, Spring core version from 3.2.2 to 6.1.x, and OpenJDK version from 7 to 17 for the identified batches.
Batch	Reports		
Batch	Reports	38654	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System must provide the functionality to generate an output file using the same SAWS input file with the additional status field populated based on the processing outcome.
Batch	Reports	44465	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall process records as follows in the case of a correction that needs to later be voided: If California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) transmitted an original record and subsequently transmitted two corrections to that record before it is discovered that the record needed to be marked void, California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) will populate the VoidedRecordSequenceNum with the Batch Id, the Document Sequence Number and the Record Sequence Number from the second correction record transmitted.
Batch	Reports	44467	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall have a new process to create and match up the voided records with the corrected record sequence that need to be included in the XML.
Batch	Reports	44468	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall have a new void XML created to pick up void records.

Category	Sub Category	Req ID	Requirement
Batch	Reports	44600	"The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall add two new batch category codes at the manifest level: IRS_EOY_SUBMIT_VOID_RECORDS_REQ IRS_EOY_RESUBMIT_VOID_RECORDS_REQ"
Batch			The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall send a VoidedRecordSequenceNum that includes a BatchID that matches a BatchID from a transmission that IRS has processed when voiding a record.
Batch	Reports	44602	"The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall send a VoidedRecordSequenceNum that includes a DocumentSequenceNum that matches one of the DocumentSequenceNum received in the batch referenced by the BatchId. "
Batch	Reports	44603	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall process any responses received for the void records.
Batch	Reports	44605	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall not comingle original records with correction or voided records.
Batch	Reports	44606	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall set the VoidInd on every record to 1 when the BatchCategoryCD is IRS_EOY_SUBMIT_VOID_RECORDS_REQ" or IRS_EOY_RESUBMIT_VOID_RECORD_REQ.
Batch	Reports	44607	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall set the CorrectedInd on every record must be "false" and the CorrectedRecordSequenceNum must be empty when BatchCategoryCD is IRS_EOY_SUBMIT_VOID_RECORDS_REQ" or IRS_EOY_RESUBMIT_VOID_RECORD_REQ.
Batch	Reports	44608	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall send the following associated data BatchID, DocumentSequenceNumber and RecordSequenceNumber of the record being voided
Batch	Reports	45999	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall void the last record accepted by the IRS.
Batch	Reports	46001	A new process will be created to zip the void records.
Batch	Reports	46002	A new process will be created to encrypt the void zip records.
Batch	Reports	46004	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall generate and transmit the correction XML to captures a "Voided" 1095A.
Batch	SEP/RAC		
Batch	SEP/RAC	42373	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall generate and submit cumulative monthly enrollment XML file (SBMI - SBM Inbound File) including all previously reported enrollments and members that have coverage for any period during the specified coverage year.
Batch	Timeshifter		
Batch	Timeshifter	42376	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall provide an ability to track if SBMI files for all Health Issuers have been transmitted successfully to CMS as part of the monthly PBP execution process.
Batch	Verify Application Information		
Batch	Verify Application Information	38246	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall have an automated process to attempt re-verification of inconsistent verifications at the end of the reasonable opportunity period, only if the verification inconsistency is responsible for a consumer's conditional eligibility status to CCP/APTC/CSR programs.
Budget Management			
Budget Management	General Requirement		
Budget Management	General Requirement	44264	The Vendor must assist the State in the planning for and preparation of the biannual IAPDU and in any other documentation and justification required for the Spring and Fall State budget processes. Projected costs by line item and sub-line item must be provided for the upcoming and future State Fiscal Years, along with justification associated with any actual and planned changes.
Budget Management	General Requirement	44265	On a monthly basis, the Vendor shall track and report its actual costs compared to planned costs and reasons for variances. This tracking and reporting must be performed at the budget line item and sub-line item levels, as well as for each Change Order. The Vendor must also identify actual or planned variances that may require line item adjustments.
Budget Management	General Requirement	44323	On or before the fifth (5th) calendar day of each month, the Vendor shall provide invoice projections and updates for the upcoming 90- 60- and 30-day periods.
Capacity			
Capacity	General Requirement		
Capacity	General Requirement	45363	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall have the capability to retain five (5) years of Business transactional data (non adducting related data) online and ten (10) years of Business transactional data offline storage.
Capacity	General Requirement	45432	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) solution shall be able to accommodate varying retention periods for data, uploaded document images, documents, and business transactional data.
Capacity	General Requirement	45433	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) solution shall have the ability to change or update retention periods for data, images, documents, etc.
Capacity	General Requirement	45460	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall have configurable retention periods for online and offline storage for the following information categories: A) Data B) Images C) Documents E) Other exchange-related content
Capacity	General Requirement	45463	The Vendor shall report and address all capacity issues that impact System performance requirements.
Communication Management			

Category	Sub Category	Req ID	Requirement
Communication Management	General Requirement		
Communication Management	General Requirement	38980	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall conduct kick-off meeting with all existing carriers.
Communication Management	General Requirement	38981	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall provide integration test related documentation(Test Plan, Test Templates, Test Scenarios, Companion Guide etc.) to all existing Carriers.
Communication Management	General Requirement	38982	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall provide response to all existing carriers regarding questions related to integration testing.
Communication Management	General Requirement	38984	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall have meetings twice a week with all existing carriers to discuss testing status, testing issues, next steps and answer carriers' questions
Communication Management	General Requirement	38985	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall provide daily test status report to CovCA regarding carriers' testing progress.
Communication Management	General Requirement	39932	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall interface with Salesforce Marketing Cloud email service to send emails for NOD61D and NOD61E(English and Spanish).
Communication Management	General Requirement	39933	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall configure Salesforce Marketing Cloud business units (Non-PROD and PROD) with required setup to send emails from Salesforce Marketing Cloud.
Communication Management	General Requirement	41379	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall allow the consumer to complete the Opt In and/or Opt Out process through IVR once all the disclosures have been read and agreed to.
Communication Management	General Requirement	41381	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall allow the consumer to complete the Opt In and/or Opt Out process through IVR if option is available on California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) Portal.
Communication Management	General Requirement	44267	The Vendor shall establish and use California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) Project standards and/or templates for written communications, including: A) Information Transmittals B) Requests for Information C) Agendas D) Meeting Minutes E) Notices, Memos and Letters F) Documents and Reports which are not formal deliverables G) Email H) Presentations I) Interviews/Surveys/Forms/Questionnaires
Communication Management	General Requirement	44287	The Vendor shall implement a strategy for communicating and working collaboratively with its subcontractors to meet the Project objectives.
Communication Management	General Requirement	44304	The Vendor shall actively participate with California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) project management to provide effective communication and coordination with the large and diverse stakeholder group, both internal and external to the project.
Communication Management	General Requirement	44312	The Vendor shall maintain and update the California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) Project phone lists, including global contact lists, for use by the California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) Project.
Communication Management	General Requirement	44313	The Vendor shall maintain and update the California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) Project e-mail distribution groups for use by the California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) Project.
Communication Management	General Requirement	44319	The Vendor shall establish and use structured protocols for the following types of communications: A) Internal Communications B) External Communications C) Meeting Scheduling/Facilitation/Agendas/Minutes (ensuring sufficient meeting notice, travel time, and advance materials and identifying in advance who will take minutes). D) Conference Calls F) Webcasts G) Web Collaboration Tools, including SharePoint H) Interviews/Surveys/Forms/Questionnaires I) Scheduling
Communication Management	General Requirement	44324	The Vendor shall monitor and evaluate the effectiveness of California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) Project communications, and document findings from communication monitoring and evaluation, on a quarterly basis, including: A) Recommendations for improvement, including methods, procedures, and/or mechanisms for future communications. B) Communication findings and recommendations remaining open from previous periods.
Consumer Assistance			
Consumer Assistance	Assister Management		
Consumer Assistance	Assister Management	38712	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) system shall implement the Agency Manager Dashboard in the new agency portal.
Consumer Assistance	Assister Management	41085	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall provide the functionality for consumers provide complaint information relating to Assisters.
Consumer Assistance	Assister Management	41086	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall provide the functionality to receive, track and report Assister complaints.

Category	Sub Category	Req ID	Requirement
Consumer Assistance	Assister Management	41094	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall provide the functionality record and track Assister training, education, and languages spoken.
Consumer Assistance	Assister Management	41095	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System will have the functionality to upload and maintain images of Assister Certification and associate the image to an Assister record.
Consumer Assistance	Assister Management	41157	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System will generate an e-mail or notice to the Assister and /or Entity confirming that the Assister and/or Entity is active / inactive when there is a change in status.
Consumer Assistance	Assister Management	41158	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall provide functionality to allow an Entity Representative to submit a self-service application to start the Entity approval process.
Consumer Assistance	Assister Management	41162	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall not display Inactive Assistors to consumers during a consumers' search for an Assister.
Consumer Assistance	Assister Management	41163	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall generate notifications, either in paper or electronic form, in the following situations: • An Assister successfully completes their training and they have been registered in California Healthcare Eligibility, Enrollment and Retention System (CalHEERS). The Admin person will create a User ID and temporary password for the Assister. The notification will give instruction of how to login in and change their password, answer security questions, and will provide a link to the login page. • An Assister Certification Renewal is due. This notice will include the steps the Assister must take to continue Certification and the due date. This notice must go out XX Days prior to the renewal date. (number of days TBD) • An Assister's Certification is denied for failure to successfully complete training. This notification will include the reasons and any action necessary to resolve the issue. • An Entity's Registration is approved and they have been registered in California Healthcare Eligibility, Enrollment and Retention System (CalHEERS). The Admin person will create a User ID and temporary password for the Entity. The notice will give instruction of how to login in and change their password, answer security questions, and will provide a link to the login page. • An Entities Registration Renewal is due. This notice will include the steps the Entity must take to continue California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) Registration and the due date. This notice must go out XX Days prior to the renewal date. (number of days TBD) • An Entity's registration is denied. This notification will include the reasons and any action necessary to resolve the issue. • An Assister or Entity has been Decertified/Deregistered. This notification will include the reasons and any action necessary to resolve the issue. • Notify Assistors associated to the Entity when the Entity is Deregistered. • Notify an Entity when an Assister, associated to the Entity, is Decertified. • Notify Customers when an Assister/Entity is Decertified/Deregistered, and their application/case is pending/in process. • Notify Customers of their Assister selection. The notification would include the Assister's contact information and the consumer's rights.
Consumer Assistance	Assister Management	41165	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System will have the functionality to end date an Assistors' association with the Entity. (The Admin has the ability to end date the Assister from an Entity's Roster for reasons such as a known retirement date. This End Date will prevent the Assister from accepting new clients.)
Consumer Assistance	Assister Management	41465	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall provide functionality to capture the following Assister Entity banking information: - Bank Name - Bank Address - Bank Account Number - Bank Routing Number - Type of Account: Checking or Savings
Consumer Assistance	Assister Management	41466	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall display a question allowing the Assister Entity to choose to receive a payment in the form of a check or electronically.
Consumer Assistance	Assister Management	41490	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall provide the functionality to track an In Person Assister (IPA) Assister Entity and a Navigator Assister Entity for payment funding.
Consumer Assistance	Assister Registration		
Consumer Assistance	Assister Registration	39512	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) system shall allow only the user in the role "AssisterEnrollmentEntityAdmin" to complete manual updates to Entity Registration and Assister information directly in the California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) application.
Consumer Assistance	Assister Registration	39513	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall allow read-only access to Entity and Assister profile information by the users in the "AssisterEnrollment Entity" role and "Assister" role except for Counselor Status.
Consumer Assistance	Assister Registration	41042	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall provide the functionality to register and track Assistors.
Consumer Assistance	Assister Registration	41043	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System will have automated functions to validate that the Assister information added to an Entity Roster matches the information stored in California Healthcare Eligibility, Enrollment and Retention System (CalHEERS). (The validation elements to be determined but must include the Assister Certification Number. When that information is entered, the system must validate that the Certification number entered matches the other demographic information entered for the Assister.)

Category	Sub Category	Req ID	Requirement
Consumer Assistance	Assister Registration	41044	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System will have the functionality for an Entity to monitor the Assister account progress, productivity and outcomes. For example: • Payments made to entities. - o Number of applications that resulted in successful qualifying enrollments - o Payment issue date - o Check number - o Check Amount • Report of qualifying applications for the month • Outcome of applications – enrollment disposition into Medi-Cal, QHP, missing information, etc. • Number of applications submitted per individual for the overall entity and globally at the Assister level to monitor performance.
Consumer Assistance	Assister Registration	41045	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System will have the functionality that supports logging into California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) using the Entity unique user id and password.
Consumer Assistance	Assister Registration	41046	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System will have the functionality / Web Page that supports the Entity in viewing and managing open/in progress/ renewal cases associated to the Entity Registration Number.
Consumer Assistance	Assister Registration	41047	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System will have the functionality to monitor Assister activities including but not limited to: • Percentage of cases directed to health plans • Number of applications processed per day, week and/ or month • Outcome of applications (enrolled, denied, program disposition, missing information)
Consumer Assistance	Assister Registration	41048	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System will have the functionality to create an Entity unique User Id and Password associated to an Entity Registration Number. An Entity must be registered prior to accessing California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) for business.
Consumer Assistance	Assister Registration	41049	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall provide functionality to allow an Entity Representative to update specific fields on the Assister profile.
Consumer Assistance	Assister Registration	41050	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System will have the functionality to create an Assister unique User Id and Password associated to an Assister Certification Number. An Assister must be Certified prior to accessing California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) for business.
Consumer Assistance	Assister Registration	41051	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System will have the functionality to associate the Assister user id to all case/applications, assigned to that Assister, with the Assister Certification Number. (Regardless of the entity association)

Category	Sub Category	Req ID	Requirement
Consumer Assistance		41053	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System will have a web page that supports the addition and maintenance of Assister information including: 1. Name a. Last Name b. First Name c. Middle Initial 2. Address a. Business b. Mailing 3. Phone Number a. Primary b. Secondary Phone Number 4. e-mail Address 5. Language a. Written b. Spoken 6. Demographics served 7. Assister Certification Training a. Date of Certification (Start) b. Date of Certification Expiration (End) c. Certification Number d. History of recertification (Includes all dates associated with recertification.) 8. Status (Active / Inactive) 9. Inactive Status Reason 10. Begin Date of activation/inactivation 11. End Date of activation/inactivation 12. Administrative Action a. Suspended b. Investigation c. (All Admin Actions to be defined during System Design.) 13. Start Date of Administrative Action 14. End Date of Administrative Action 15. Administrative Action Comments a. Date of comment b. Reason for Action
Consumer Assistance	Assister Registration	41054	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System will have the functionality to prompt the Assister to create challenging questions to confirm authorization for User ID requests as well as Password Resets.

Category	Sub Category	Req ID	Requirement
Consumer Assistance		41055	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System will have a web page that supports the addition and maintenance of Entity information including: 1. Business Legal Name 2. Primary Mailing Address 3. Other Address 4. Primary Phone Number 5. Fax Number 6. Primary e-mail Address 7. Preferred Method of Communication 8. Contacts a. Primary Contact b. Human Resources c. Accounts Receivable 9. Language Supported a. Written b. Spoken 10. This location will accept referrals during the hours of: a. 8:00 a.m. – 5:00 p.m. M-F b. After 5:00 p.m. M-F c. Saturday Hours: _____ d. Sunday Hours: _____ e. Other Hours: _____ 11. Entity Registration Number 12. Entity Registration Date 13. Entity Is Eligible for Payment (Y/N) (Will the Entity receive payment for services) 14. Federal Tax ID 15. State Tax ID 16. Outreach and Education Grantee (Y/N) a. Grant Contract Number b. Grant Award Amount c. Grant Populations Served d. Grant Demographics served 17. Type of Entity/Organization a. School
Consumer Assistance	Assister Registration		
Consumer Assistance	Assister Registration	41056	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System will have the functionality (Web Page) that supports adding Assisters to an Entity.
Consumer Assistance	Assister Registration	41057	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System will have the functionality that supports the Entity logging into California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) using the Entity unique User ID and password.
Consumer Assistance	Assister Registration	41058	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System will have the functionality to notify Assisters and / or Entities of changes in Assister and / or Entity status.
Consumer Assistance	Assister Registration	41074	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System will have the functionality to prompt the Entity to create challenging questions to confirm authorization for User ID requests as well as Password resets.
Consumer Assistance	Assister Registration	41075	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall display the delegation code when the Assister is certified.
Consumer Assistance	Assister Registration	41087	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System will have the functionality to support Assister password maintenance. (The Assister will be able to login to California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) and change their password.)
Consumer Assistance	Assister Registration	41088	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System will have the functionality to prevent an Assister from accessing another Assisters "book of work".
Consumer Assistance	Assister Registration	41089	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System will have the functionality for an assister to access a specific account/application (account information provided by consumer) to support consumer calls/walk ins.
Consumer Assistance	Assister Registration	41092	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall have the functionality to support the Assister creating a password associated with their Certification Number to access California Healthcare Eligibility, Enrollment and Retention System (CalHEERS).
Consumer Assistance	Assister Registration	41093	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System will have the functionality that supports logging into California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) using the Assisters unique user id and password.
Consumer Assistance	Assister Registration	41097	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System will have the functionality / screen that support the Assister in viewing and managing open/in progress/ renewal /redetermination cases associated to the Assisters' Certification Number.
Consumer Assistance	Assister Registration	41099	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System will have the functionality to sort and view the Assister book of work by: • Renewal date • Accounts pending renewal • Or any other Assister portfolio management activities displayed (i.e. Enrollment disposition, etc).

Category	Sub Category	Req ID	Requirement
Consumer Assistance	Consumer Assistance - SHOP		
Consumer Assistance	Consumer Assistance - SHOP	39642	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall have the functionality to display a static help message related to the Access Code on the Account Creation page to assist Consumers with linking their account to an application that may have been submitted on their behalf.
Consumer Assistance	Eligibility Determination		
Consumer Assistance	Eligibility Determination	39865	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall have the functionality to replace the "Upload a New Document" link with an "Add Document" button on the "Documents and Correspondence" page for both consumers and admin.
Consumer Assistance	Eligibility Determination	39866	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall have the functionality to update text language above the "Add Document" button based on user roles.
Consumer Assistance	Eligibility Determination	39867	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall have the functionality to add a document pop-up modal for uploading a document from the "Documents and Correspondence" page for consumers.
Consumer Assistance	Eligibility Determination	39868	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall have the functionality to add a document pop-up modal for uploading a document from the "Documents and Ccorrespondence" page for admin.
Consumer Assistance	Eligibility Determination	39869	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall have the functionality to display the pending verification(s) that matches the Document Ccategory and Document Ttype when uploading a document.
Consumer Assistance	Eligibility Determination	39870	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall have the functionality to display pending verifications at the individual level.
Consumer Assistance	Eligibility Determination	39879	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall have the functionality to display "optional" text for the Former Foster Youth verification on the on the add document pop-up modal.
Consumer Assistance	Enrollment		
Consumer Assistance	Enrollment	38284	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System must provide the functionality for users to view, filter and sort consumers with active delegations.
Consumer Assistance	Enrollment	38285	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System must provide the functionality for users to filter and sort on application type.
Consumer Assistance	Enrollment	38286	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System must provide the functionality for users to filter and sort on enrollment status.
Consumer Assistance	Enrollment	38287	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System must provide the functionality for users to filter and sort on eligibility status.
Consumer Assistance	Enrollment	40002	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall create a new 'Document Category' of "Tax Form" for the NOD62 a, b, c, & d that will display for all new and past NOD62's.
Consumer Assistance	Enrollment	40003	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall have the ability to resend to the consumer State Form 3895 Health Insurance Marketplace Statement(s) without being required to regenerate all annual 3895 forms.
Consumer Assistance	Enrollment	40004	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall provide users with the ability to access their most recent 1095-A and 3895 tax forms in the "Important Documents" section as well as the "Notices & Documents" section.
Consumer Assistance	Enrollment	40005	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall provide users with the ability to navigate to the "Documents and Correspondence" page to access previous 1095-A and 3895 tax forms in the "Important Documents" section as well as the "Notices and Documents" section.
Consumer Assistance	Enrollment	40006	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall update all relevant corresponding documentation.
Consumer Assistance	Enrollment	40007	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall create a new California State Tax Form 3895 button icon and add the button icon to the "Icon Library" tab in CM 10.01.
Consumer Assistance	Enrollment	40008	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall update the link in the Account Information Section on the Account Home page from "Previous Tax Form 1095-A's" to "Previous Tax Forms."
Consumer Assistance	Enrollment	40038	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall update the Button icon name from [Tax Form 1095-A Icon] to [Tax Form Federal 1095-A Icon].
Consumer Assistance	Enrollment	40039	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall update the button from "View [YYYY] Tax Form 1095-A" to "View [YYYY] Federal Tax Form 1095-A."
Consumer Assistance	Enrollment	40040	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall update the corresponding BR's for the button "View [YYYY] Federal Tax Form 1095-A" to identify Federal Tax Form 1095-A.
Consumer Assistance	Enrollment	40041	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall update the link in the "Account Information" Section under "Notices and Documents" Section from Most Recent Tax Form 1095-A to Most Recent Federal Tax Form 1095-A.
Consumer Assistance	Enrollment	40042	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall update the corresponding BR's for the link "Most Recent Federal Tax Form 1095-A" to identify Federal Tax Form 1095-A.
Consumer Assistance	Enrollment	40284	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall provide the capability, outside of the application for coverage, to allow the consumer to delegate access to a new enroller after a duplicate user validation check has identified a match.
Consumer Assistance	Enrollment	40285	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall capture the re-delegation request after invoking a secondary duplicate user validation check on consumer's name (First and Last), DOB, and one of the following: Residential Address or a phone number or an email address; if SSN is not available or the combination of DOB and SSN match is not found.
Consumer Assistance	Enrollment	40286	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall have the functionality to invoke a duplicate user validation check based upon consumer's DOB and SSN when an intake application is being created by Certified Insurance Agents, Certified Enrollment Counselors, Plan Based Enrollers, Agency Managers, Approved Admin Staff Level 1, and Approved Admin Staff Level 2.
Consumer Assistance	Enrollment	40287	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall capture the License Number and Agency Tax ID for the new delegation in the re-delegation request.
Consumer Assistance	Enrollment	40288	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall provide the capability to capture consent for re-delegation through this re-delegation process.
Consumer Assistance	Enrollment	40289	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall provide the capability to capture consent for receiving text messages with an authentication code.
Consumer Assistance	Enrollment	40290	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall generate an authentication code that is sent via text message to the Consumer's mobile phone number provided in the re-delegation request if the validation is successful.

Appendix A-4 - SOW Exhibit A - System Requirements Specification
(Extracted from CalHEERS RTM)

Category	Sub Category	Req ID	Requirement
Consumer Assistance	Enrollment	40291	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall display a message when the validation is unsuccessful.
Consumer Assistance	Enrollment	40292	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall provide the capability for an enroller to enter an authentication code.
Consumer Assistance	Enrollment	40293	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall re-delegate the access to the consumer's case when the enroller enters the authentication code.
Consumer Assistance	Enrollment	40296	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall display a message to the enroller if the authentication code is not valid.
Consumer Assistance	Enrollment	40297	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall provide the capability to re-enter the authentication code up to a maximum of three times.
Consumer Assistance	Enrollment	40298	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall provide the capability to request for a new authentication code without re-entering the consumer information up to a maximum of three times.
Consumer Assistance	Enrollment	40299	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall re-delegate access to the new enroller specified in the new re-delegation process and terminate any active pre-existing delegation.
Consumer Assistance	Enrollment	40300	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall display a re-delegation status message to the enroller.
Consumer Assistance	Enrollment	40301	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall display a message to the enroller about the option to contact the Service Center or to repeat the process if the re-delegation is not successful.
Consumer Assistance	Enrollment	40302	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall display the Reason for Delegation End for any pre-existing delegation that is terminated through this process as "Automated Consumer Delegation Code".
Consumer Assistance	Enrollment	40303	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall provide the capability to disable or enable the enroller (Certified Insurance Agent, Agency Manager, Approved Admin Staff Level 1 and 2, Certified Enrollment Counselor, Plan Based Enrollers) from continuing with the application if a duplicate individual is found.
Consumer Assistance	Enrollment	40304	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall update the messaging displayed when a duplicate individual is identified to include a link to the re-delegation process.
Consumer Assistance	Enrollment	47710	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall send a flag to the IVR and ChatBot interface which identifies a household that went through the Manual APS process 1, 2, or 3.
Consumer Assistance	Enrollment	47711	Consumers that are eligible for Manual APS will be redirected out of IVR to take action on the California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) Portal.
Consumer Assistance	Enrollment	47712	Consumers that are eligible for Manual APS will be redirected out of the ChatBot to take action on the California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) Portal.
Consumer Assistance	General Requirement		
Consumer Assistance	General Requirement	38394	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall provide the functionality for the user to agree to receive autodialed and/or prerecorded calls and text messages.
Consumer Assistance	General Requirement	38395	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall allow the consent be modified by a user on a going forward basis without retriggering the business rules engine.
Consumer Assistance	General Requirement	39505	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall have the ability to view the Agency Manager name(s) on Agency page in the Agency Portal.
Consumer Assistance	General Requirement	39506	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall have the ability to view the Agent and Agency Portals on a mobile device.
Consumer Assistance	General Requirement	39507	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall have the ability to access Toolkit links from the Agency and Agent Portals under the Resources section.
Consumer Assistance	General Requirement	40544	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall display an Alert Banner on the Account Home and Household Eligibility Results Summary page when Account Transfer (AT) fails.
Consumer Assistance	General Requirement	40545	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall display fixable and non-fixable Account Transfer (AT) errors on Account Transfer Error modal.
Consumer Assistance	General Requirement	40546	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall display Account Transfer (AT) Error modal with AT failure errors and Steps to fix the AT errors to Admin users.
Consumer Assistance	General Requirement	40547	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall display Account Transfer (AT) Error modal with AT failure errors and Steps to fix the AT errors to consumers and authorized representatives.
Consumer Assistance	General Requirement	40548	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall display Account Transfer (AT) Error modal with AT failure errors and Steps to fix the AT errors to Enrollers.
Consumer Assistance	General Requirement	40549	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall provide a visual transactional audit trail history to the California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) admin users for Account Transfer (AT) errors that the user encounters.
Consumer Assistance	General Requirement	40550	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall have the ability to filter the Account Transfer (AT) transactions based on Determination Date (From & To - 90 Day date parameter), Transaction ID, Transfer ID or Account Transfer status - Failed or Successful.
Consumer Assistance	General Requirement	40551	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall have the ability to display the search results based on the filter criteria used.
Consumer Assistance	General Requirement	41161	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall provide functionality to allow entity representative to view all of the assisters "book of work".
Consumer Assistance	General Requirement	41388	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall add an alert to the Enroller Portal Alerts when a consumer goes through the Auto Plan Selection process for APS New enrollment groups.
Consumer Assistance	General Requirement	41389	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall generate an access code for EDR/Disposition transactions (Intake/RAC/Renewal) if the following conditions are true (the same checks as Portal): -There is no existing consumer account on the case -There is no existing access code
Consumer Assistance	General Requirement	42153	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall display messaging to consumers who choose to Opt Out of their current year APS Health enrollment after it has been renewed for the next year.

Category	Sub Category	Req ID	Requirement
Consumer Assistance			The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System must provide the functionality to provide the Agent with an extract file/report of their Book of Business. The extract should contain the following data items for each case: • First Name • Middle Name • Last Name • Customer DOB • Residence Address Line 1 • Residence Address Line 2 • Address - City • Address - State • Address - Zip Code • Customer Email • Customer Home Phone • Customer Account Flag (Y/N) • AHBX Application ID • AHBX Case ID • Application Status • Case Status • Medi-Cal Eligibility Status • Enrollment Status • Plan Type • Carrier Name • Plan Level • Plan Name • Plan Effective Date • Termination Date (if not active) • Number of Enrolled Members • Income Used to Calculate APTC • Old APTC • Old Gross Rate • Renewal APTC (once it has been Carrier (Medical and Dental)) • Federal Consent Flag • Years of Consent • Date of Consent
	General Requirement	42572	
Consumer Assistance	General Requirement	42573	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System must provide the ability for the Agent Manager to view the Agent Book of Business/Data Extract information for one Agent at a time using OBIEE.
Consumer Assistance	General Requirement	42793	The Vendor must maintain any field or online help information when system, security, or policy changes occur.
Consumer Assistance	General Requirement	42832	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System must pass the CaseID and PersonID, to CRM Survey Tool, for the person who is logged into California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) and clicks the "Take Survey" link.
Consumer Assistance	General Requirement	42833	The CRM Survey Tool must have the ability to accept the CaseID and PersonID.
Consumer Assistance	General Requirement	42834	The CRM Survey Tool must have the ability to store the CaseID and Person ID.
Consumer Assistance	General Requirement	42835	The CRM Survey Tool must have the ability to link the Survey answers with the CaseID and Person ID provided.
Consumer Assistance	General Requirement	42836	The solution must provide the ability to update the survey URL in AHBX as needed for Survey deployment to Consumers via the California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) application.
Consumer Assistance	General Requirement	42875	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall allow Agents the ability to use SEP ADMIN Functionality.
Consumer Assistance	General Requirement	42876	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall allow for the Agents use of SEP Functionality to be enabled/disabled as a configurable item
Consumer Assistance	General Requirement	42944	The Vendor must provide a data dump of specified Planned Based Enroller Entities (PBEE) and their associated Planned Based Enrollers (PBE), both Active and Inactive, from the California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) database. This is a one time request.
Consumer Assistance	General Requirement	43196	The CalHEERS System must protect the Agent's Business Legal Name, Address, and Federal Tax ID fields in the Agent Portal after the Agent is Certified.
Consumer Assistance	General Requirement	43197	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System must provide the functionality to display a message/field help to the Agent when they attempt to make a change to the Business Legal Name, Address, or Federal Tax ID/SSN. The message should provide the Agent with instructions to contact their Service Center for assistance.
Consumer Assistance	Notices		
Consumer Assistance	Notices	40023	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall use the yearly template provided by IRS to generate the 1095-A form for the tax year 2020 and beyond.
Consumer Assistance	Notices	40024	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall update trigger logic for snippet 368 so it is not suppressed when snippet 365 is generated on the NOD01.
Consumer Assistance	Notices	40025	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall update the snippet order on the NOD01 notice for snippet 369 to appear below the denial for APTC.
Consumer Assistance	Notices	40026	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall update the snippet order on the NOD01 notice for snippet 325 and 326 to match snippet placement of snippet 321 which appears below the State Subsidy snippets.

Category	Sub Category	Req ID	Requirement
Consumer Assistance	Notices	40027	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall ensure the "Marketplace-assigned policy number" field can populate alphanumeric values.
Consumer Assistance	Notices	40028	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall ensure the demographic fields on the 1095-A Form populate according to the new criteria identified by IRS.
Consumer Assistance	Notices	40029	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall ensure all fields on the original 1095-A Form are populated as expected.
Consumer Assistance	Notices	40030	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall ensure all fields on the corrected 1095-A Form are populated as expected.
Consumer Assistance	Notices	40031	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall ensure all fields on the void 1095-A Form are populated as expected.
Consumer Assistance	Notices	40319	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall generate an extract file, or many extract files, containing either the original or corrected/void Form 1095 along with the Covered CA cover letter and the form instructions prior to securely transmitting the files to the third party vendor for printing each Form 1095-A Health Insurance Marketplace Statement.
Consumer Assistance	Outreach		
Consumer Assistance	Outreach	42652	The solution must provide the functionality to define and select population and demographic segments to meet marketing and outreach campaign objectives.
Consumer Assistance	Outreach	42653	The solution must provide the ability to select data from other repositories brought into CRM (e.g. California Healthcare Eligibility, Enrollment and Retention System (CalHEERS), CRM, and others) by consumer information based on defined criteria such as zip code, preferred language, ethnicity, plan selection, date of birth, life changing circumstances, progress through enrollment, prior marketing campaign participation and/or outcomes, etc.
Consumer Assistance	Outreach	42654	The solution must provide the ability to associate consumer data and automatically trigger events (e.g. email, postal notices, etc.) based on defined marketing and outreach campaign criteria.
Consumer Assistance	Outreach	42655	The solution must provide the ability to view marketing and outreach campaign interactions at the Contact level, via the CRM.
Consumer Assistance	Outreach	42656	The solution must monitor data repositories to identify triggering events associated with marketing and outreach campaigns.
Consumer Assistance	Outreach	42657	The solution must provide the ability to segment consumers based on demographic data (e.g., aged out of Foster Care, upcoming 26th birthday, married, divorced, unemployment, etc.)
Consumer Assistance	Outreach	42658	The solution must provide the functionality to add Market & Outreach campaigns to the CRM.
Consumer Assistance	Outreach	42659	The solution must provide the ability to add Market & Outreach selection criteria, trigger events, and automated actions.
Consumer Assistance	Outreach	42660	The solution must provide the ability to gather Marketing and Outreach campaign results (e.g. customer responses, customer attendance at events, customer progress towards enrollment subsequent to campaign, customer contact with enrollment support providers, etc.).
Consumer Assistance	Outreach	42661	The solution must automatically gather vital record information (birth, death, marriage, imprisoned, recently discharged from military, etc.).
Consumer Assistance	Outreach	42662	The solution must provide the ability to trigger Marketing and Outreach campaigns based on defined time constraints.
Consumer Assistance	Outreach	42704	The solution must provide functionality that supports the full spectrum of Marketing and Outreach campaigns.
Consumer Assistance	Outreach	42705	The solution must provde functionality to produce on-demand static reports in support of Marketing and Outreach campaigns.
Consumer Assistance	Outreach	42706	The solution must provide the functionality to evaluate lead data and rank leads, idetifying the leads with the highest potential of positive outcomes (e.g., enrollment completion, effectuation, etc.).
Consumer Assistance	Outreach	42707	The solution must provide the functionality to produce data extracts / reports to include: • Performance • Sales channel performance analysis and reporting • Forecast sales pipeline • Marketing metrics by media type
Consumer Assistance	Outreach	42708	The solution must provide the functionality to produce real-time, holistic view of all Marketing category reports in a dashboard view.
Consumer Assistance	Outreach	42709	The solution must provide the functionality to create and produce dashboards based on Marketing categories, population segments and other criteria
Consumer Assistance	Outreach	42710	The solution must provide the functionality to gather and produce extracts and reporting metrics on outreach activity by date, location, and success.
Consumer Assistance	Outreach	42711	The solution must provide the functionality to generate a report of lead opportunities by Service Channels on a weekly and monthly basis. The report header should include: (1) Number of lead opportunities by Service Channel and (2) Year-To-Date total of lead opportunities by Service Channel.
Consumer Assistance	Outreach	42712	The solution must provide functionality to engage market segments with polls and surveys.
Consumer Assistance	Outreach	42713	The solution must provde functionality to support salesforce (Covered CA Certified Staff) contact/prospect/client management.
Consumer Assistance	Outreach	42714	The solution must provide the functionality to generate real-time email alerts sent directly to Covered CA Certified staff after a customer visits, the Covered CA website and completes a form and the 'opt in' (sharing information option).
Consumer Assistance	Outreach	42715	The solution must provide the functionality to produce direct communication with consumers (via email integration from CRM) to track and log activity.
Consumer Assistance	Outreach	42716	The solution must provide the functionality to track when a an e-mail has been successfully delivered, opened, etc.
Consumer Assistance	Outreach	42717	The solution must provide the functionality for a sales pipeline and activity dashboard.
Consumer Assistance	Outreach	42718	The solution must provide the functionality to assign leads and set appointments based on territory assignment and sales force availability.
Consumer Assistance	Outreach	42719	The solution must provide functionality to perform lead management.
Consumer Assistance	Outreach	42720	The solution must provide functionality for Covered CA Certified Staff to enter consumer leads (into the CRM) through the Covered CA website's "Contact Me" form and the "Shop and Compare" tool.
Consumer Assistance	Outreach	42721	The solution must provide the functionality to automatically prioritize leads based on lead status.
Consumer Assistance	Outreach	42722	The solution must provide functionality for the entry of data through the following devices: • Tablets • iPads • Computer Workstations • Printers • Scanners

Appendix A-4 - SOW Exhibit A - System Requirements Specification
(Extracted from CalHEERS RTM)

Category	Sub Category	Req ID	Requirement
Consumer Assistance	Outreach	42723	The solution must provide functionality for consumers to request to be contacted by specific Counselors if a unique Counselor ID is provided in the “Contact Me” form or “Shop and Compare” tool.
Consumer Assistance	Outreach	42724	The solution must provide functionality to identify consumer leads that originated from public relation efforts.
Consumer Assistance	Outreach	42725	The solution must provide functionality for Certified Staff to access assigned leads and lead statuses and follow the consumer’s application journey from X through enrollment.
Consumer Assistance	Outreach	42726	The solution must provide functionality to identify and remove duplicate leads.
Consumer Assistance	Outreach	42727	The solution must provide logic to process lead in a manner that facilitates an enrollment based on the consumer profile and other criteria.
Consumer Assistance	Outreach	42728	The solution must provide the functionality to capture specific languages requested by the lead.
Consumer Assistance	Outreach	42729	The solution should capture specific languages requested by the lead.
Consumer Assistance	Outreach	42730	The solution must provide functionality to support Special Enrollment and annual redetermination objectives.
Consumer Assistance	Outreach	42731	The solution must provide the functionality to capture consumer consent to process annual auto income verification / validation.
Consumer Assistance	Outreach	42732	The solution must provide the functionality to identify where in the Eligibility and Enrollment process a consumer is "stuck".
Consumer Assistance	Outreach	42733	The solution must provide functionality for California Healthcare Eligiblity, Enrollment and Retention System (CalHEERS) and CRM consumer Association.
Consumer Assistance	Outreach	42734	The solution must provide the functionality to capture and describe the marketing and outreach activities (volumes, target audience, dates, recommended response to questions, mailer code/unique ID). Note: link ID code to knowledge base
Consumer Assistance	Outreach	42735	The solution must provide the functionality to manage event calendaring, participate enrollment and follow-up activities.
Consumer Assistance	Outreach	42736	The solution must provide the functionality to support consumer self service for finding and registering for events.
Consumer Assistance	Outreach	42737	The solution must provide the ability for SCR's (could extend to CEC's, Agents, etc.) to search for events based on zip code, date or other unique selection criteria.
Consumer Assistance	Outreach	42738	The solution must provide the ability Consumers to search for events based on zip code, date or other unique selection criteria on a publicly available website.
Consumer Assistance	Outreach	42739	The solution must provide the ability for consumers to add event registration to their calendar client (e.g. Outlook, etc.).
Consumer Assistance	Outreach	42740	The solution must provide the administrative ability to easily add, edit and remove calendared events.
Consumer Assistance	Outreach	42741	The solution must provid the ability, via a public web interface, for interested parties to registered and withdraw from calendared events.
Consumer Assistance	Outreach	42742	The solution must provide the ability to send confirmation, via the performed method of communication, (e.g. email, usps, etc.) of event registration with information regarding the event to registered parties.
Consumer Assistance	Outreach	42743	The solution must provide the ability to send reminders, via the preferred method of communication, of upcoming events to registered parties.
Consumer Assistance	Outreach	42744	The solution must provide the ability to send follow up information, via the performed method of communication, to event attendees.
Consumer Assistance	Outreach	42745	The solution must provide SCR's (could extend to CEC's, Agents, etc.) visibility to consumer event participation via the CRM.
Consumer Assistance	Outreach	42746	The solution must provide the ability to store information about events including: Event ID Event Name Event Type Event Date Event Start Time Event End Time Event Sponsor Event Address Event City Event Zip Code Event Registration Limit Targeted Audience Business Initiative Preferred Language
Consumer Assistance	Outreach	42747	The solution must provide the functionality to interact via social media channels (e.g. Facebook, Twitter, YouTube, etc.)
Consumer Assistance	Outreach	42748	The solution will allow Marketing to engage their audience with polls and surveys.
Consumer Assistance	Outreach	42749	The solution must provide the ability for the CRM to present (display) consumer progress through the enrollment process. -Expansion of 360 View Functionality
Consumer Assistance	Outreach	42750	The solution must display most resent consumer enrollment information with family status.
Consumer Assistance	Outreach	42751	The solution must track and display all consumer outreach activities and outcomes at the marketing campaign level.
Consumer Assistance	Outreach	42752	The solution must track and provide the ability to manage consumer outreach activities based on age of interaction (aging driven events).
Consumer Assistance	Outreach	42753	The solution must provide the functionality to manage the timing and frequency of consumer outreach and marketing communication.
Consumer Assistance	Outreach	42754	The CRM must display consumer information such as account establishment date, application submission date, plan selection date, payment coverage effectuation date, plan selection, eligibility determination, etc.
Consumer Assistance	Outreach	42755	The CRM must display consumer upcoming enrollment events (e.g. re-determination, etc.)
Consumer Assistance	Outreach	42756	The solution must trigger events (consumer notification) based on income or family status that change consumer subsidy thresholds. (APTC vs Medical)

Category	Sub Category	Req ID	Requirement
Consumer Assistance	Outreach	42757	The solution must track and display all outreach activities and outcomes at the consumer level.
Consumer Assistance	Outreach	42758	The solution must track and display all consumer outreach activities and outcomes at the market segment level.
Consumer Assistance	Outreach	42759	The solution must associate consumers to assisters.
Consumer Assistance	Outreach	42760	The solution must allow assignment of a consumer or a lead to an in-person assister such as agent, CEC, Navigator, PBE, CEW, etc.
Consumer Assistance	Outreach	42761	The solution must provide review by delegation (i.e. An Assister/CEC needs to name someone who has their delegated authority to update records in the Lead Portal).
Consumer Assistance	Outreach	42762	The solution must allow reporting by delegation and report on the status of applications and leads worked to evaluate effectiveness (top producers).
Consumer Assistance	Outreach	42763	The solution must provide the ability to schedule or allow a consumer to sign-up/register for an event.
Consumer Assistance	Outreach	42764	The solution must capture allow for the capture, assignment, and reportability by "sales territory".
Consumer Assistance	Outreach	42765	The solution must provide a "sales territory" field with the ability to assign consumers to a "sales territory". The assignment of consumers to a specific territory would be done automatically based on criteria including geography, language, and other demographics.
Consumer Assistance	Outreach	42766	The solution must allow the "sales territory" field to be a variable so reports can be generated based on geographic areas, sales channels, or delegates within a sales channel.
Consumer Assistance	Outreach	42773	The solution must provide metrics for event interactions and event enrollment outcomes.
Consumer Assistance	Plan and Benefit Assistance		
Consumer Assistance	Plan and Benefit Assistance	40902	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall provide the functionality to allow a consumer or designated Assister to access their own case information through multiple service channels (e.g. web portal, phone, IVR).
Consumer Assistance	Plan and Benefit Assistance	40903	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall provide the functionality to allow a consumer to report changes to their case information through multiple service channels (e.g. web portal and phone).
Consumer Assistance	Plan and Benefit Assistance	40904	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall provide the functionality to link consumers to a list of Assistors that will be constructed by rules to be determined by the Exchange.
Consumer Assistance	Plan and Benefit Assistance	40905	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall provide the functionality for consumers to shop and compare plans with minimal initial data entry, for anonymous shopping.
Consumer Assistance	Plan and Benefit Assistance	40921	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall provide the following languages on the Web Portal and Online Chat: English and Spanish. The toll free number, IVR, and Online Chat shall state in Medi-Cal Managed Care Threshold languages they can reach an operator in their language.
Consumer Assistance	Plan and Benefit Assistance	40992	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall be compatible with Windows functionality allowing the Consumer to print, save to file, send information via email, or use any additional browser functionality.
Consumer Assistance	Plan and Benefit Assistance	40993	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall provide the functionality to email consumers when they have a new notification in their secure mailbox.
Consumer Assistance	Plan and Benefit Assistance	40994	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System must provide the functionality to send an email to the Consumer that correspondence is available for viewing in the California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) Secure Mailbox, when the Counsumer selects "Email" as their Preferred Method of Communication. This email will only be generated for Consumers who have created a California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) Account. The email must be sent in the Consumer's preferred language.
Consumer Assistance	Plan and Benefit Assistance	40995	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall provide the functionality to allow consumers to view, save and archive their California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) email notifications from their Web Portal login account.
Consumer Assistance	Plan and Benefit Assistance	41002	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall provide the functionality to save consumer information while consumer is logged on, and notify consumer of timeout expiration for saving data.
Consumer Assistance	Plan and Benefit Assistance	41003	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall provide the functionality to save consumer information if requested by consumer, and allow access to saved work, and to restart where the consumer left off at the time of their last save.
Consumer Assistance	Plan and Benefit Assistance	41004	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall provide the functionality to exit any screen without saving changes.
Consumer Assistance	Plan and Benefit Assistance	41030	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall provide the functionality for a consumer to officially and securely designate an Assister.
Consumer Assistance	Plan and Benefit Assistance	41031	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall provide the functionality to receive and record the consumer's designation of an authorized representative that can act on their behalf.
Consumer Assistance	Plan and Benefit Assistance	41040	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall provide the functionality for consumers to manage their account on mobile device via browser.
Consumer Assistance	Plan and Benefit Assistance	41366	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall provide the functionality allow Consumers the ability to identify and confirm selected assisters.
Consumer Assistance	Plan and Benefit Assistance	41393	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall provide the functionality to allow for tracking assister activities to ensure compliance with program requirements
Consumer Assistance	Reports		
Consumer Assistance	Reports	38288	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System must provide users a report of their active delegations.
Consumer Assistance	Reports	42813	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) system shall be able to display, and make available to print, the Form 1095-A Health Insurance Marketplace Statement from within the member's Portal.

Category	Sub Category	Req ID	Requirement
Consumer Assistance	Reports	42826	If a third-party vendor is used for printing Form 1095-A Health Insurance Marketplace Statement, the California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) system shall be able to generate an extract file, or many extract files, containing either the original or corrected/void Form 1095 along with the Covered CA cover letter and the form instructions; of which, will securely transmit to the third party vendor.
Consumer Assistance	Web Portal Online Help		
Consumer Assistance	Web Portal Online Help	40697	The Web Portal shall take advantage of and/or exceeds the consumer experience and framework defined by the UX2014 Project.
Consumer Assistance	Web Portal Online Help	40700	The Web Portal shall accommodates different consumers' access needs and facilitate and simplify the end-to-end process to attain and maintain health coverage.
Consumer Assistance	Web Portal Online Help	40779	The Web Portal shall include a toll free and online chat functionality for consumer assistance in Spanish and English.
Consumer Assistance	Web Portal Online Help	40780	The Web Portal shall provide links to phone, online chat, or IVR assistance in the Medi-Cal Managed Care Threshold languages.
Consumer Assistance	Web Portal Online Help	40813	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall provide the functionality for help screens and question icons (Spanish and English) to assist consumers with navigation and questions, and update help screens and question icons as needed.
Consumer Assistance	Web Portal Online Help	40823	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall provide the functionality to allow a person acting on behalf of an applicant/recipient to have the same access as the applicant/recipient, but with their own log on. For example, a guardian or responsible person can complete an application and check benefits.
Consumer Assistance	Web Portal Online Help	40842	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall provide the functionality to show the consumer the progress in the application process as the application is being completed by the consumer.
Consumer Assistance	Web Portal Online Help	40843	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall provide online chat whereby consumers can make inquiries to Service Center personnel.
Consumer Assistance	Web Portal Online Help	40844	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) Web Portal shall provide links to other entity websites that deliver other benefits.
Consumer Assistance	Web Portal Online Help	41159	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall provide the functionality to accommodate and support different users.
Consumer Assistance	Web Portal Online Help	41203	The Web Portal shall provide the functionality to receive consumer complaints, categorize the complaints, and route them for processing based on business rules.
Content			
Content	Application Submission and Update		
Content	Application Submission and Update	38587	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall streamline messaging and collections screens for Renewals to improve the application flow for the end user.
Content	General Requirement		
Content	General Requirement	39484	Update Live chat link in portal
Content	General Requirement	45470	The following case management content shall be provided in English and Spanish languages to support assisters in accordance to each assister's role and security authorization: A) Case management information B) Reporting, Forms, and Notices C) Appeal case information D) Issuer, Assister, Broker, Agent, and Navigator information
Content	General Requirement	45474	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall associate and manage consumer content from various sources: consumer, navigator, assister agent, and broker.
Content	General Requirement	45491	The following content for the Web Portal shall be provided in English and Spanish languages: A) Website text, instructions, links, field-level help, and navigation guidance B) Education Materials C) Online Assistance D) Online Chat E) Web-Videos F) Frequently Asked Questions (FAQs) G) Guided Self Help Tools H) QHP Information I) Forms J) Information and links to other health benefit programs
Content	General Requirement	45492	To enable users to reach an operator in their language, the following content for the Web Portal shall be provided in the Medi-Cal Managed Care Threshold Languages: A) Toll-free number B) IVR C) Online Chat
Content	General Requirement	45836	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall add a static message with a link on the Other Health Coverage (Current Enrollment) page. Static message with a link shall appear on consumer view during Intake, Report A Change and Renewal application mode.
Content	Plan and Benefit Assistance		
Content	Plan and Benefit Assistance	39622	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall provide messaging to consumers who enroll between the dates of 1/16/2020 and 1/31/2020 regarding the importance of using the Pay Now function to make their binder payment so that they may begin using their benefits immediately.
Content	Renewal		

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(Extracted from CalHEERS RTM)

Category	Sub Category	Req ID	Requirement
Content	Renewal	38325	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) system shall update benefit-year-specific text as necessary on all California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) pages (e.g. Changing hard coded dates to dynamic dates, etc).
Content	Web Portal Online Help		
Content	Web Portal Online Help	38966	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) Shall have a Google Tag Manager script enabled on the Single Streamlined Application pages.
Content	Web Portal Online Help	38967	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) Shall have a Eloqua Tag Manager script enabled on the Single Streamlined Application pages.
Contract Management			
Contract Management	General Requirement		
Contract Management	General Requirement	44260	As part of the Budget Management approach, the Vendor shall address processes by which invoices can be objectively assessed for accuracy, completeness, and adherence to contract terms and related cost schedules.
Contract Management	General Requirement	44261	The Vendor shall describe how the implications of potential Contract changes will be considered, analyzed, and documented as part of a formal Change Order and/or contract amendment. As appropriate, additional cost schedules must be developed, augmented, and maintained within the existing set of schedules to ensure that all costs are contained within a single file
Contract Management	General Requirement	44302	The Vendor shall develop and maintain a Contract Management approach that will include specific processes and procedures to ensure that contractual obligations related to the following areas are tracked and fulfilled: A) Deliverable completion, submittal, Review, and Acceptance. B) Deliverable schedules. C) Deliverable, Services, System, Enhancements, and performance warranties and remedies. D) Equipment and Software purchases and ongoing Maintenance and Support, including software license agreements, and financial information required for asset and inventory management, and audit purposes E) Key Milestones are acceptable and associated liquidated damages are applied appropriately if the Key Milestones are not achieved timely F) Key Staff are acceptable and associated liquidated damages are applied appropriately if the Key Staff are not provided in accordance with agreement terms G) Adherence to SLAs H) Payment schedules, holdbacks and release of holdbacks based on defined conditions I) Warranty assessment and reporting J) Administrative terms (e.g., insurance, confidentiality policies, and staff agreements) K) Management of subcontracts
Conversion			
Conversion	General Requirement		
Conversion	General Requirement	43409	The Vendor shall develop a Conversion methodology that addresses the needs of each conversion effort. The Vendor shall: analyze data of existing Systems data files; develop a Conversion plan; provide the necessary Software; develop training materials to support the Conversion of information from third party Systems; and implement the Conversion plan. The Vendor shall use an automated approach to converting the data into the System.
Conversion	General Requirement	43410	An analysis of existing Systems input files shall be accomplished to determine the validity and internal integrity of the data selected for Conversion. This is anticipated to be a joint effort, with the Vendor taking the lead role, but relying on the Exchange for specific information. It is fully expected that Exchange staff will assist the Vendor in determining which data from the existing System input files are valid and reliable. A process for data verification shall be developed that identifies and reports inconsistencies with the existing Systems and other errors. The timing of the analysis shall be early enough in the Conversion planning activity so that it provides ample opportunity to allow for the manual and/or electronic clean up of data well in advance of actual data conversions. An approved methodology shall be used to determine unduplicated individual data and electronic images.
Conversion	General Requirement	43411	The Vendor shall prepare a Conversion Test Plan, and provide the test environment.
Conversion	General Requirement	43417	The Vendor shall develop an Conversion File Agreement that will document file layouts (mock and production files, transactions frequencies, test procedures, security and file transfer protocols.
Conversion	General Requirement	43426	All Conversion programs shall be unit, integration, and System tested by the Vendor, as well as acceptance tested by the Exchange prior to use in production Conversion activities.
Conversion	General Requirement	43427	The Vendor shall conduct multiple sets of trial conversions. These tests shall simulate the actual Conversion process, including all manual Conversion procedures, and subsequent processing cycles operate normally. The Vendor shall provide a written Conversion Test Report as a result of the Conversion shall ensure that all subsequent processing cycles operate normally. Test that includes at a minimum: A) The test results and performance analysis B) The problems encountered C) Corrective actions taken D) Percentage of automated conversions, discrepant conversions, failed conversions, and retest efforts
Conversion	General Requirement	43428	The final Conversion processes shall be executed by the Vendor in accordance with the Conversion Plan.
Conversion	General Requirement	43429	The Vendor shall review each automated Conversion run to ensure the accuracy of the Conversion and to generate a report of those data elements that are unable to be converted before users access the System in production.
Conversion	General Requirement	43430	The Vendor shall analyze any failed Conversion attempts, document the planned approach for another attempt(s) (such as additional data cleanup and rerun, or manual processes) and execute and oversee reruns or manual processes as appropriate
Conversion	General Requirement	43431	The Vendor shall conduct, oversee, and monitor manual Conversion activities as appropriate, identify and document problems associated with manual case Conversion processes, recommend and implement corresponding solutions, and perform time studies of The resulting time study information will be used to refine Conversion-related training, manual Conversion processes, and Exchange implementation Conversion expectations, as appropriate.
Conversion	General Requirement	43496	The Vendor shall store all data files that are transitioned to the Vendor. These files shall be stored in the back-end once the data has been converted.

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(Extracted from CalHEERS RTM)

Category	Sub Category	Req ID	Requirement
Conversion	General Requirement	43497	The Vendor shall supply the necessary Equipment and Software to conduct conversion and conversion testing activities.
Conversion	General Requirement	46320	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall migrate multi-affiliated Agents and Agencies to Salesforce PCAP Org from the current production Salesforce Org
Conversion	General Requirement	46321	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall create relationships of migrated Agents with related objects
Conversion	General Requirement	46324	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall create records for Account, Contact and User objects in Salesforce
Conversion	General Requirement	46325	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall create additional relationship records between Contact and Training, LMS Course, Criminal Record Disclosure, Required Documentation, Files, Site Served, Location objects
Data Warehouse			
Data Warehouse	General Requirement		
Data Warehouse	General Requirement	42313	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall be able to create a data model to capture Eligibility determination for all applications California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) data warehouse shall identify eligibility activity that results in a change to key eligibility values California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) data warehouse shall identify the latest eligibility for each consumer
Data Warehouse	General Requirement	42314	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall provide traceability on eligibility results for use by data users across all applications, plan selections, and other data domains
Data Warehouse	General Requirement	42315	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall facilitate analysis of income and other application inputs that were used by BRE to derive eligibility results data for all eligibility determinations
Data Warehouse	General Requirement	42316	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall provide Member Month View of eligibility by coverage year including detailed analysis of eligibility transitions, sequences, or overlaps
Data Warehouse	General Requirement	42317	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall provide Insurance Affordability Programs (IAP) transition—including both Carry Forward transitions (CC-> MC) and consumers transitioning from Medi-Cal to Covered California (MC->CC) -- and their impact on enrollment data
Data Warehouse	General Requirement	42318	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall allow historical view of eligibility status changes across various programs and coverage periods
Data Warehouse	General Requirement	42319	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) data warehouse shall provide verification results and subsequent conditional eligibility, ROP, and document upload actions and results, impacting eligibility determinations across all applications California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) data warehouse shall provide comprehensive history of document upload activity for each consumer
Data Warehouse	General Requirement	42320	Implementation of Audit Balance Framework on California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) data warehouse. 1. Provide automated results for data processing/loads (the start/end date and time, number of rows processed, inserted, updated, and rejected/deleted in each step etc.) for each run 2. Identify data discrepancies against source data and capture daily run times
Data Warehouse	General Requirement	42321	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall facilitate Fault Tolerance of loads and Data Deduplication. 1.Facilitate auto restart of loads from point of failure 2. Eliminate the redundant storage and data structures based on defined keys
Data Warehouse	General Requirement	42322	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) data warehouse shall provide Error-Reprocessing capability 1. Handle error – failures and enable re-processing by creating error logic codes 2. Provide ability to process data and run ETLs for previous runs based on data dependencies. 3. Provide micro batch run capability(Multiple ETL runs in a day) 4. Email notification in case of failure
Data Warehouse	General Requirement	42323	Data Model -Lineage
Data Warehouse	General Requirement	42324	Data Model - Catalog Updates & Governance
Data Warehouse	General Requirement	42325	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) data warehouse shall be able to create a data model to capture all applications, and describe associated attributes related to enrollment, eligibility, users, delegation, and other dimensions and to capture core features of all Applications, including related to predefined consumer paths or activity California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) data warehouse shall provide details related to household/application level that are not part of the submitted application for eligibility, such as employer contact information, mail undeliverable flags, etc.
Data Warehouse	General Requirement	42326	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) data warehouse shall provide various verification results (eligibility and otherwise) for all Applications
Data Warehouse	General Requirement	42327	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) data warehouse shall provide Renewal details for all Applications for each coverage year
Data Warehouse	General Requirement	42328	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) data warehouse shall be able to create a frozen view of application data that was current at the time of submission for every submission for every application
Data Warehouse	General Requirement	42329	Special Enrollment Period for all Applications 1.Provide QLE event details and the various statuses for all application created during Special enrollment period 2.Capture new addition to QLE and SEP reasons will be added
Data Warehouse	General Requirement	42330	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) data warehouse shall provide details related to household/application level that are not part of the submitted application for eligibility, such as employer contact information, mail undeliverable flags, etc.
Data Warehouse	General Requirement	42331	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) data warehouse shall facilitate association of application data to various attributes that were current on the case at the time of submission
Data Warehouse	General Requirement	42332	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) data warehouse shall capture enrollee (defined as each individual covered on each enrollment) information and associated enrollment details
Data Warehouse	General Requirement	42333	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) data warehouse shall provide enrollee details related to IAP transitions
Data Warehouse	General Requirement	42334	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) data warehouse shall provide details on Enrollee Churn Population with plan choices per enrollment year

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(Extracted from CalHEERS RTM)

Category	Sub Category	Req ID	Requirement
Data Warehouse	General Requirement	42335	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) data warehouse shall provide views of enrollee and enrollment information organized by coverage month
Data Warehouse	General Requirement	42336	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) data warehouse shall facilitate Premium Credit details of enrollee
Data Warehouse	General Requirement	42337	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) data warehouse shall provide insight into continuous enrollment history for each enrollee
			California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) data warehouse shall provide insight into Prior and Future Year Enrollee Attributes
			California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) data warehouse shall provide insight into Enrollee Historical Attributes
Data Warehouse	General Requirement	42338	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) data warehouse shall provide detailed information on Plan Enrollment data
Data Warehouse	General Requirement	42339	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) data warehouse shall provide IAP transition information related to enrollments
Data Warehouse	General Requirement	42340	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) data warehouse shall provide Enrollments Member Month View per coverage year at Enrollment grain
Data Warehouse	General Requirement	42341	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) data warehouse shall produce a report of all individuals on all submitted applications, by coverage year
Data Warehouse	General Requirement	42342	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) data warehouse shall provide historical details of individual metrics for submitted application
Data Warehouse	General Requirement	42343	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) data warehouse shall produce all CMS metrics
			California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) data warehouse shall produce public reporting and KPIs on eligibility and applications
Data Warehouse	General Requirement	42344	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall provide detailed information on Delegation attributes
Data Warehouse	General Requirement	42345	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall provide historical details for delegation attributes
Data Warehouse	General Requirement	42346	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall facilitate analysis on role-based user profiles (delegate details)
Data Warehouse	General Requirement	42347	Orchestration & ETL Process Flow Scheduling
Data Warehouse	General Requirement	42348	Snowflake & Tableau Reporting Integration
Data Warehouse	General Requirement	42349	Oracle to Snowflake Integration
Data Warehouse	General Requirement	42350	BIP Reports to Extracts Conversion
Data Warehouse	General Requirement	42351	Graphical Reports to Tableau Conversion
Data Warehouse	General Requirement	42352	Eligibility Adhoc Reporting
Data Warehouse	General Requirement	42353	Enrollee Adhoc Reporting
Data Warehouse	General Requirement	42354	Enrollment Adhoc Reporting
Data Warehouse	General Requirement	42355	Application Adhoc Reporting
Data Warehouse	General Requirement	42356	Submitted Individual Adhoc Reporting
Data Warehouse	General Requirement	42357	Delegation Adhoc Reporting
Data Warehouse	General Requirement	42358	OBIEE Dashboards to Tableau Dashboard conversion
Data Warehouse	General Requirement	42359	Data Quality Reporting
Data Warehouse	General Requirement	42360	Document Upload History/Activity
Data Warehouse	General Requirement	42361	Tableau Data connections & Frequency set up
Data Warehouse	General Requirement	45683	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) Technology Refresh - Oracle to RDS Aurora PostgreSQL Database - Security- Encryption
Data Warehouse	General Requirement	45684	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) system shall store encrypted data in the cloud
Data Warehouse	General Requirement	45685	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) system shall be encrypt PII data during transit and at rest using FIPS 140-2 encrytion standards
Data Warehouse	General Requirement	45686	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) system shall encrypt transaction data
Data Warehouse	General Requirement	45687	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) system shall encrypt log and audit files
Data Warehouse	General Requirement	45688	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) system shall encrypt database backups for secure long-term retention
Data Warehouse	General Requirement	45689	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) system shall encrypt database data objects stored in S3
Data Warehouse	General Requirement	45722	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) system shall document disaster recovery policies and procedures (SOP) for backup and restoration of databases.
Data Warehouse	General Requirement	45723	Autoscaling of storage and compute
Data Warehouse	General Requirement	45724	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) Technology Refresh - Oracle to RDS Aurora PostgreSQL Database - Database - Performance
Data Warehouse	General Requirement	45725	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) system performance shall match current system performance for average page response time
Data Warehouse	General Requirement	45726	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) system performance shall be match current system performance for EHIT processing
Data Warehouse	General Requirement	45727	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) system performance shall be match current system performance for Batch processing
Data Warehouse	General Requirement	45728	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) Technology Refresh - Oracle to RDS Aurora PostgreSQL Database - Database - Backup
Data Warehouse	General Requirement	45729	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) system database backups shall be comply with CMS requirements for protecting data at rest
Data Warehouse	General Requirement	45730	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) system database backups shall be encrypt PII at the storage location
Data Warehouse	General Requirement	45731	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) system shall determines policy for system backup verification and appropriate periodicity of the check.
Data Warehouse	General Requirement	48314	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall create Google Tag in GTM.

Category	Sub Category	Req ID	Requirement
Data Warehouse	General Requirement	48315	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall create tags in MAPS3 Final Submit Page for following items: Check/uncheck actions for Provide eSignature Check/uncheck/error response for Binding Arbitration Agreement
Data Warehouse			California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall create tags on Choose a Health/Dental Plan page (both logged in and anonymous Shop and Compare flows) for following items: Label/up and down arrow clicks for Metal Tiers, Insurance Companies and Network Types Page number traverse (both back arrow and front arrow)
Data Warehouse	Reports		
Data Warehouse	Reports	48236	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall update the outbound weekly reconciliation file to align with SOGI changes made in the outbound 834 transactions to add columns for Gender Identity, Birth Gender, and Sexual Orientation.
Data Warehouse	Reports	48239	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall populate the Outbound Weekly Audit file with Gender Identity information at the member-level, if provided.
Data Warehouse	Reports	48240	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall populate the Outbound Weekly Audit file with Birth Gender information at the member-level, if provided.
Data Warehouse	Reports	48241	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall populate the Outbound Weekly Audit file with Sexual Orientation information at the member-level, if provided.
Data Warehouse	Shop & Compare		
Data Warehouse	Shop & Compare	48458	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall capture the Plan tile position on the Choose a Health Plan Page
Data Warehouse	Shop & Compare	48459	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall capture where the plan is initially placed on the page (plan tile default position) after the default filtering is applied based on preferences and prior to any user filtering/sorting.
Deliverable Management			
Deliverable Management	General Requirement		
Deliverable Management	General Requirement	44297	The Vendor shall define and implement the process for submitting California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) project deliverables defined in this RFP including but not limited to: A) DEDs B) General Acceptance Criteria C) Draft Submissions D) Revisions E) Final submissions F) Approval/Acceptance G) CMS Defined Stage Gate Review Deliverables
Deliverable Management			As a tracking and deliverable management tool, the Vendor shall provide and maintain the following information within a single file: A) All DEDs and their associated due dates, submittal dates and approval dates B) All deliverables, their due dates, submittal dates, approval dates, invoice dates and payment dates (as applicable)
Deliverable Management	General Requirement	44299	For the following specific key deliverables, the Vendor shall conduct a formal walkthrough of the initial and final deliverables with Exchange Project staff, stakeholders, QA, IV&V and oversight consultants. A) Initial Project Work Plan B) System Design Document C) Interface Control Document D) Test Plan E) Implementation Plan F) Training Plan G) O&M Manual
Deliverable Management			The Vendor shall store formal draft and final versions of all deliverables on the California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) Project SharePoint site, which should be readily accessible by all Exchange Project staff, QA, IV&V and oversight consultants.
Detailed Design Review			
Detailed Design Review	General Requirement		

Category	Sub Category	Req ID	Requirement
Detailed Design Review	General Requirement	43522	As part of the Detailed Design Review, the Vendor shall prepare a Detailed Requirements Traceability Matrix to include but not be limited to: A) Approach to Requirements Analysis and Traceability B) Summary of Findings C) List of Requirements D) List of Deliverables E) Requirements mapped to Deliverables F) Deliverables mapped to Requirements G) Requirements without matching Deliverables H) Deliverables without matching Requirements I) Description and cataloging of specific services, both technical and business, that will be available for reference and reuse by other State agencies
Detailed Design Review			The Vendor shall prepare a System Design Document (Preliminary) to include at a minimum: A) System Architecture B) Data Design C) Human-Machine Interface D) Operational Scenarios E) Detailed Design F) System Integrity Controls G) External Interfaces
Detailed Design Review			The Vendor shall prepare an Interface Control Document (Preliminary) to include at a minimum: A) Description of all System Interfaces: Federal, State and Local B) Detailed Interface Requirements C) Communication Protocols with external entities D) Interface development and test schedule E) Contingency plans
Detailed Design Review			The Vendor shall prepare a Database Design Document (Preliminary) to include at a minimum: A) Design Decisions B) Detailed Database Design C) Database Administration And Monitoring
Detailed Design Review			The Vendor shall prepare a Data Management Plan (P) to include at a minimum: A) Approach for managing data during and after project execution. B) Data archiving plan C) Data retention plan
Detailed Design Review	General Requirement	43528	The Vendor shall prepare a Physical Data Model (Preliminary) to include at a minimum: B) Participants Roles And Responsibilities C) Conceptual, Logical, And Physical Data Models D) PDM Concepts E) PDM Relationship Views F) Deliverables G) Physical Data Model (PDM) Development H) Extract, Transform And Load Process I) PDM Data Dictionary Development J) Project's Acronyms K) Appendix A: Physical Data Model Diagram L) Appendix B: Extract, Transform, And Load Diagram M) Appendix C: Physical Data Model Matrix N) Appendix D: PDM Data Dictionary

Appendix A-4 - SOW Exhibit A - System Requirements Specification
(Extracted from CalHEERS RTM)

Category	Sub Category	Req ID	Requirement
Detailed Design Review		43529	The Vendor shall prepare a Data Conversion Plan (Preliminary) to include at a minimum: A) Data Conversion Strategy and Approach B) Staffing and roles and responsibilities of Exchange and Vendor staff C) A list of files being converted D) Data Conversion Preparation E) Data Conversion Specifications F) A cross-reference of existing data elements to California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) data elements G) Conversion rules for each existing and new data element H) Methods for calculating default values, as appropriate I) Manual processes required including preparation and actual Conversion, and estimated work effort and timeline for each J) The approach for training users and technical staff in both automated and manual Conversion procedures K) Reports
	General Requirement		
Detailed Design Review	General Requirement	43530	The Vendor shall prepare and deliver a Assister Management Plan to describe the approach to Assister Management, to include recording and tracking Assister training, education, tracking spoken languages and handling Assister complaints.
Detailed Design Review	General Requirement	43531	The Vendor shall prepare and deliver a comprehensive plan to describe the approach to managing the Shop functionality and services.
Detailed Design Review	General Requirement	43550	The Vendor shall prepare and deliver a Centralized Provider Directory Database Plan to describes the approach to delivering the Centralized Provider Directory Database, its contents and how it would be maintained.
Development and Testing			
Development and Testing	General Requirement		
Development and Testing	General Requirement	39754	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall change/modify the Schema to consume CMS State-based Exchange Response (SBMR) file.
Development and Testing	General Requirement	39936	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall create new callback service (SOAP Service) to receive email bounce-back status from Salesforce Marketing Cloud
Development and Testing	General Requirement	39950	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall extract the existing processing logic when email notification is bounced from EML-1000-DD-04 to this new callback service
Development and Testing	General Requirement	39951	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall implement an OAUTH refresh logic to request a new OAUTH token from Salesforce Marketing Cloud based on the configured 20 mins TTL (time to live) in Salesforce Marketing Cloud
Development and Testing	General Requirement	39952	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall implement Oracle API Gateway policies to allow outbound calls from California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) to Salesforce Marketing Cloud.
Development and Testing	General Requirement	39953	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall implement Oracle API Gateway policies to configure callback SOAP service from Salesforce Marketing Cloud to California Healthcare Eligibility, Enrollment and Retention System (CalHEERS)
Development and Testing	General Requirement	39954	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall implement the firewall changes per the new Interfacing Partner onboarding document to allow connectivity between California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) and Salesforce Marketing Cloud
Development and Testing		43412	Non Phase-Specific Artifacts Some artifacts will be used throughout the project life cycle to facilitate decision making and communication. The following list of artifacts are recommended by CMS and the Vendor shall utilize: A) Section 508 Product Assessment: Assessment by COTS/GOTS/custom software manufacturers, developers, or Vendors to demonstrate how their product does or does not meet the various Section 508 requirements. B) Security: Continual assessment and refinement of security considerations within the Exchange and between interfacing agencies. C) Earned Value Management Data: Data related to measuring project progress by combining measurements of scope, schedule, and cost to provide early warning of performance problems. E) Periodic Briefings and Meeting Minutes: Pre-scheduled and as-needed meetings with CMS and other key stakeholders to discuss progress, joint-solution building, and issue resolution.
	General Requirement		
Development and Testing	General Requirement	43413	The Vendor shall support User Acceptance Testing for each Release for durations mutually agreed to in User Acceptance Test Plan. Overall UAT test timeframe across the DD&I releases will not be less than 60 days.
Development and Testing	General Requirement	43414	The Vendor shall provide the ability to "select" production data for input into test environment. Production data must be de-identified. The requirement for de-identified data may be waived or modified at the discretion of the Exchange.
Development and Testing	General Requirement	43432	The Vendor shall provide documentation of test results on all System changes. Implementation of the new functionality may only begin after approval by the Exchange of the test results and required deliverables.
Development and Testing	General Requirement	43433	The Vendor shall allow for setup of test cases for positive and negative testing and configurations that enable testing new capability that is not yet in production.
Development and Testing	General Requirement	43434	The Vendor shall conduct changes to the Baseline (core functionality) System application (functionality developed to meet the January 1, 2014 deadline) through an allocation of 15,000 hours during the Development and Implementation phase. The allocation of these hours is at the sole discretion of the Exchange.
Development and Testing	General Requirement	43435	The Vendor shall conduct changes to the Expanded System (core enhanced functionality) System application through an allocation of 15,000 hours during the Development and Implementation phase. The allocation of these hours is at the sole discretion of the Exchange.
Development and Testing	General Requirement	43438	Implementation planning must be integrated with Site Preparation and Installation of Equipment and Software, Training Delivery, Training Development, and Organizational Change Management

Appendix A-4 - SOW Exhibit A - System Requirements Specification
(Extracted from CalHEERS RTM)

Category	Sub Category	Req ID	Requirement
Development and Testing	General Requirement	43448	The Vendor shall provide analysis of production versus test results (e.g., field level compares with reporting).
Development and Testing	General Requirement	43453	The Vendor shall conduct Unit, Assembly, System, End-to-End, Automated Regression, and Performance/Stress Testing on System and System modifications.
Development and Testing	General Requirement	43454	The Vendor shall ensure that end-to-end functional Testing is done across all organizational boundaries including all interfaces.
Development and Testing	General Requirement	43455	The Vendor shall successfully complete Assembly Test for a given set of integrated functionality prior to beginning System or Interface Testing.
Development and Testing	General Requirement	43456	The Vendor shall develop and deliver a California specific 834 companion guide that will be used as the interface design that will support sponsor's contract with the carriers.
Development and Testing	General Requirement	43457	The Vendor shall provide the ability to save and reuse all test cases without the need to re-enter the data.
Development and Testing	General Requirement	43458	The Vendor shall use the CMS ELC methodology, processes, and tools to identify and capture the necessary details, direction, and artifacts to define and implement California Healthcare Eligibility, Enrollment and Retention System (CalHEERS).
Development and Testing	General Requirement	43459	The Vendor shall clarify each required CMS ELC artifacts as part of the Requirements, Analysis and Design phase and include them all project management plans and schedules.
Development and Testing	General Requirement	43460	The Vendor shall be responsible for facilitating and managing Joint Application Requirement Sessions (JARS), Joint Applicatin Design Sessions (JADS), focus groups, etc supporting the Exchange
Development and Testing	General Requirement	43461	The Vendor shall provide the capability for regression testing that supports complete System life cycle testing.
Development and Testing	General Requirement	43462	The Vendor shall support the ability to test and implement two concurrent releases on a monthly basis.
Development and Testing	General Requirement	43463	The Vendor shall track test cases that have expected results documented to show that the proposed change does not introduce other changes that produce unwanted results.
Development and Testing	General Requirement	43464	The Vendor shall provide a library of test cases and use cases that may be selected and modified by the user for testing.
Development and Testing	General Requirement	43465	The Vendor shall provide search capability for the test case library that is cross-referenced to the logic/edit that the identified test case is designed to test.
Development and Testing	General Requirement	43466	The Vendor shall allow for testing of all System development projects before and after implementation.
Development and Testing	General Requirement	43467	The Vendor shall provide and maintain the capability for on-line end-to-end testing of all California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) business processes through the System, and return processing and error messages to the submitter.
Development and Testing	General Requirement	43469	Vendor shall propose and implement a strategy to interface with each of the existing SAWS.
Development and Testing	General Requirement	43471	The Vendor shall include a test version of all batch and on-line programs and files to be used for testing releases and non-release changes.
Development and Testing	General Requirement	43472	The Vendor shall provide the ability to execute impact analysis testing of any proposed change.
Development and Testing	General Requirement	43473	The Vendor shall allow users to create and edit application, enrollment, case and health plan records for testing.
Development and Testing	General Requirement	43549	The Vendor shall establish all necessary environments of sufficient size to support all phases of the system development life cycle including Development, testing (including user acceptance and production testing), Implementation, Maintenance, Operations, and continued Development and testing required after initial Operations have commenced.
Development and Testing	General Requirement	43560	The vendor shall perform end-to-end testing for each release as mutually agreed to in the Final System Test Plan. Overall end-to-end test timeframe across the DD&I releases will not be less than three months.
Development and Testing	General Requirement	43561	The Vendor shall provide and Requirements Management tool,processes and procedures for managing, tracking and tracing requirements throughtout D&I and O&M.
Development and Testing	General Requirement	45099	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) system shall provide a Time-shift enabled test environment for integrated system testing between California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) and LRS.
Development and Testing	General Requirement	45100	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) system shall provide a Mock Conversion environment to test LEADER to LRS conversion including the eHIT interface transactions with California Healthcare Eligibility, Enrollment and Retention System (CalHEERS).
Development and Testing	General Requirement	45260	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall include Regression Integration testing for this CR.
Development and Testing	General Requirement	45862	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall accommodate an additional 2 weeks of data prep for SAWS integration testing in the R22.9 release schedule, for a total of 4 weeks data prep.
Development and Testing	General Requirement	45863	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall provide all necessary functional test environment support for SAWS renewal batch testing.
Ease of Use			

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Category	Sub Category	Req ID	Requirement
Ease of Use	Eligibility Determination		
Ease of Use	Eligibility Determination	39204	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) system shall only count household members that qualify for Covered California programs in the Health Plan Selection - Preview page.
Ease of Use	General Requirement		
Ease of Use	General Requirement	41326	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall update language on the Create Account Page to direct consumers in linking an existing application (Medi-Cal/MCAP/CCHIP transition specific) to their account.
Ease of Use	General Requirement	41327	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall streamline the account creation process by automatically using the existing user data to create the user account.
Ease of Use	General Requirement	41328	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall allow consumers to access the streamlined account creation process through the "Access Your Information" tile on the "Choose Plan" page.
Ease of Use	General Requirement	41329	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall require an activation/Opt In from the consumer if auto-plan selection results in a \$0 net premium for transitioning consumers who are added to a new enrollment group.
Ease of Use	General Requirement	41330	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall allow the consumer to Opt In until one of the following occurs: -The consumer decides to Opt Out for coverage -Until the last day of the first month of coverage - Until they complete the Opt-in process -The enrollment status is no longer "Pending" (meaning consumer canceled/terminated the enrollment from GI screens)
Ease of Use	General Requirement	41331	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall allow the consumer to provide their Opt In confirmation on a new California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) page.
Ease of Use	General Requirement	41332	CalHEERS shall communicate the consumer's Opt In attestation to GI.
Ease of Use	General Requirement	41333	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall create a process to Opt Out/Cancel enrollments in which the consumer is auto-plan selected to a new enrollment group.
Ease of Use	General Requirement	41334	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall allow the consumer to opt out until one of the following occurs: -The consumer decides to Opt In for coverage (this is only available to \$0 Net Premium transitions) -Until the last day of the first month of coverage -The plan moves to "Confirm" status because the consumer has paid their premium and the carrier has sent the confirmation transaction back (this is only available to consumers with > \$0 Net Premium) -The enrollment status is no longer "Pending" (meaning consumer canceled/terminated the enrollment from GI screens) - They complete the Opt Out process.
Ease of Use	General Requirement	41335	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall allow the consumer to provide their Opt Out attestation on a new California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) page.
Ease of Use	General Requirement	41336	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall capture reasons why the consumer has decided to Opt Out on a new California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) page.
Ease of Use	General Requirement	41337	CalHEERS shall communicate the consumer's Opt Out attestation to GI.
Ease of Use	General Requirement	41340	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall display messaging on the Consumer Home Page for the Medi-Cal/MCAP/CCHIP transitioning population.
Ease of Use	General Requirement	41341	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall build a page to display the transition-specific information for all consumers with a transition flag who are auto-plan selected into a new plan or have eligibility to Unsubsidized CCP.
Ease of Use	General Requirement	41342	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall display the consumer's auto-plan selection plan details at an enrollment group level including their monthly premium, carrier, plan name and metal tier, enrollment status, Enrollment ID, household members' name/age enrolled in the enrollment group, and coverage start date.
Ease of Use	General Requirement	41343	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall allow the consumer to take the following actions on the new dashboard: -Opt In/Opt Out (\$0 Net Premium) -Keep Plan/Opt Out (> \$0 Net Premium)
Ease of Use	General Requirement	41344	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall communicate all the carriers available to the consumers in their County of Responsibility (COR).
Ease of Use	General Requirement	41367	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall provide a redirection link to the "Enrollment Dashboard" to allow consumers to take actions on the GI dashboard.
Ease of Use	General Requirement	41368	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall display a "Contact Us" section which will provide the consumer with information on who to contact for assistance.
Ease of Use	General Requirement	41369	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall display a "Report a Change" call to action to allow the consumer to report a change to their application.
Ease of Use	General Requirement	41370	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall display the remaining days for the consumers to complete their Opt In/Opt Out decisions at an enrollment level.
Ease of Use	General Requirement	41371	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall display a module for transition individuals with eligibility to unsubsidized CCP only including the following: -Plan Selection Status -QLE end date -Name and Age of transition consumers Eligible/Conditionally Eligible to Unsubsidized CCP only -Choose Plan button that redirects the consumer to the "Enrollment Dashboard". -Review Application button that will navigate the consumer to their "Submitted Application". -Tooltip banner with a link to the "Eligibility Results Summary" page.

Category	Sub Category	Req ID	Requirement
Ease of Use	General Requirement	41372	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall allow consumers to select the enrollment groups they want to respond for.
Ease of Use	General Requirement	41373	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall not consume the response when all members of a > \$0 Net Premium New APS enrollment group chooses to keep plan (not Opt Out).
Ease of Use	General Requirement	41374	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall allow the consumer to review their attestation responses on a confirmation screen.
Ease of Use	General Requirement	41375	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall direct the consumer to the "Enrollment Dashboard" once attestations have been successfully submitted.
Ease of Use	General Requirement	41376	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall display the MCT dashboard for APS-New consumers if they have the ability to take Opt In/Opt Out actions.
Ease of Use	General Requirement	41377	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall display the MCT dashboard for Unsubsidized CCP individuals until their QLE end date or until the transition flag is no longer valid or if all household members have completed health plan selection whichever occurs first.
Ease of Use	General Requirement	41380	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall communicate to IVR household members who can Opt In/Opt Out via the authenticateIVRUser response.
Ease of Use	General Requirement	41382	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall capture reasons why the consumer has decided to Opt Out via IVR.
Ease of Use	General Requirement	41383	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall consume the Opt In/Opt Out response from IVR in a new endpoint.
Ease of Use	General Requirement	41392	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall display a banner on the "Household Eligibility Results Summary" page if there is an active APS flag and the consumer is Eligible/Conditionally Eligible to APTC when they land on the page.
Ease of Use	General Requirement	42256	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall display the MCT dashboard for Unsubsidized CCP individuals until their QLE end date or until the transition flag is no longer valid or if all transition Unsubsidized CCP household members have completed health plan selection whichever occurs first.
Ease of Use	General Requirement	45475	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall pre-populate screens if the consumer information already exists in California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) or other Exchange-approved sources.
Ease of Use	General Requirement	45476	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall identify mandatory fields that require completion before accepting.
Ease of Use	General Requirement	45477	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall determine eligibility, enrollment, and start of coverage in real time.
Ease of Use	General Requirement	45478	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall confirm successful transmission of submitted customer information (e.g., application, verification, or information update) and include confirmation number and contact information for the receiving location(s) via email when consumer email is available.
Ease of Use	General Requirement	45479	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall enable the customer to download forms and notices from the Web Portal.
Ease of Use	General Requirement	45480	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall provide print options to format for printing the application, correspondence, notices and any stored images.
Ease of Use	General Requirement	45481	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall provide multiple options for customer correspondence (e.g., e-mail, print, save file)
Ease of Use	General Requirement	45482	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall have the ability to notify the consumer prior to expiration that their incomplete work will be deleted.
Ease of Use	General Requirement	45493	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall allow navigation between multiple, related input screens without losing information input from the original screen and consumer to print each screen with a print layout that is formatting for printing.
Ease of Use	General Requirement	45494	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall provides a mechanism for the webmaster to obtain feedback accessibility improvement, general comments and other recommendations.
Ease of Use	General Requirement	45500	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall support role-based workflow routing in which tasks are assigned to job functions.
Ease of Use	Interfaces		
Ease of Use	Interfaces	47647	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall update the Data Element 3035 "Expected Delivery Date" in the HX12 transaction to send the Pregnancy End Date when a consumer attests a Pregnancy End Date either from California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) or SAWS.
Ease of Use	Interfaces	47648	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall enhance the portal screens for consumer to report a change in pregnancy information to include the ability to report that a current pregnancy has ended and also include an ability to report a new pregnancy in the same application.
Ease of Use	Rate Review		
Ease of Use	Rate Review	41168	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall consume below data transferred from the CoveredCA.com page- • Coverage Year • Zip code • Household income • Size • Age of individuals • How many need coverage
Ease of Use	Rate Review	41169	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall pre-populate below Shop and Compare fields with the data sent from the CoveredCa.com page- • Coverage Year • What is your Zip Code? • What is your total household income per year? • How many people are in your household? • Age of Head of Household/Age of Person 2 etc. • Needs Coverage checkbox
Ease of Use	Web Portal Online Help		
Ease of Use	Web Portal Online Help	39205	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) system shall allow Shop and Compare to be Web Responsive.
Ease of Use	Web Portal Online Help	39206	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) system shall indicate which household members qualify for which programs in the Shop and Compare tool.

Category	Sub Category	Req ID	Requirement
Ease of Use	Web Portal Online Help	39207	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) system shall allow users to navigate back with the prepopulated data from any pages within the Shop and Compare tool.
EDI 834			
EDI 834	1095		
EDI 834	1095	41730	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall validate all the Enrollment Files (Inbound & Outbound) to follow the proper naming conventions with the below standards. Naming Convention from/to Trading Partners: Outbound: 834 Daily: to _<HIOS_Issuer_ID>_CA_834_INDV_<CCYYMMDDHHMMSS>.<BenefitYearYYYY>.edi TA1 Daily: to _<HIOS_Issuer_ID>_CA_TA1_834_INDV_<CCYYMMDDHHMMSS>.edi 999 Daily: to _<HIOS_Issuer_ID>_CA_999_834_INDV_<CCYYMMDDHHMMSS>.edi Inbound: 834 Daily: from _<HIOS_Issuer_ID>_CA_834_INDV_<CCYYMMDDHHMMSS>.edi TA1 Daily: from _<HIOS_Issuer_ID>_CA_TA1_834_INDV_<CCYYMMDDHHMMSS>.edi 999 Daily: from _<HIOS_Issuer_ID>_CA_999_834_INDV_<CCYYMMDDHHMMSS>.edi
EDI 834	1095	41731	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall store and archive the Inbound/Outbound 834, TA1, and 999 Files
EDI 834	1095	41732	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall track and capture audit details for all the files that are generated
EDI 834	1095	41733	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall create EDI Batch jobs with additional job parameters to allow multiple execution for enhanced processing of EDI batch triggers.
EDI 834	1095	41734	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall log the error when an Inbound Issuer 834 file fails as a duplicate, the Error Log should show the fields and Control Numbers that are in error and should provide the name of the original file that caused the failure.
EDI 834	1095	41735	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall log the error when an Inbound Issuer Acknowledgement (TA1 or 999) file fails as duplicate, the Error log should show the fields and Control Numbers that are in error and should provide the name of the original file that caused the failure.
EDI 834	1095	41736	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall create a new California specific 834 Companion Guide to align with the PCAP changes. New 834 CG shall be used as the interface design that will support sponsor's contract with the Issuers.
EDI 834	1095	41737	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall create new batch jobs to create Health and Dental CSV files for Issuer Reconciliation.
EDI 834	1095	41738	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall create the CSV files which are compatible with current REM (Reconciliation of Enrollments and Members) process.
EDI 834	1095	41739	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall update the current REM and Dispute process to be aligned with PCAP changes
EDI 834	Consumer Management		
EDI 834	Consumer Management	41697	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall send the APTC AMT field in the 2750 Loop to communicate APTC Amount to the Issuers.
EDI 834	Consumer Management	41698	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall send the OTH PAY AMT 1 field in the 2750 Loop to communicate State Subsidy Amount.
EDI 834	Consumer Management	41699	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall send the OTH PAY AMT 2 field in the 2750 Loop to communicate CA Premium Credit Amount.
EDI 834	Consumer Management	41700	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall send the Premium Amounts under both Payment (9V) and Account category (9X) in the 2750 Loop. Member Level Premium Amount Gross Level Premium Amount Net Premium Amount
EDI 834	Consumer Management	41701	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall send all the non-financials associated with the enrollment in the 2750 Loop.
EDI 834	Consumer Management	41702	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall send the "REQUEST SUBMIT TIMESTAMP" in LOOP 2750.
EDI 834	Consumer Management	41703	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall send the "RATING AREA" information under Account category in the 2750 Loop
EDI 834	Consumer Management	41704	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall send the "SOURCE EXCHANGE ID" information under Account category in the 2750 Loop
EDI 834	Consumer Management	41705	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall provide the operational capability for the bi-directional exchange of TA1 Acknowledgements for every inbound and outbound 834 file.
EDI 834	EDI Validations		
EDI 834	EDI Validations	48014	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall reject inbound Cancel and Termination transactions for non-payment of premium for APS enrollments, both with net premium of \$0 and >\$0, if received on or before the last day of the first month of coverage.
EDI 834	EDI Validations	48015	The system shall reject inbound Cancel and Termination transactions for non-payment of premium for all enrollments where the net premium is \$0 as of the Coverage End Date.
EDI 834	EDI Validations	48016	The system shall include all APS \$0 net premium enrollments during the first month of coverage that do not have an opt-in attestation regardless of the enrollment status in the SB 260 Discontinuance Cancellation batch and generate Cancel transactions.
EDI 834	EDI Validations	48017	The system shall generate Cancel transactions after a one-time clean-up on the enrollments that have \$0 net premium and terminated status without an opt-in.
EDI 834	EDI Validations	48020	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall enforce validations on the member-level information received in inbound EDI 834 transactions.

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(Extracted from CalHEERS RTM)

Category	Sub Category	Req ID	Requirement
EDI 834	EDI Validations	48021	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall reject effectuations with member-level information where the number of enrollees does not match the number of active enrollees in California Healthcare Eligibility, Enrollment and Retention System (CalHEERS).
EDI 834	EDI Validations	48022	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall reject effectuations with member-level information where one or more reference identifiers does not match the data in California Healthcare Eligibility, Enrollment and Retention System (CalHEERS).
EDI 834	EDI Validations	48026	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall generate transactions in the order of the oldest Enrollment ID to the newest Enrollment ID when multiple EDI transactions associated with the same Case ID have the same REQUEST SUBMIT TIMESTAMP.
EDI 834	EDI Validations	48027	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall accept an inbound EDI 834 transaction where the state in the address field is not 'CA'.
EDI 834	EDI Validations	48228	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall update the 834 transactions with SOGI data, when available.
EDI 834	EDI Validations	48229	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall populate Loop 2750 with SOGI information at the member-level, when provided, in EDI 834 transactions for initial enrollment, maintenance, reinstatement, renewal, and compare transactions. (INS03 = 021, 001, 025, and 030)
EDI 834	EDI Validations	48230	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall send SOGI information to the Carriers in EDI 834 transactions in Loop 2750 with the Additional Reporting Category of GENDER IDENTITY, REF value indicating code, when provided by the consumer.
EDI 834	EDI Validations	48231	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall send SOGI information to the Carriers in EDI 834 transactions in Loop 2750 with the Additional Reporting Category of BIRTH GENDER, REF value indicating code, when provided by the consumer.
EDI 834	EDI Validations	48232	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall send SOGI information to the Carriers in EDI 834 transactions in Loop 2750 with the Additional Reporting Category of SEXUAL ORIENTATION, REF value indicating code, when provided by the consumer.
EDI 834	EDI Validations	48233	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall generate maintenance transactions with Maintenance Reason Code "33" when a response to any of the SOGI questions is updated.
EDI 834	EDI Validations	48234	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall maintain the consolidation priority of 6 when a response to any of the SOGI questions is updated along with other updates to the enrollment record in a single Report A Change (RAC) submission.
EDI 834	EDI Validations	48235	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall not validate Loop 2750 with the Additional Reporting Categories of Gender Identity, Birth Gender, or Sexual Orientation, for content in inbound EDI 834 transactions and will not update the consumer's record with values from the inbound transactions from Carriers.
EDI 834	EDI Validations	48349	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall relabel the Additional Reporting Category in Loop 2750 for State CSR as "CSR CREDIT NET AMT" in N102 and populate the Amount in REF02 and the Effective date in the 834 EDI. This amount will be populated by the difference between the CSR Credit Amount and the CSR Credit Withholding amount.
EDI 834	EDI Validations	48842	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall generate EDI 834 maintenance transactions for SB 260 enrollments without the Additional Reporting Category of SB 260 in Loop 2750 when the net premium changes from >\$0 in the first month of coverage to \$0 effective the second month of coverage or later.
EDI 834	EDI Validations	48843	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall generate EDI 834 maintenance transactions for SB 260 enrollments with the Additional Reporting Category of SB 260 in Loop 2750 and REF02 = N when the net premium changes from >\$0 in the first month of coverage to \$0 effective the coverage start date and the enrollment status is "Pending".
EDI 834	EDI Validations	48844	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall generate EDI 834 maintenance transactions for SB 260 enrollments without the Additional Reporting Category of SB 260 in Loop 2750 when the net premium changes from >\$0 in the first month of coverage to \$0 effective the coverage start date and the enrollment status is "Enrolled".
EDI 834	EDI Validations	48845	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall generate EDI 834 maintenance transactions for SB 260 enrollments with the Additional Reporting Category of SB 260 in Loop 2750 and REF02 = X when the net premium changes from \$0 to >\$0 effective the coverage start date and the enrollment status is "Pending".
EDI 834	EDI Validations	48846	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall generate multiple EDI 834 transactions to the Carrier if the SCR Admin user manually updates the APTC amount using the Admin override option for any given month.
EDI 834	EDI Validations	48847	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall include CSR Amount segments in Loop 2750 in all subsequent EDI 834 Outbound transactions (001*, 025*41, 030*XN) after CSR Variant Change for the entire duration of enrollment policy.
EDI 834	EDI Validations	48848	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall persist the OPT-IN attestation for the APS enrollments with a Net Premium >\$0.
EDI 834	EDI Validations	48849	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) must generate EDI 834 maintenance transactions for SB 260 enrollments with the Additional Reporting Category of SB 260 in Loop 2750 and REF02 = Y when the net premium changes from >\$0 to \$0 effective the coverage start date, the consumer has previously selected "Keep" on the MCT dashboard, and the enrollment status is "Pending".
EDI 834	EDI Validations	48850	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall process the effectuation based on the Net Premium amount for the first month of coverage for APS enrollments.
EDI 834	Enrollment		
EDI 834	Enrollment	46492	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall send an EDI 834 initial enrollment transaction to the carriers if there is a change in Subscriber in the new enrollment year and the new Subscriber was previously enrolled as a dependent in the prior benefit year, in the same plan.
EDI 834	Enrollment	46493	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall include the Reporting Category of ADDL MAINT REASON only for change transactions at the member-level.
EDI 834	Enrollment	46580	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall have the ability for SCR L3 to send the latest and complete enrollment and Agent delegation data to Carrier for a selected enrollment.
EDI 834	Enrollment	46581	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall consolidate and send all enrollment snapshot transactions with a code of 030*XN in a separate file from the daily system generated 834 EDI Transactions
EDI 834	Enrollment	46582	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall allow the Issuer Enrollment Reps to trigger the latest and complete enrollment and Agent delegation data to Carrier for a selected enrollment.
EDI 834	Enrollment	46583	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall limit the number of enrollment snapshot transactions generated on an enrollment policy to 1 per calendar day.
EDI 834	Enrollment	46584	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall provide user messaging for any requests that are made after the original trigger.
EDI 834	Enrollment	46585	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall have to the ability to capture transactional history for who requested the 834 enrollment snapshot transaction.
EDI 834	Enrollment	46642	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall send carriers a notification of all outbound files generated and sent to them.

Appendix A-4 - SOW Exhibit A - System Requirements Specification
(Extracted from CalHEERS RTM)

Category	Sub Category	Req ID	Requirement
EDI 834	Enrollment	46643	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall send carrier notification when an inbound file fails due to syntax or file validation errors.
EDI 834	Enrollment	46644	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall consolidate and send all inbound transaction level processing errors to Carriers.
EDI 834	Enrollment	46645	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall store all carrier notifications in an accessible location for audit purposes.
EDI 834	Enrollment	46646	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall send a notification to the Carriers for all outbound 834s generated within the last 3 business days for which TA1 and/or 999 acknowledgement files have not been received and processed successfully.
EDI 834	Enrollment	46647	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall update verbiage for second level failure messages sent to carriers as a part of the inbound summary report.
EDI 834	Enrollment	48030	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall populate the Subscriber's mailing address in the Responsible Party address fields of the EDI 834 transaction if the EDR does not contain address information for the Responsible Party.
EDI 834	General Requirement		
EDI 834	General Requirement	48437	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall send Text Consent information to the Carriers in EDI 834 transactions in Loop 2750 with the Additional Reporting Category of CARRIER TEXT CONSENT, REF value indicating member consent, and the date when the consumer updated the consent.
EDI 834	General Requirement	48438	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall populate EDI 834 transactions in Loop 2750 with CARRIER TEXT CONSENT at the enrollment-level provided in initial enrollment, maintenance, reinstatement, renewal, and compare transactions. (INS03 = 021, 001, 025, and 030)
EDI 834	General Requirement	48439	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall maintain the Consumer's consent response when new applications or changes to the application are received via EDRs.
EDI 834	General Requirement	48440	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall generate maintenance transactions with Maintenance Reason Code "033" when the consent to receive text messages is updated.
EDI 834	General Requirement	48441	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall maintain the consolidation priority of 6, when consent to receive text messages is updated along with other updates to the enrollment record in a single Report A Change (RAC) submission.
EDI 834	General Requirement	48442	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall not validate Loop 2750 with CARRIER TEXT CONSENT for content in inbound EDI 834 transactions and will not update the consumer's record with values in the inbound transactions from Carriers.
EDI 834	General Requirement	48443	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall retain the text consent response even when the cell phone number changes, regardless of changes made on the California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) portal or received via EDR.
EDI 834	General Requirement	48447	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall populate the phone number for Carriers to send text messages in the Member Communication Segment for the Subscriber.
EDI 834	Interfaces		
EDI 834	Interfaces	41603	834, TA1 and 999 ACK files will use the below standard transaction delimiters. Asterisk (*) -> Data element separator Carat (^) -> Repetition Separator Colon (:) -> Component Element Separator Tilde (~) -> Segment Terminator
EDI 834	Interfaces	41604	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) 834 Inbound, Outbound files shall be validated for necessary SNIP Levels from the available Level 1 to Level 7.
EDI 834	Interfaces	41605	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall send and receive each 834 Outbound and Inbound file containing one Interchange Envelope (ISA/IEA), one Functional Group (GS/GE) and one or more Transaction Sets (ST/SE) per Functional Group, each containing an enrollment group of a Subscriber and any applicable dependents.
EDI 834	Interfaces	41606	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall generate every EDI 834 file with an Interchange Control Header (ISA) and an Interchange Control Trailer (IEA).
EDI 834	Interfaces	41607	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall generate every EDI 834 file with Functional Group Header (GS) and Functional Group Trailer (GE).
EDI 834	Interfaces	41608	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall generate every EDI 834 Transaction Set with a Transaction Set Header (ST) and a Transaction Set Trailer (SE).
EDI 834	Interfaces	41609	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall generate every EDI 834 transaction with one or more transaction sets that will include Header, LOOP 1000, LOOP 2000, LOOP 2100A, LOOP 2100C, LOOP 2100G, LOOP 2300, LOOP 2700-2750.
EDI 834	Interfaces	41610	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall generate every EDI 834 transaction set with information which includes, Beginning Segment (BGN), File Effective Date (DTP) (when applicable in the TEST environment only), and Transaction Set Control Totals (QTY) segments.
EDI 834	Interfaces	41611	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall generate EDI 834 transactions with a Beginning Segment (BGN).
EDI 834	Interfaces	41612	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall generate EDI 834 transactions with a File Effective Date (DTP) when the effective date does not match the interchange date.
EDI 834	Interfaces	41613	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall generate EDI 834 transactions with a Transaction Set Control Totals (QTY).

Category	Sub Category	Req ID	Requirement
EDI 834	Interfaces	41614	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall transmit the below segments in 834 Outbound files to Issuers LOOP 1000A: Sponsor Details LOOP 1000B: Payer Details LOOP 1000C: Broker Details (Sub Loop: 1100C) LOOP 2000: Member Details LOOP 2100A: Member Name, SSN, Residence Address, Phone, Language LOOP 2100B: Prior Incorrect Info [if applicable] LOOP 2100C: Mailing Address LOOP 2100F: Custodial Parent LOOP 2100G: Responsible Person LOOP 2300: Health Coverage Details LOOP 2700: Reporting Categories (Sub Loop: 2750)
EDI 834			California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall make sure all the HIPAA segments and qualifiers must be submitted in UPPERCASE letters only (Segments/Elements & Codes).
EDI 834	Interfaces	41615	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall generate EDI 834 files with LOOP 1000/1100 with the following segments: Sponsor Name, Payer Name, TPA/Broker Name and Broker Account Information.
EDI 834	Interfaces	41616	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall generate EDI 834 transactions with Sponsor Information in LOOP ID - 1000A.
EDI 834	Interfaces	41617	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall generate EDI 834 transactions with Payer Information in LOOP ID - 1000B Payer.
EDI 834	Interfaces	41618	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall generate EDI 834 transactions with Agent Information in LOOP ID - 1000C/1100C for an active agent delegation.
EDI 834	Interfaces	41619	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall generate an EDI 834 maintenance transaction to the Issuer when there is an Addition, Removal, or Information update for the Agent associated with the enrollment.
EDI 834	Interfaces	41620	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall generate an EDI 834 maintenance transaction to the Issuer when an Agent is added to an enrollment.
EDI 834	Interfaces	41621	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall generate an EDI 834 maintenance transaction to the Issuer when an Agent is removed from an enrollment.
EDI 834	Interfaces	41622	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall generate an EDI 834 maintenance transaction to the Issuer when Agent information is changed for an active delegation
EDI 834	Interfaces	41623	Agent Name, Agent Tax ID, and/or Agent License Number
EDI 834			California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall generate EDI 834 files with Member Level Details (Insured Benefit segment), Subscriber Identifier, Exchange-Assigned Policy Identifier, Member Identifier and Member Level Dates in LOOP - 2000 Member Level Detail.
EDI 834	Interfaces	41624	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall generate 834 EDI transactions with the Insured Benefit segment (INS) to provide information on the subscriber or dependent information in the Member Level Details in LOOP 2000.
EDI 834	Interfaces	41625	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall generate 834 EDI transactions with Subscriber Identifier, Exchange-Assigned Policy Identifier, and Member Identifier in multiple Reference Information segments (2000, REF).
EDI 834	Interfaces	41626	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall generate 834 EDI transactions with Member Level Dates (2000, DTP).
EDI 834	Interfaces	41627	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall assign the Primary Tax Filer as the default Subscriber for a subsidized case with a single enrollment group. If the Primary Tax Filer is not in the enrollment group, the Subscriber is the oldest Adult member or the youngest child in a child-only enrollment.
EDI 834	Interfaces	41628	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall assign the Primary Household Contact as the default Subscriber for an unsubsidized case with a single enrollment group. If the Primary Household Contact is not part of the enrollment group, the Subscriber is the oldest Adult member within the enrollment group or the youngest child in a child-only enrollment.
EDI 834	Interfaces	41629	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall generate EDI 834 files with Member Level Details including Member Name, Incorrect Member Name, Member Mailing Address, Custodial Parent, Responsible Person information in LOOP ID – 2100, when applicable.
EDI 834	Interfaces	41630	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall generate EDI 834 files with Member Name, Member Communication Numbers, Member Residence Address, Member Demographics and Member Language Information in LOOP ID - 2100A Member Name
EDI 834	Interfaces	41631	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall generate 834 EDI transactions with the Member Name Details in LOOP 2100A (NM1)
EDI 834	Interfaces	41632	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall generate 834 EDI transactions with the Member Communication Numbers in LOOP 2100A (PER)
EDI 834	Interfaces	41633	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall generate 834 EDI transactions with the Member Residence Street Address and Member City, State, Zip Code, County Code in LOOP 2100A (N3, N4).
EDI 834	Interfaces	41634	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall generate 834 EDI transactions with the Member Residence Street Address and Member City, State, Zip Code, County Code in LOOP 2100A (N3, N4).
EDI 834	Issuer Profile Management		
EDI 834	Issuer Profile Management	41706	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall validate and process TA1 Acknowledgement files received from Issuers in response to the 834 Outbound file transmission.
EDI 834	Plan and Benefit Assistance		

Appendix A-4 - SOW Exhibit A - System Requirements Specification
(Extracted from CalHEERS RTM)

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Category	Sub Category	Req ID	Requirement
EDI 834	Plan and Benefit Assistance	41635	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall generate 834 EDI transactions with the Member Demographics Information in LOOP 2100A (DMG).
EDI 834	Plan and Benefit Assistance	41636	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall populate the Race and Ethnicity codes in LOOP 2100A when available capturing a maximum of 10 unique codes.
EDI 834	Plan and Benefit Assistance	41637	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall populate the latest values of Race & Ethnicity during RAC in the 834 EDI enrollment files.
EDI 834	Plan and Benefit Assistance	41638	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall generate 834 EDI transactions with the Member Language Information in LOOP 2100A (LUI).
EDI 834	Plan and Benefit Assistance	41639	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall generate EDI 834 files with Incorrect Member Name and Incorrect Demographics Information in LOOP ID - 2100B Incorrect Member Name.
EDI 834	Plan and Benefit Assistance	41641	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall generate 834 EDI transactions with the Incorrect Member Demographics Information in LOOP 2100B (DMG).
EDI 834	Plan and Benefit Assistance	41643	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall generate EDI 834 files with Member Mailing Address, Member Mail Street Address, Member Mail City, State and Zip Code in LOOP ID - 2100C Member Mailing Address.
EDI 834	Plan and Benefit Assistance	41645	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall generate 834 EDI transactions with the Member Mailing Address and Member Mailing City, State, ZIP Code Information in LOOP 2100C (N3, N4).
EDI 834	Plan and Benefit Assistance	41646	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall generate EDI 834 files with Custodial Parent Information, Custodial Parent Communication Numbers, Custodial Parent Street Address and Custodial Parent City, State and Zip Code in LOOP ID - 2100F Custodial Parent.
EDI 834	Plan and Benefit Assistance	41647	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall generate 834 EDI transactions with the Custodial Parent Information in LOOP 2100F (NM1, PER, N3, N4), when available.
EDI 834	Policy Based Payments		
EDI 834	Policy Based Payments	41707	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall generate the Outbound TA1 Acknowledgement file based on the validation performed on the Inbound 834 files received from the Issuers.
EDI 834	Policy Based Payments	41708	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall provide the operational capability for the bi-directional exchange of 999 Acknowledgements for every inbound and outbound 834 file.
EDI 834	Policy Based Payments	41709	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall validate and process the Inbound 999 Acknowledgement files received from Issuer in response to the 834 Outbound file transmission.
EDI 834	Policy Based Payments	41710	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall generate the Outbound 999 Acknowledgement files based on the validation performed on the Inbound 834 files received from the Issuers.
EDI 834	Policy Based Payments	41711	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall exchange 834, TA1, 999 encrypted files with the Issuers via Secure File Transfer Protocol (SFTP).
EDI 834	Policy Based Payments	41712	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall establish and verify SFTP connectivity using a SFTP location for exchanging 834 files with Issuers.
EDI 834	Policy Based Payments	41713	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall track the rejections/errors for all the Inbound and Outbound files exchanged with the Issuers.
EDI 834	Policy Based Payments	41714	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall track any file rejections/errors captured as part of the Inbound TA1, 999 files received from Issuers for the corresponding 834 Outbound files.
EDI 834	Policy Based Payments	41715	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall track any file rejections/errors captured as part of Outbound TA1, 999 files for the 834 Inbound file received from Issuers.
EDI 834	Policy Based Payments	41716	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall process Inbound 834 Effectuation, Non-payment Cancellation and Non-payment Termination transactions from Issuers by validating them and updating the enrollment record status in the system.
EDI 834	Policy Based Payments	41717	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall perform transactional and data element level validation for 834 Inbound Effectuation transactions for pending enrollments upon receipt of their binder payments at Issuer end.
EDI 834	Policy Based Payments	41718	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall perform transactional and data element level validation of 834 Inbound Cancellation transactions when the initial/binder payment is not received by Issuers in a timely manner for a specific enrollment.
EDI 834	Policy Based Payments	41719	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall perform transactional and data element level validation of 834 Inbound Termination transactions when the payment is not received by Issuers in a timely manner for a specific enrollment.
EDI 834	Policy Based Payments	41720	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall generate 834 EDI transaction based on the updates made by Covered California Admin Users using Edit Enrollment Tool anytime after plan selection.
EDI 834	Policy Based Payments	41721	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall generate EDI 834 maintenance transactions to Issuers.
EDI 834	Policy Based Payments	41722	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall generate EDI 834 maintenance transactions to Issuers when a user reports a change and remains in the same Plan (same Policy ID/Enrollment ID).
EDI 834	Policy Based Payments	41723	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall generate EDI 834 termination and enrollment transactions to Issuers when a user reports a change and selects a new Plan (new Exchange-Assigned Policy ID/Enrollment ID).
EDI 834	Policy Based Payments	41724	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall generate EDI 834 Reinstatement transaction when a cancelled or terminated enrollment group gets reinstated to its prior enrollment status.
EDI 834	Policy Based Payments	41725	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall send the 834 Renewals transactions to the Issuers, that clearly denotes the Active and Passive Renewals with the specific codes, so that Issuers can process the information accordingly.

Appendix A-4 - SOW Exhibit A - System Requirements Specification
(Extracted from CalHEERS RTM)

Category	Sub Category	Req ID	Requirement
EDI 834	Policy Based Payments	41726	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall send 834 Renewal transactions to the Issuers for consumers who actively or passively renew into the same plan under the current Issuer.
EDI 834	Policy Based Payments	41727	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall send 834 Renewal transactions to the Issuers for consumers who actively or passively renew into a different plan under the current Issuer.
EDI 834	Policy Based Payments	41728	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall send 834 new enrollment (add) transactions to the Issuers for consumers who actively renew their coverage into a new plan with a different Issuer.
EDI 834	Policy Based Payments	41729	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall send an EDI 834 new enrollment (add) transaction if the consumer is automatically renewed into a different plan with a different Issuer. (Cross Issuer Auto-Renewal)
EDI 834	Provider/Plan Directory		
EDI 834	Provider/Plan Directory	41602	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall create healthcare transaction types complying with the Electronic Data Interchange (EDI) standards of healthcare as established by Department of Health and Human Services (HHS). 1. 834 Membership Enrollments 2. TA1 Interchange Acknowledgements 3. 999 Functional Acknowledgements
EDI 834	Renewal		
EDI 834	Renewal	41601	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall follow Interchange Control Structure (ICS) and Functional Group Structure (GS) guidelines for HIPAA in order to process ASC X12N/005010XX220A1-834 Benefit Enrollment and Maintenance Transactions.
EDI 834	SEP/RAC		
EDI 834	SEP/RAC	41648	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall send Custodial Parent/Primary Caretaker information in Loop 2100F for every minor Subscriber and minor dependent.
EDI 834	SEP/RAC	41649	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall generate EDI 834 transaction with Responsible Person details for each member in the enrollment group in LOOP 2100G.
EDI 834	SEP/RAC	41650	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall generate 834 EDI transactions with the Responsible Person Name and Identification Information in LOOP 2100G (2100G, NM1).
EDI 834	SEP/RAC	41682	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall generate 834 EDI transactions with the Responsible Person Communication Numbers in (2100G, PER), when available.
EDI 834	SEP/RAC	41683	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall generate 834 EDI transactions with the Responsible Person's Mailing Address in Street Address (2100G, N3) and City, State, Zip Code (2100G, N4).
EDI 834	SEP/RAC	41684	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall generate EDI 834 files with Health Coverage, Health Coverage Dates, Health Coverage Policy Number Information in LOOP ID - 2300 Health Coverage.
EDI 834	SEP/RAC	41685	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall generate 834 EDI transactions with the Health Coverage Information in LOOP 2300 (2300, HD).
EDI 834	SEP/RAC	41686	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall generate 834 EDI transactions with the Health Coverage Dates Information in LOOP 2300 (2300, DTP).
EDI 834	SEP/RAC	41687	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall generate 834 EDI transactions with the Health Coverage Policy Number Information in LOOP 2300 (2300, REF).
EDI 834	SEP/RAC	41688	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall generate EDI 834 files with Reporting Category Information in LOOP ID - 2700 Member Reporting Categories.
EDI 834	SEP/RAC	41689	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall generate EDI 834 files with Reporting Category (N1), Reporting Category Reference (REF) and Reporting Category Date (when applicable) (DTP), information in LOOP ID - 2750 Reporting Category.
EDI 834	SEP/RAC	41690	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall generate EDI 834 transactions with the Member Reporting Category in LOOP (2750, N1).
EDI 834	SEP/RAC	41691	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall generate EDI 834 transactions with the Reporting Category Reference in LOOP (2750, REF).
EDI 834	SEP/RAC	41692	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall generate EDI 834 transactions with the Member Reporting Category Date in LOOP (2750, DTP).
EDI 834	SEP/RAC	41693	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall send the Member Reporting Categories in a pre-defined order in LOOP 2750 (2750, N1).
EDI 834	SEP/RAC	41694	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall send 834 file with certain Reporting Categories in LOOP 2750.
EDI 834	SEP/RAC	41695	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall send all the financials amounts and effective dates associated with the enrollment in the 2750 Loop of the Subscriber.
EDI 834	SEP/RAC	41696	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall send the CSR AMT field in the 2750 Loop to communicate CSR Amount (if applicable)
EDI 834	Shop & Compare		
EDI 834	Shop & Compare	41640	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall generate 834 EDI maintenance transactions with the Incorrect Member Name Information when a change has been reported in LOOP 2100B (NM1).
EDI 834	Shop & Compare	41642	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall generate EDI 834 Maintenance transaction capturing the updated Member information in LOOP 2100B - Incorrect Member Name.
EDI 834	Shop & Compare	41644	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall generate 834 EDI transactions with the Member Mailing Address in LOOP 2100C (NM1).
Education and Outreach			

Category	Sub Category	Req ID	Requirement
Education and Outreach	Outreach		
Education and Outreach	Outreach	41238	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall provide the functionality to create and deliver via email, letter, text or voice mail, multi-lingual mass notices to targeted groups for purposes of outreach, increased awareness, enrollment and participation.
Education and Outreach	Outreach	41239	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall provide the functionality to generate random surveys, via online, email, letter or phone, and compile and analyze responses of Exchange consumers for the purpose assessing consumer service or other related matters.
Education and Outreach	Outreach	41253	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall provide the functionality to generate reports from consumer survey responses.
Education and Outreach	Outreach	41262	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall provide the functionality to track the source of possible outreach efforts (e.g., how did you hear about us? TV, billboard, magazine, etc.).
Education and Outreach	Outreach	41290	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall provide the functionality to send a survey based on specified demographic criteria.
Education and Outreach	Outreach	44592	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall provide the functionality to identify high-use/low-use of Exchange eligibility by demographics (e.g., age, sex, location, etc.) and program. (Under utilization- where to target outreach.)
Eligibility			
Eligibility	Application - SHOP		
Eligibility	Application - SHOP	44458	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall provide the functionality for employers to select an employer premium contribution level based on rules such as dollar amount and / or percentages.
Eligibility	Application - SHOP	44731	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall include in the rules engine verification of employee's non-covered family member enrollment in the Exchange.
Eligibility	Application - SHOP	44732	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall provide the functionality to allow designated SHOP Assisters to complete employer applications on behalf of the employer.
Eligibility	Application - SHOP	44736	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall provide the functionality to allow employers to select a level of plans (tier), or if allowed another method determined by the Exchange for QHPs and / or qualified stand-alone dental plans to be available.
Eligibility	Case Management		
Eligibility	Case Management	38508	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) system shall display explanatory text on the screen when a consumer selects a document type on "Secondary List A."
Eligibility	Case Management	38509	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall prompt a consumer to upload a document from "Secondary List B" if the consumer uploads a document from "Secondary List A."
Eligibility	Case Management	38510	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall consolidate some document type names for verification of citizenship.
Eligibility	Case Management	38511	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall add additional document types for verification of citizenship.
Eligibility	Case Management	38926	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall maintain the lock to the existing County of Responsibility for cases where a disposition is received for the Medi-Cal program (includes Non-MAGI) and the program eligibility status is not discontinued or ineligible for all individuals on the case.
Eligibility	Case Management	38927	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System's COR enablement sweep shall maintain the lock of the existing County of Responsibility for California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) Non-MAGI Medi-Cal Program referrals until a disposition is received for the Medi-Cal program (includes Non-MAGI) and a program eligibility status is provided.
Eligibility	Case Management	38928	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System COR Enablement sweep shall enable a County Of Responsibility reassignment based on the latest disposition received and that disposition has a Medi-Cal program (includes Non-MAGI) eligibility status update of discontinued or ineligible for all individuals on the case.
Eligibility	Case Management	38929	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) SAWS Interface COR Enablement sweep shall no longer consider a 90 day cure period as part of the evaluation criteria for the enablement of COR release.
Eligibility	Case Management	38930	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) SAWS Interface COR Enablement sweep shall not consider the referral identifier in the logic to enable County reassignment.
Eligibility	Data Collection Screens		
Eligibility	Data Collection Screens	47700	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall build screens to display the Manual APS specific information for all consumers that meet the following criteria: - Active Manual APS Indicator = "Y" - Review Application Updates flow will allow consumers who went through Manual APS process 1,2, or 3 to confirm their attestation to having MEC/ESI Coverage as well as review and confirm the data changes made by the Manual APS process - Modified version of the MCT dashboard will display the potential auto-enrollment ('APS-Lite') for cases that go through Manual APS Process 3 and can still confirm or deny their application changes and keep or reject enrolling into the suggested 'APS-Lite' plan
Eligibility	Data Collection Screens	47701	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall allow the consumers that have gone through Manual APS Process 1 or 2 to take the following actions on the Review Account Updates Flow: - Attest Yes or No to having MEC/ESI Coverage - Accept Application Data Changes - Reject Application Data Changes - Exit the Confirm Application Data Flow prior to Accepting or Rejecting Application Data Changes

Category	Sub Category	Req ID	Requirement
Eligibility	Data Collection Screens	47702	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall allow the consumers that have gone through Manual APS Process 3 to take the following actions on the Confirm Application Data Flow/Modified MCT Dashboard: - Accept Application Data Changes and Keep potential 'APS-Lite' enrollment - Accept Application Data Changes and Cancel potential 'APS-Lite' enrollment - Reject Application Data Changes - Exit the Confirm Application Data Flow prior to Accepting or Rejecting Application Data Changes
Eligibility	Data Collection Screens	47703	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall display messaging to inform Manual APS Process 3 consumers that they are able to take action on the Modified MCT Dashboard for Manual APS.
Eligibility	Data Collection Screens	47704	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall display a new messaging on the Account Home screen to encourage consumers staged for Manual APS Process 1, 2, or 3 to submit an application for the future benefit year when the following criteria is met: - Case has been assigned "MAPS1", "MAPS2", or "MAPS3" treatment indicator - Case has an Active Manual APS Indicator with value of "Y" at the time Account Home screen is accessed - The System Date is on or after 12/1 of the benefit year in which the consumer has been staged for Manual APS when the User logs into the California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) Portal
Eligibility	Disenrollment		
Eligibility	Disenrollment	38656	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System must provide the resources to facilitate the discussion and solution to Bucket #1 (Canceled DERs from SAWS) and the cases previously exceptioned from the process
Eligibility	Disenrollment	47302	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall deactivate the Health Access Program (HAP) ID if a client is found to be discontinued from the Family PACT program.
Eligibility	Eligibility Determination		
Eligibility	Eligibility Determination	37903	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) will grant full scope eligibility to all SB 75 children under 19 effective May 1, 2016.
Eligibility	Eligibility Determination	37937	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall grant full scope Medi-Cal eligibility for all Modified Adjusted Gross Income (MAGI) eligible young adults who are 19 through 25 years of age, inclusive, regardless of their citizenship or immigration status if they meet all other eligibility criteria.
Eligibility	Eligibility Determination	37938	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall apply the corresponding full scope aid codes to the effected young adults.
Eligibility	Eligibility Determination	37943	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall update the FPL tables used for eligibility calculations on a yearly basis.
Eligibility	Eligibility Determination	37944	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System Shall use the MAGI FPL table effective the first day of the current benefit year. The Subsidy table will be effective during open enrollment for the following benefit year.
Eligibility	Eligibility Determination	37945	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall update Anonymous screening tool (Preview Plans and Quick Sort) managed by California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) with the new MAGI and Subsidy FPL tables on a yearly basis.
Eligibility	Eligibility Determination	37946	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall update the Quick Sort tool with the new MAGI and Subsidy FPL tables on a yearly basis.
Eligibility	Eligibility Determination	37998	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall have the functionality to determine ineligibility for the New Adult Group for consumers who are entitled to Medicare at intake.
Eligibility	Eligibility Determination	37999	"The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall have the functionality to continue eligibility for the New Adult Group using ""Soft Pause"" for consumers who are entitled to Medicare and no other MAGI groups at renewal. Consumers who are entitled to Medicare and no other MAGI groups at renewal, must be referred to the county to evaluate the consumer for all other Medi-Cal programs."
Eligibility	Eligibility Determination	38000	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall have the functionality to determine continue eligibility for the New Adult Group using "Soft Pause" for consumers who are entitled to Medicare and no other MAGI groups at RAC. Consumers who are entitled to Medicare at RAC, must be referred to the county to evaluate the consumer for all other Medi-Cal programs.
Eligibility	Eligibility Determination	38001	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall have the functionality to allow the consumer to upload/submit document from social security or Medicare as proof when Medicare verification result is inconsistent.
Eligibility	Eligibility Determination	38002	"The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall have the functionality to assign pending eligibility status to a consumer at intake when the federal hub is down or the consumer attests to not being entitled to Medicare and the federal hub indicates the consumer is entitled to Medicare A referral must be sent to the County to verify Medicare and/or evaluate for all other Medi-Cal programs."
Eligibility	Eligibility Determination	38003	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall have the functionality to communicate the Medicare verification results from the federal hub via California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) to the SAWS, and the admin verification from SAWS back to California Healthcare Eligibility, Enrollment and Retention System (CalHEERS), if applicable, as defined during JADs.
Eligibility	Eligibility Determination	38004	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall record the results of the Medicare check on the California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) manual verification results page
Eligibility	Eligibility Determination	38006	"The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall have the functionality to modify the existing hover text to the existing SSApp question on MEC (including Medicare) coverage. "
Eligibility	Eligibility Determination	38007	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall communicate to SAWS the eligibility evaluation reason when the individual is ineligible or pending due to the Medicare verification.
Eligibility	Eligibility Determination	38008	"The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall update verbiage for the verification result language on the eligibility results page for ""when the hub is down, and when verification is inconsistent"" at intake."
Eligibility	Eligibility Determination	38009	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall provide messaging on the eligibility result page when the individual is ineligible due to the Medicare verification.

Appendix A-4 - SOW Exhibit A - System Requirements Specification
(Extracted from CalHEERS RTM)

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Category	Sub Category	Req ID	Requirement
Eligibility	Eligibility Determination	38016	"The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall update a. Portal messaging b. Messaging on the Eligibility Results Page"
Eligibility	Eligibility Determination	38017	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) system shall include new snippet for the consumers who are assigned the L9 and a CCP/APTC aid code on the NOD01
Eligibility	Eligibility Determination	38266	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall remove the "Re-set VLP flag" business rule from the Submit button on the Application Signature page.
Eligibility	Eligibility Determination	38267	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall revise the conditionally eligible snippet/business rules on the Eligibility Results page to reflect ROP expiration dates.
Eligibility	Eligibility Determination	38415	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall assign the County of Responsibility on initial case linkage from the SAWS Access Channel based on the SAWS County that established the communication.
Eligibility	Eligibility Determination	38417	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall conduct a scheduled process to identify triggering events that satisfy specific case conditions to determine if the California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System can set the enablement flag to reassign the County of Responsibility (COR) of the case in the future event that the assigned Primary Contact's residence address changes to a different County.
Eligibility	Eligibility Determination	38420	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall use the established California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) County of Responsibility for the corresponding MEDS transactions HX12, HX18, HX20, HX20U, HX34, HX40 County of Responsibility for all individuals on the case based on the residence address of the primary applicant.
Eligibility	Eligibility Determination	38421	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) system shall communicate and update the county of responsibility for the primary contact (all co-applicants will have their COR align with the primary contact) to MEDS for APTC, CSR, CCP, MCAP, and CCHIP members via HX05 transaction.
Eligibility	Eligibility Determination	38422	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) SAWS interface shall validate an individuals residential zip and county code for processing in California Healthcare Eligibility, Enrollment and Retention System (CalHEERS).
Eligibility	Eligibility Determination	38423	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) SAWS interface shall change the county of responsibility upon request of an ICT by the SAWS for a prospective benefit month.
Eligibility	Eligibility Determination	38424	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) SAWS interface shall process case eligibility that has been transferred via ICT for a prospective benefit month
Eligibility	Eligibility Determination	38425	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall provide a business validation to only accept ICT EDRs for prospective benefit months.
Eligibility	Eligibility Determination	38426	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) SAWS interface will route traffic according to the original source system that sent it.
Eligibility	Eligibility Determination	38427	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall update consumer messaging when a change in residence address is made on the Portal
Eligibility	Eligibility Determination	38436	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall not maintain SAWS Case and corresponding person linkage after the release of County of Responsibility.
Eligibility	Eligibility Determination	38450	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall have the functionality to modify the existing hover text to the existing SSApp question on MEC (including Medicare) coverage.
Eligibility	Eligibility Determination	38544	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall collect additional American Indian and Alaska Native information where other demographic information is collected.
Eligibility	Eligibility Determination	38545	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall collect if a consumer has a service from the Indian Health Service, a tribal health program, or an urban Indian health program or through a referral from one of these programs
Eligibility	Eligibility Determination	38546	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall collect if a consumer is eligible to get services from the Indian Health Service, a tribal health program, or an urban Indian health program or through a referral from one of these programs.
Eligibility	Eligibility Determination	38547	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS)-SAWS interface shall send and receive the American Indian and Alaska Native information
Eligibility	Eligibility Determination	38548	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall add "Tribe not listed" to the Federal Recognized dropdown for AI/AN.
Eligibility	Eligibility Determination	38549	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall collect transgender information in the application where the applicant's sex is asked and male or female are the other possible answers .
Eligibility	Eligibility Determination	38550	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS)-SAWS interface shall send and receive the transgender information collected by California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) and SAWS.
Eligibility	Eligibility Determination	38551	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall transmit a gender to MEDS for individuals who state that they are Transgender.
Eligibility	Eligibility Determination	38552	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall display pregnancy questions to individuals regardless of gender.
Eligibility	Eligibility Determination	38553	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall determine eligibility using attested pregnancy information for individuals regardless of gender.
Eligibility	Eligibility Determination	38554	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall collect optional information on gender identity and sexual orientation after application submission.
Eligibility	Eligibility Determination	38555	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS)-SAWS interface shall send and receive gender identity and sexual orientation information collected by California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) and SAWS.
Eligibility	Eligibility Determination	38556	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall send collected information on gender identity and sexual orientation to MEDS.
Eligibility	Eligibility Determination	38557	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall collect military service information where Demographic Information is collected.
Eligibility	Eligibility Determination	38558	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS)-SAWS interface shall send and receive the military service information collected.
Eligibility	Eligibility Determination	38559	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall update the race and ethnicity options collected.
Eligibility	Eligibility Determination	38560	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS)-SAWS interface shall send and receive the information collected.
Eligibility	Eligibility Determination	38561	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall send multiple race and ethnicity codes to MEDS.

Appendix A-4 - SOW Exhibit A - System Requirements Specification
(Extracted from CalHEERS RTM)

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Category	Sub Category	Req ID	Requirement
Eligibility	Eligibility Determination	38562	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall collect Third Party Liability information.
Eligibility	Eligibility Determination	38563	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS)-SAWS interface shall send and receive the third party liability information collected by California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) and SAWS.
Eligibility	Eligibility Determination	38565	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall inform the consumer on when a Social Security Number is required.
Eligibility	Eligibility Determination	38566	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall collect the Social Security Number information when required by policy.
Eligibility	Eligibility Determination	38567	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) system shall update the relationships drop down options.
Eligibility	Eligibility Determination	38568	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall inform the consumer how to switch to Spanish on the California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) Portal.
Eligibility	Eligibility Determination	38569	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall update the option of written languages collected.
Eligibility	Eligibility Determination	38570	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall update Summary pages with all questions displayed to the consumer/user.
Eligibility	Eligibility Determination	38571	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall add estate recovery information to all signature pages.
Eligibility	Eligibility Determination	38572	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall not collect deprivation information.
Eligibility	Eligibility Determination	38573	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS)-SAWS interface shall no longer send and receive the deprivation information.
Eligibility	Eligibility Determination	38574	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall update the PDF application with all questions displayed to the consumer/user.
Eligibility	Eligibility Determination	38575	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall collect information about attested date of birth, household size, pregnancy status, parent/caretaker status, qualified non-citizen that is subject to 5 year bar status, military background and income prior to the collection of employer sponsored insurance information.
Eligibility	Eligibility Determination	38576	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall utilize attested date of birth, household size, pregnancy status, parent/caretaker status and income to calculate an applicant's potential eligibility to MAGI Medi-Cal based on FPL limit prior to asking questions about employer sponsored insurance. This does not apply to MCAP or CCHIP.
Eligibility	Eligibility Determination	38577	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall utilize the determination of an applicant's potential eligibility to MAGI Medi-Cal to suppress questions related to affordability and minimum value standard of employer sponsored health insurance. This does not apply to MCAP or CCHIP.
Eligibility	Eligibility Determination	38578	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall ensure individuals who appear to be eligible for the NQI Program based on date of birth, household size, qualified non-citizen that is subject to 5 year bar status, pregnancy status, and military background are asked questions related to affordability and minimum value standard of employer sponsored health insurance, regardless of attested income that is within the MAGI Medi-Cal limit.
Eligibility	Eligibility Determination	38579	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS)-SAWS interface shall send and receive the affordability and minimum value standard of employer sponsored insurance information when available.
Eligibility	Eligibility Determination	38580	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall add non-discrimination information to all signature pages.
Eligibility	Eligibility Determination	38581	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall add Medi-Cal 10-day reporting requirement information to all Application signature pages.
Eligibility	Eligibility Determination	38586	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall streamline application messaging, hover text, and collection screens to improve the application flow for the end user.
Eligibility	Eligibility Determination	38776	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) system shall update the budget worksheet based on the income provide by the hub.
Eligibility	Eligibility Determination	38777	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) system shall continue to use the electronic source of income for APTC/CSR/CCP eligibility determination when a report a change (RAC), that involves no change in household income and the income continues to be not compatible occurs post an ROP batch execution that used the electronic source income in establishing the person's APTC/CSR/CCP eligibility.
Eligibility	Eligibility Determination	38778	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) system shall use the attested income for APTC/CSR/CCP eligibility determination when a report a change (RAC) that involves a change in household income occurs post an ROP batch execution that used the electronic source income in establishing the person's prior APTC/CSR/CCP eligibility.
Eligibility	Eligibility Determination	38781	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) system shall update the conditionally eligible snippets/business rules on the Eligibility Results page to reflect ROP expiration dates.
Eligibility	Eligibility Determination	38840	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) system shall evaluate both benefit years instantaneous when Carry Forward is active across two benefit years and a redetermination results in Carry Forward ending in the current benefit year.
Eligibility	Eligibility Determination	38850	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall suppress DER-U associated with the next benefit year if there is no change in Eligibility between the current benefit year and the next benefit year
Eligibility	Eligibility Determination	38905	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) system shall update the conditionally eligible snippets in the NOD01.
Eligibility	Eligibility Determination	39328	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall assign aid code L6 for each person with a disabled person indicator who would otherwise be determined eligible in aid code M1 with income less than or equal to 128% FPL.
Eligibility	Eligibility Determination	39329	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall send HX20 webservice transaction at intake to MEDS for L6 aid code.
Eligibility	Eligibility Determination	39330	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall assign aid code L7 for each person with a disabled person indicator who would otherwise be determined eligible in aid code M2 with income less than or equal to 128% FPL.
Eligibility	Eligibility Determination	39331	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall send HX20 webservice transaction at intake to MEDS for L7 aid code.
Eligibility	Eligibility Determination	39332	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall store and use the "person disabled indicator" from SAWS if provided to determine L6 or L7 aid code eligibility.
Eligibility	Eligibility Determination	39333	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall add Aid Codes L6 and L7 to the MEDS MEC check table.
Eligibility	Eligibility Determination	39334	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall grant aid codes L6/L7 based on release date.
Eligibility	Eligibility Determination	39335	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) system shall allow specifying components of the composite request to the Fed Hub SSA Service.

Category	Sub Category	Req ID	Requirement
Eligibility	Eligibility Determination	39433	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall accept the following Non-Compliance reason(s) received from SAWS: a. Failure to apply for or accept unconditionally available income including but not limited to: - UIB, SDI, Veteran's Benefits b. Failure to provide the Veteran's information to complete the MC 05 c. Failure to provide other health insurance information d. Failure to comply with Third party Liability e. Failure to apply for Medicare f. Failure to provide 2.1Q (Child Support) g. Failure to provide or apply for SSN h. Failure to provide identity/name
Eligibility	Eligibility Determination	39434	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall have the functionality to deny pending MAGI-Based Medi-Cal applicants with pending eligibility status for which Non-Compliance reason(s) codes are received via SAWS EDR transactions.
Eligibility	Eligibility Determination	39435	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall bypass the 10-day notice period requirement for Non-Compliance reason(s) codes denials of MAGI-Based Medi-Cal applicants with pending eligibility status.
Eligibility	Eligibility Determination	39436	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall have the functionality to discontinue conditionally eligible or eligible MAGI-Based Medi-Cal beneficiaries for prospective months for which Non-Compliance reason(s) codes are received via SAWS EDR transactions.
Eligibility	Eligibility Determination	39437	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall observe a 10-day notice period (10 calendar days from the last day of the current month) prior to discontinuing benefits for a current conditionally eligible or eligible MAGI-Based Medi-Cal beneficiary when the Non-Compliance reason(s) codes are received via SAWS EDR transactions.
Eligibility	Eligibility Determination	39438	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall send SAWS an Eligibility Evaluation Reason code for each of the following Non-Compliance reason(s) received from SAWS when applied. a. Failure to apply for or accept unconditionally available income including but not limited to: - UIB, SDI, Veteran's Benefits b. Failure to provide the Veteran's information to complete the MC 05 c. Failure to provide other health insurance information d. Failure to comply with Third party Liability e. Failure to apply for Medicare f. Failure to provide 2.1Q (Child Support) g. Failure to provide or apply for SSN h. Failure to provide identity/name
Eligibility	Eligibility Determination	39439	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall add messaging on the Eligibility Results page for each of the following Non-Compliance reason(s) when applied. a. Failure to apply for or accept unconditionally available income including but not limited to: - UIB, SDI, Veteran's Benefits b. Failure to provide the Veteran's information to complete the MC 05 c. Failure to provide other health insurance information d. Failure to comply with Third party Liability e. Failure to apply for Medicare f. Failure to provide 2.1Q (Child Support) g. Failure to provide or apply for SSN h. Failure to provide identity/name
Eligibility	Eligibility Determination	39440	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall evaluate individuals for all CCP/APTC/CSR subsidized or unsubsidized programs when they get denied/discontinued from MAGI Medi-Cal due to following Non-Compliance reason(s) and if their income is above the MAGI Medi-Cal FPL. • Failure to apply for or accept unconditionally available income including but not limited to: - UIB, SDI, Veteran's Benefits • Failure to provide the Veteran's information to complete the MC 05 • Failure to provide other health insurance information • Failure to comply with Third party Liability • Failure to provide 2.1Q (Child Support) • Failure to apply for Medicare • Failure to provide or apply for SSN
Eligibility	Eligibility Determination	39441	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall not evaluate individuals for all CCP/APTC/CSR subsidized or unsubsidized programs when they get denied/discontinued from MAGI Medi-Cal due to following Non-Compliance reason(s) regardless of the FPL. • Failure to provide identity/name

Appendix A-4 - SOW Exhibit A - System Requirements Specification
(Extracted from CalHEERS RTM)

Category	Sub Category	Req ID	Requirement
Eligibility	Eligibility Determination	39442	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall evaluate individuals for MCAP and/or CCHIP when they get denied/discontinued from MAGI Medi-Cal due to the four Non-Compliance reason(s) listed below, if their income is within MCAP/CCHIP range. • Failure to apply for or accept unconditionally available income including but not limited to: UIB, SDI, Veteran's Benefits • Failure to provide the Veteran's information to complete the MC 05 • Failure to comply with Third party Liability • Failure to provide 2.1Q (Child Support)
Eligibility	Eligibility Determination	39443	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall not evaluate individuals for MCAP and/or CCHIP when they get denied/discontinued from MAGI Medi-Cal due to the four Non-Compliance reason(s) listed below, if their income is within MCAP/CCHIP range. • Failure to provide other health insurance information • Failure to apply for Medicare • Failure to provide or apply for SSN • Failure to provide identity/name
Eligibility	Eligibility Determination	39444	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall close the case if all individuals on the case are no longer eligible for MAGI Medi-Cal, CCP/APTC/CSR, MCAP and/or CCHIP after receiving disposition for Non-Compliance.
Eligibility	Eligibility Determination	39445	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall maintain and continue to apply non-compliance reason received via SAWS EDR for MAGI-Based Medi-Cal individuals until the Non-Compliance reason(s) is removed from the individual via eHIT.
Eligibility	Eligibility Determination	39446	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall remove the Non-Compliance reason(s) previously received via SAWS EDR for MAGI-Based Medi-Cal individuals when the California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) case is closed and the household reapplies through the California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) portal.
Eligibility	Eligibility Determination	39447	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall remove the Non-Compliance reason(s) previously received via SAWS EDR for MAGI-Based Medi-Cal individuals when the eligibility is re-determined and the person is found eligible for CCP/APTC/CSR, MCAP and CCHIP.
Eligibility	Eligibility Determination	39448	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall not trigger verification services when only a Non-Compliance reason(s) is received for individuals within the MAGI Medi-Cal FPL Limits.
Eligibility	Eligibility Determination	39449	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall lift the Soft Pause on the individual when a Non-Compliance reason(s) is sent for individual in Soft Pause allowing ineligibility determination for MAGI Medi-Cal.
Eligibility	Eligibility Determination	39450	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall lift the Carry Forward on the individual when a Non-Compliance reason(s) is sent for individual in Carry Forward allowing ineligibility determination for MAGI Medi-Cal.
Eligibility	Eligibility Determination	39454	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall provide authorized users the ability to remediate eligibility during the hours of 6:00 AM and 8:00 PM, for initial application, manual renewals or RAC on the same day the eligibility result was received.
Eligibility	Eligibility Determination	39455	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall remediate eligibility for individuals for whom an initial application was received during the hours of 6:00 AM and 8:00 PM within the same day regardless of run reason.
Eligibility	Eligibility Determination	39456	All eligibility determinations from Batch processing are excluded from same day remediation.
Eligibility	Eligibility Determination	39457	When an authorized user re-runs eligibility during the hours of 6:00 AM and 8:00 PM to remediate any eligibility result received that day, California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall not invoke consumer protection programs with the remediated result for the same period of eligibility being evaluated.
Eligibility	Eligibility Determination	39458	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall generate all MEDS transactions after 8:00 PM for any changes to each program eligibility.
Eligibility	Eligibility Determination	39469	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall evaluate individuals for CCP/APTC/CSR subsidized or unsubsidized programs regardless of the Non-Compliance reason(s) if Carry Forward is lifted and their income is above the MAGI Medi-Cal FPL.
Eligibility	Eligibility Determination	39473	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall update the technical components for the California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) SAWS Interface (known as EHIT) for communication with the SAWS for functional changes made to the system on a per release basis.
Eligibility	Eligibility Determination	39557	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall implement configurable functionality to grant full scope eligibility to the effected young adults (without impacting other release functionality) based on the program implementation date.
Eligibility	Eligibility Determination	39612	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall utilize information received from IRS, FTB, EDD, and SSA to verify attested income for the purpose of determining eligibility to the California Premium Subsidy Program.
Eligibility	Eligibility Determination	39616	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall allow consumers to enroll in a health plan through Covered California under the open-enrollment period till January 31st of the benefit year.
Eligibility	Eligibility Determination	39617	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall give the coverage begin date of February 1 for consumers enrolling without a more advantageous QLE from January 16th to January 31st of the benefit year.
Eligibility	Eligibility Determination	39677	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall inform individuals that they have been determined ineligible/discontinued due to residing out-of-State or out of country. Eligibility Results screen shall be updated to display ineligible/discontinued message for out-of-state/out-of-country.
Eligibility	Eligibility Determination	39678	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall update existing language for Notice Snippet 223 for the denial/discontinuance of individuals residing Out-of-State/Out of Country for APTC/CSR/SS program.
Eligibility	Eligibility Determination	39679	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall add a new Notice Snippet for the denial/discontinuance of individuals residing Out-of-State/Out-of-Country for MAGI Medi-Cal program
Eligibility	Eligibility Determination	39680	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall add a new Notice Snippet for the denial/discontinuance of individuals residing Out-of-State/Out-of-Country for MCAP program
Eligibility	Eligibility Determination	39681	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall add a new Notice Snippet for the denial/discontinuance of individuals residing Out-of-State/Out-of-Country for CCHIP program

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(Extracted from CalHEERS RTM)

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Category	Sub Category	Req ID	Requirement
Eligibility	Eligibility Determination	39686	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall display a warning message on the screen for an individual who selects Married Filing Jointly status with more than one individual(s) on the case.
Eligibility	Eligibility Determination	39687	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall display a warning message on the Relationships screen for an individual who selects "Spouse" relationship with more than one individual(s) on the case.
Eligibility	Eligibility Determination	39749	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall not count the COVID-19 Unemployment Insurance Benefit Stimulus Payments for MAGI Medi-Cal eligibility determinations.
Eligibility	Eligibility Determination	39750	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall count the COVID-19 Unemployment Insurance Benefit Stimulus Payments for Covered California program eligibility determinations.
Eligibility	Eligibility Determination	39751	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall have the functionality to configure either to count or not count the COVID-19 Unemployment Insurance Benefit Stimulus Payments for Covered California programs eligibility determinations.
Eligibility	Eligibility Determination	39825	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall trigger an account transfer for demographic updates which do not result in a BRE run.
Eligibility	Eligibility Determination	39828	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall determine a consumer ineligible/discontinued for Covered CA programs when the federal hub indicates the consumer has Medicare.
Eligibility	Eligibility Determination	39829	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall determine a consumer ineligible/discontinued at a RAC for Covered CA programs when the federal hub indicates the consumer has Medicare and the consumer is not enrolled in a plan.
Eligibility	Eligibility Determination	39830	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall provide messaging on the eligibility result page when the individual is ineligible/discontinued due to the Medicare verification.
Eligibility	Eligibility Determination	39831	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall send via eHIT an Eligibility Evaluation Reason Code (EERC) when an individual is ineligible/discontinued to Covered CA programs due to the Medicare verification.
Eligibility	Eligibility Determination	39833	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall update the fair share adjustment percentage amount for APTC for the benefit year 2021
Eligibility	Eligibility Determination	39834	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall run a daily batch to withdraw a 'Report a Change' if it has not been submitted for 30 days.
Eligibility	Eligibility Determination	39835	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall have messaging indicating an expiration date after which an unsubmitted RAC application will be withdrawn, while requesting for a RAC.
Eligibility	Eligibility Determination	39836	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall reset the In-progress RAC 30 day clock when an update to the RAC is saved.
Eligibility	Eligibility Determination	39837	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall display specific Eligibility Results Page verbiage when individuals are determined Conditionally Eligible/Ineligible/Discontinued for Covered CA programs due to self-attestation to receiving ESI, Non-ESI and Medicare, and the following hub responses, MEDS responses or/and Hubs/MEDS error response(s)/down , - Existing Non-ESI Coverage (Including Medicare) - Existing ESI Coverage - Existing Medi-Cal - MEDS Interface Error Response/Hub Down (MEDS MEC) - Hub Error Responses/Hub Down (ESI/Non-ESI)
Eligibility	Eligibility Determination	39838	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall display specific Eligibility Results page verbiage when individuals are determined Ineligible/Discontinued to APTC/CAPS due to the hub returning active Medicare coverage during RAC or Renewals while the individual has a plan selection.
Eligibility	Eligibility Determination	39843	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall trigger an account transfer for demographic updates which do not result in a BRE run.
Eligibility	Eligibility Determination	39844	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall change the renewal due date to the day prior to the last batch sweep date for cases with an FTR code of 009 and the case has not actively renewed.
Eligibility	Eligibility Determination	39845	When running last batch sweep for cases with an FTR code of 009, California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall: -Clear the cache for FTR Response -check the Hub for a new response -run eligibility using the new response
Eligibility	Eligibility Determination	39846	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall create a new batch process to re-run eligibility after checking the Hub for a new FTR response for cases, which had a FTR response code of 009 and the case got actively renewed.
Eligibility	Eligibility Determination	39847	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall run a batch along with RRV to call SSA Composite service (H03) for Incarceration.
Eligibility	Eligibility Determination	39876	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall update the fair share adjustment percentage amount for California Premium Subsidy for the benefit year 2021
Eligibility	Eligibility Determination	40122	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall grant full scope Medi-Cal eligibility for all Modified Adjusted Gross Income (MAGI) eligible individuals who are 50 years of age or older, regardless of their citizenship or immigration status.
Eligibility	Eligibility Determination	40123	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall apply the corresponding full scope aid codes for otherwise eligible individuals who are 50 years of age or older, regardless of their citizenship or immigration status and meet all other eligibility criteria.
Eligibility	Eligibility Determination	40124	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall implement configurable functionality to grant full scope Medi-Cal eligibility to otherwise eligible individuals who are 50 years of age or older, regardless of their citizenship or immigration status (without impacting other release functionality) based on the policy effective date, 5/1/2022.
Eligibility	Eligibility Determination	40125	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall implement a configurable functionality to update the age group which shall grant full scope Medi-Cal eligibility for all Modified Adjusted Gross Income (MAGI) eligible individuals, regardless of their citizenship or immigration status.
Eligibility	Eligibility Determination	40141	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall update the technical components for the California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) SAWS Interface (known as EHIT) for communication with the SAWS for functional changes made to the system on a per release basis.

Appendix A-4 - SOW Exhibit A - System Requirements Specification
(Extracted from CalHEERS RTM)

Category	Sub Category	Req ID	Requirement
Eligibility	Eligibility Determination	40142	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall allow granting of MAGI Medi-Cal Retroactive eligibility for any of the 3 months prior to the Carry Forward Transition month. This would be for individuals who were APTC/CSR/State Subsidy eligible/Conditionally Eligible and enrolled in those months and have transitioned to MAGI Medi-Cal.
Eligibility	Eligibility Determination	40163	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall clear the cache for MEDS MEC Verification for all APTC/CSR/CAPS/CCP eligible/conditionally eligible individuals on Report a Change if previous call to MEDS MEC or Admin verification is more than 30 days.
Eligibility	Eligibility Determination	40164	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall clear the cache and call MEDS MEC Verification for all APTC/CSR/CAPS/CCP eligible/conditionally eligible individuals on California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) Renewals eligibility determinations if the current MEC MEDS verification status is "Pending", "Not-Verified", "E-Verified" or Admin Verified (Pass or Fail) and the previous call to MEDS MEC is more than 30 days.
Eligibility	Eligibility Determination	40165	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall implement three configuration settings that will be set for all Negative Action Reasons, at the reason code level, which will determine if the negative action will impact eligibility to CCP/APTC/CAPS/CSR.
Eligibility	Eligibility Determination	40166	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall implement a configuration setting that will be set for all Negative Action Reasons, which will decide if the negative action will impact eligibility to CCP for consumers who are within MAGI Medi-Cal Income limits. If the setting is "ON", the person will be eligible for CCP. If the setting is "OFF", the person will be ineligible for CCP.
Eligibility	Eligibility Determination	40167	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall implement a configuration setting that will be set for all Negative Action Reasons, which will decide if the negative action will impact eligibility to CCP for consumers who are outside MAGI Medi-Cal Income limits.
Eligibility	Eligibility Determination	40168	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall implement a configuration setting that will be set for all Negative Action Reasons, which will decide if the negative action will impact eligibility to APTC/CAPS/CSR programs for consumers who are outside MAGI Medi-Cal Income limits.
Eligibility	Eligibility Determination	40169	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall have a validation on the Negative Action Configuration page where if the user has set the configuration setting as "ON/Enabled" for individual(s) who are eligible for APTC/CSR/CAPS with income outside the MAGI Medi-Cal Income limit then the setting for individual(s) who are eligible for CCP with income outside the MAGI Medi-Cal income limit should also be "ON/Enabled".
Eligibility	Eligibility Determination	40170	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall create the following new snippet on the Eligibility Results Page for individual(s) denied/discontinued for APTC/CSR/CAPS/CCP due to negative action: "You do not qualify for Covered California plans or financial help. This is based on Medi-Cal case information provided by your local county. If you think this is an error, call the county office to find out what is still needed. [Click here to find your local county office]. (http://www.dhcs.ca.gov/services/medi-cal/Pages/CountyOffices.aspx)."
Eligibility	Eligibility Determination	40171	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall suppress the following income snippets on the Eligibility Results Page for individuals ineligible to APTC/CSR/CAPS and the income is within APTC/CSR/CAPS FPL: - Household income is in the Federal Advance Premium Tax Credits (APTC) program limits. This program provides premium assistance that lowers the cost of insurance for eligible households. - Household income is in the California Premium Subsidy program limits. This program provides premium assistance that lowers the cost of insurance for eligible households. - Household income is in the Cost Sharing Reduction (CSR) program limits. This program lowers the cost of deductible and copayments for eligible households.
Eligibility	Eligibility Determination	40172	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall suppress the following income snippets on the Eligibility Results Page for individuals ineligible to APTC/CSR/CAPS due to reasons other than income: - Household income is not in the Federal Advance Premium Tax Credits (APTC) program limits. This program provides tax credits that lower the cost of insurance for eligible households. - Household income is not in the California Premium Subsidy program limits. This program provides premium assistance that lowers the cost of insurance for eligible households. - Household income is not within in the Cost Sharing Reduction (CSR) program limits. This program lowers the cost of deductibles and copayments for eligible households.
Eligibility	Eligibility Determination	40173	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall remove the following snippet on the Eligibility Results Page for individuals ineligible to APTC/CAPS due to the reason of not planning to file taxes: - You will receive up to \$0.00 for [Benefit Year]. This is because our records show you do not plan to file a tax return for <Benefit Year>. To qualify for financial assistance, you must agree to file a federal tax return for the year you are applying for coverage.
Eligibility	Eligibility Determination	40174	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall create the following new snippet on the Eligibility Results page for individuals ineligible to APTC/CSR/CAPS due to married filing separately, FTR, and not planning to file reasons - You are not eligible to receive premium assistance for one or more of the following reasons: •The primary tax filer does not plan to file federal income taxes. •The primary tax filer has a spouse but does not plan to file taxes as “Married Filing Jointly.” •The primary tax filer plans to file taxes as “Married Filing Separately.” •Someone in your household did not file a federal income tax return with IRS Form 8962 for a year when they got premium tax credits.
Eligibility	Eligibility Determination	40175	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall create the following new snippet on the Eligibility Results page for individuals ineligible to APTC/CSR/CAPS due to consumer not being a part of tax filing household - You are not part of the primary tax filer's household. If you want financial help to lower the cost of a Covered California health plan, you must apply on a separate application. Or, if this is a mistake, please update the tax filing household on your current application.
Eligibility	Eligibility Determination	40176	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall display the existing snippet "You did not give us permission to check federal sources to verify your information. We need your permission to see if your household qualifies for free or reduced cost coverage", if consent for income verification has not been provided.

Appendix A-4 - SOW Exhibit A - System Requirements Specification
(Extracted from CalHEERS RTM)

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Category	Sub Category	Req ID	Requirement
Eligibility	Eligibility Determination	40177	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall remove the following snippet Eligibility Factor_089 on the Eligibility Results Page for individuals ineligible to APTC/CAPS due to the reason of a IRS response code: You are not eligible to receive premium assistance for one of the following reasons: · You may not have filed a federal income tax return for your household. · Your consent to allow Covered California to use computer sources to check your income and family size, including information from tax returns may have expired. · Your household income may be too high. For more information, please call the Customer Service Center at (800) 300-1506 or you can update your tax filing status or update your consent by clicking on the Update Consent for Verification and Tax Filing Attestation link.
Eligibility	Eligibility Determination	40178	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall allow a consumer to create an access code for Covered California login using a case ID that is not "closed as a duplicate" or already linked to an account along with four levels of authentication namely Case ID, Primary Contact's Name, SSN, DOB.
Eligibility	Eligibility Determination	40179	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall add the below data elements to persist the successful vs unsuccessful generation of consumer generated access codes for the monthly report: Consumer Name, Last 4 digits of SSN (if available), DOB, Case ID (California Healthcare Eligibility, Enrollment and Retention System (CalHEERS)/SAWS), Access Code Created Flag, Reason for not generating Access Code.
Eligibility	Eligibility Determination	40180	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall allow the consumer three unsuccessful attempts for access code retrieval/generation per session. At the third unsuccessful attempt, an error message will display indicating that the user has expired his/her attempts for retrieving/generating access code and will be redirected to "Contact Us" page.
Eligibility	Eligibility Determination	40181	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall display a generic error message at every unsuccessful attempt to retrieve/generate an access code.
Eligibility	Eligibility Determination	40182	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall create a new page which provides two options to the user to select between "New Application" Vs. "Existing Application" to create an Account.
Eligibility	Eligibility Determination	40183	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall create a new page which asks the consumer if they already have an access code or not. If the consumer has an access code, he/she can enter it and proceed. If the consumer does not have an access code, he/she can click "No" and this will lead them to the next page to search for their access code.
Eligibility	Eligibility Determination	40184	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall create a new page where the consumer is able to search for the access code by entering information on the following fields, 1. Case Number 2. First Name and Last Name 3. DOB 4. SSN (Optional)
Eligibility	Eligibility Determination	40185	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall disable the following fields on "Create an Account to Apply" when an access code is successfully created, 1. First Name 2. Last Name 3. DOB 4. SSN (If Provided) 5. Enter Access Code
Eligibility	Eligibility Determination	40186	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall remove the following fields from the "Create an Account to Apply" page, 1. Do you have an Access Code to link an existing case to this application? 2. The help message "If you created a Covered California application by phone or in person, you will need an access code to link your application to your account. If you do not have your access code, call Covered California: 800-787-6921."
Eligibility	Eligibility Determination	40187	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall create a transition flag at an individual level when a consumer is transitioning from MAGI Medi-Cal to Covered California programs.
Eligibility	Eligibility Determination	40188	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall display the transition flag which indicates the transition from MAGI Medi-Cal to Covered California programs on the budget worksheet.
Eligibility	Eligibility Determination	40189	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall persist the transition flag which indicates the transition from MAGI Medi-Cal to Covered California for a period which extends till the expiration date of the transition QLE plus 30 days, unless the case moves to Carry Forward Status or moves back to MAGI Medi-Cal.
Eligibility	Eligibility Determination	40190	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall send the transition flag and the Transition QLE End Date in the Account Transfer.
Eligibility	Eligibility Determination	40191	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall persist and display the QLE reason of "Lost or will lose health coverage", when detecting a loss of MEC for consumers transitioning from MAGI Medi-Cal to Covered California.
Eligibility	Eligibility Determination	40192	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall use the QLE reason of "Lost or will lose health coverage" when detecting a loss of MEC for consumers transitioning from MAGI Medi-Cal to Covered California at plan selection and for Account Transfer.
Eligibility	Eligibility Determination	40193	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall receive Aid Code, Status, effective dates in the Disposition transaction from SAWS, when a consumer is determined eligible to Non-MAGI Medi-Cal.
Eligibility	Eligibility Determination	40194	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall use the aid code, status and effective dates to determine if coverage meets MEC when a disposition was received from SAWS for a consumer transitioning to Non-MAGI.
Eligibility	Eligibility Determination	40195	SAWS req to consistently send the data.
Eligibility	Eligibility Determination	40211	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall have the functionality to display eligibility results authorized by SAWS in the California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) Portal.
Eligibility	Eligibility Determination	40212	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall have the functionality to display Non-MAGI Medi-Cal Aid Codes (MEC and Non-MEC) authorized by SAWS under Non-MAGI Medi-Cal programs in the 'Program Eligibility History Summary' section of 'Program Eligibility by Person' page.

Appendix A-4 - SOW Exhibit A - System Requirements Specification
(Extracted from CalHEERS RTM)

Category	Sub Category	Req ID	Requirement
Eligibility	Eligibility Determination	40213	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall have the functionality to display the source "SAWS" on "Program Eligibility by Person" page when eligibility dispositioned by SAWS differs from that provided by California Healthcare Eligibility, Enrollment and Retention System (CalHEERS).
Eligibility	Eligibility Determination	40214	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall have the functionality to display eligibility determination factor "Our records indicate that you have existing Medi-Cal coverage. If you think this is an error, please contact your local county office. [Click here to find your local county office](http://www.dhcs.ca.gov/services/medi-cal/Pages/CountyOffices.aspx)" when disposition is received from SAWS with a Medi-Cal MEC aid code that is different from that provided by California Healthcare Eligibility, Enrollment and Retention System (CalHEERS).
Eligibility	Eligibility Determination	40216	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall have the functionality to call electronic services for all outstanding verifications (regardless of ROP Configuration Page selection) and the positive action will be taken if verifications are e-verified or Admin Verified
Eligibility	Eligibility Determination	40217	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall have the functionality to take action, during ROP Processing, only to the attributes that are turned "On" in the ROP Batch configuration page.
Eligibility	Eligibility Determination	40218	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall have the functionality to exclude taking adverse action, during ROP Processing, for the attributes that are turned "Off" in the ROP Batch Configuration page.
Eligibility	Eligibility Determination	40219	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall have the functionality to call the Electronic Verification Services only for all the enrolled members who are Conditionally Eligible for APTC/CA Premium Subsidy, CSR, and/or CCP for their outstanding verifications during the ROP Processing
Eligibility	Eligibility Determination	40220	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall have the functionality to call the Electronic Verification Services for outstanding income verification, during ROP Processing, for all members regardless of their enrollment status.
Eligibility	Eligibility Determination	40221	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall skip the Electronic Verification calls and run eligibility for any case included in the ROP Batch which has insufficient information to trigger a HUB call for the verification.
Eligibility	Eligibility Determination	40222	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall handle the technical error codes while calling Verification services during ROP batch run, and not take action while running BRE for the attribute which errored out.
Eligibility	Eligibility Determination	40223	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall handle the functional error codes while calling Verification services during ROP batch run, and take adverse action while running BRE for the attribute which errored out.
Eligibility	Eligibility Determination	40224	During ROP Batch run California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall not call VLP if Lawful presence verification for the selected individual is outstanding and if his DHS Case is in open status.
Eligibility	Eligibility Determination	40225	During ROP Batch run California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall not call VLP if DHS Case is Closed after Step 3 and lawful presence verification is still pending.
Eligibility	Eligibility Determination	40226	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall discontinue the consumer from CCP/APTC/CSR/State Subsidy if the last DHS response is verified as "Not Lawfully Present" or pending and the DHS case is "closed".
Eligibility	Eligibility Determination	40227	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall exclude from the ROP selection batch, all cases in which the only expired outstanding verifications are for Lawful Presence and/or for Naturalized or Derived Citizenship and the identified individuals have an "open" DHS case.
Eligibility	Eligibility Determination	40228	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall have an automated process to attempt re-verification of inconsistent verifications at the end of the reasonable opportunity period, only if the verification inconsistency is responsible for a consumer's conditional eligibility status to CCP/APTC/CA Premium Subsidy/CSR programs.
Eligibility	Eligibility Determination	40229	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall have an automated ROP process to discontinue APTC/CA Premium Subsidy/CSR/CCP program eligibility and enrollments only for outstanding verifications with an ROP expiration date in the past for: - Citizenship - Lawful Presence - Incarceration - Deceased
Eligibility	Eligibility Determination	40230	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall remove the ROP Expiration Date for a given verification attribute when the affected program eligibility is discontinued or if a given verification status is modified to E-verified, Pass, or Fail.
Eligibility	Eligibility Determination	40231	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall only extend the ROP Expiration Date for a given verification attribute when a CCP renewal determination is made or if an Admin extends the ROP Expiration Date
Eligibility	Eligibility Determination	40232	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall have the Simulation functionality for the ROP Process
Eligibility	Eligibility Determination	40233	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall have the functionality to store Electronic Verification services results retrieved during Simulation for use in both Simulation and subsequent Production BRE runs
Eligibility	Eligibility Determination	40234	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall have the functionality to determine eligibility in simulation mode without committing the eligibility results to the production case.
Eligibility	Eligibility Determination	40236	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall provide a functionality to allow ROP Simulation and Regular ROP batch to run in parallel with their respective attributes settings
Eligibility	Eligibility Determination	40237	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall have the functionality to purge the ROP Simulation run related data from the Simulation schema post 60 days from the ROP Simulation run.
Eligibility	Eligibility Determination	40243	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall have the functionality to display Non-MAGI Medi-Cal eligibility record authorized by SAWS under the Current Eligibility Summary section of the Program Eligibility by Person page.
Eligibility	Eligibility Determination	40244	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall have the functionality to prevent program name "Medi-Cal" from displaying on the "Learn more about this Determination" section of the California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) Eligibility Results Summary page, if the person is determined eligible for MAGI Medi-Cal and/or Non-MAGI Medi-Cal programs based on SAWS dispositions.

Appendix A-4 - SOW Exhibit A - System Requirements Specification
(Extracted from CalHEERS RTM)

Category	Sub Category	Req ID	Requirement
Eligibility	Eligibility Determination	40246	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall have the functionality to re-evaluate eligibility in real time using Non-MAGI Medi-Cal MEC Aid Code provided by SAWS.
Eligibility	Eligibility Determination	40247	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall have the functionality to re-evaluate eligibility in real time using MAGI Medi-Cal Aid Code provided by SAWS.
Eligibility	Eligibility Determination	40248	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall have the functionality to update Non-MAGI Medi-Cal eligibility aid code in real time using Non-MAGI Medi-Cal Non-MEC Aid Code provided by SAWS.
Eligibility	Eligibility Determination	40249	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall have the functionality to automatically lift Carry Forward when MEC Medi-Cal is eligible and the end date is a high date on the disposition from SAWS.
Eligibility	Eligibility Determination	40250	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall have the functionality to suppress verification calls for Non-MAGI MEC Medi-Cal only households when running eligibility via disposition.
Eligibility	Eligibility Determination	40251	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall have the functionality to suppress MEDS verification calls when running eligibility via disposition.
Eligibility	Eligibility Determination	40253	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall have the functionality to insert case notes in the portal when the eligibility authorized by SAWS differs from that generated by California Healthcare Eligibility, Enrollment and Retention System (CalHEERS).
Eligibility	Eligibility Determination	40306	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall apply aid code '8E' to all eligible Accelerated Enrollment individuals.
Eligibility	Eligibility Determination	40307	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall determine an individual Conditionally Eligible for MAGI Medi-Cal when the individual is granted Accelerated Enrollment.
Eligibility	Eligibility Determination	40308	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall send the '8E' Aid Code to MEDS via the HX20 transaction when an Individual is granted Accelerated Enrollment from California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) access channel.
Eligibility	Eligibility Determination	40309	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall send an HX20 where existing household member becomes an Applicant and all subsequent RACs submitted within same day remediation timeframe for MAGI Medi-Cal programs.
Eligibility	Eligibility Determination	40310	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall send an HX20 where existing household member becomes an Applicant and all subsequent RACs submitted within same day remediation timeframe for Covered CA, CCHIP, and MCAP programs.
Eligibility	Eligibility Determination	40311	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall validate that an individual has a CIN prior to granting eligibility for Accelerated Enrollment.
Eligibility	Eligibility Determination	40312	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall add the ability for Accelerated Enrollment functionality for adults to be enabled or disabled based on a configuration.
Eligibility	Eligibility Determination	40313	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall suppress HX18 transactions to MEDS for Accelerated Enrollment aid code 8E.
Eligibility	Eligibility Determination	40324	SIR 164207: California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall update the reference of old eligibility table HBX_INDV_CASE_ELIG with new eligibility table(s) for Disposition service implementation.
Eligibility	Eligibility Determination	40329	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall have an automated process to request Periodic Verification Service (PVC) for Medicare information for consumers who are enrolled in a Health plan (Enrolled, Pending) and meet the following criteria: - Consumers who are eligible for APTC/CSR/State Subsidy; or - Consumers who are conditionally eligible for APTC/CSR/State Subsidy And - Consumers who have an E-Verified SSN
Eligibility	Eligibility Determination	40330	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall exclude cases from the Periodic Verification process for Medicare where at least one individual meets the following criteria: - In carry forward status; or - In QHP hold
Eligibility	Eligibility Determination	40331	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall request data from the Periodic Verification Service (PVC) regarding enrollment in a Medicare program.
Eligibility	Eligibility Determination	40332	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall use the Medicare information gathered from the Periodic Verification (PVC) Service for individuals who are flagged by PVC for receiving Medicare.
Eligibility	Eligibility Determination	40333	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall flag the consumer when an active enrollment in Medicare is detected by PVC Batch.
Eligibility	Eligibility Determination	40334	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall provide a configuration setting for “number of days” that will be used to set an expiration date, when consumer is flagged by Periodic Verification.
Eligibility	Eligibility Determination	40335	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall display the PVC expiration date for Medicare on the following pages: - Account home - Verifications screen
Eligibility	Eligibility Determination	40336	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall not flag the consumer when the PVC service returns a "Not Verified" status for a consumer while checking for enrollment in Medicare.
Eligibility	Eligibility Determination	40337	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall clear the cache, update the verification for Medicare and not flag the consumer when the PVC service returns a value indicating that the consumer is not enrolled in Medicare.
Eligibility	Eligibility Determination	40348	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall grant Accelerated Enrollment Medi-Cal Eligibility for all Modified Adjusted Gross Income (MAGI) Medi-Cal eligible adults regardless of category (Adult, Parent/Caretaker, pregnancy, Etc.) and who are pending for any verifications other than Deceased and MEDS MEC verification from California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) access channel for intake run reasons or during reapplication.
Eligibility	Eligibility Determination	40349	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall grant Accelerated Enrollment Medi-Cal eligibility for all Modified Adjusted Gross Income (MAGI) Medi-Cal eligible Children who are under 19 years of age and who are pending for any verifications other than Deceased and MEDS MEC verification from California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) access channel for intake run reasons or during reapplication.
Eligibility	Eligibility Determination	40355	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall set same Expiration date for all the individuals flagged for Medicare or Deceased by the PVC service

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(Extracted from CalHEERS RTM)

Category	Sub Category	Req ID	Requirement
Eligibility	Eligibility Determination	40356	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall allow users to record the following consumer responses to the Periodic Verification for Medicare and Deceased flagged consumers: - Agreement with the electronic data - Disagreement with the electronic data
Eligibility	Eligibility Determination	40357	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall allow all users provisioned with access to the case to record a response to the Medicare and Deceased Verification and run eligibility on the case.
Eligibility	Eligibility Determination	40358	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall provide users having "Admin" profile with an additional option to save the consumer response to the Medicare and Deceased Verification and skip eligibility run on the case.
Eligibility	Eligibility Determination	40359	For consumers who respond "Disagree" to the Medicare data and for which an eligibility run has occurred, California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall take the following actions: - Remove the Periodic Verification flag - Update the verification status to Admin Pass and discard the PVC response for Medicare - Eligibility status will be "Eligible" based on medicare verification status, if otherwise eligible - Remove Medicare ROP date, if it exists - Suppress Non MAGI referrals for cases
Eligibility	Eligibility Determination	40360	For consumers who respond "Agree" to the Medicare data and for which an eligibility run has occurred, California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall take the following actions: - Remove the Periodic Verification flag - Set the consumer as Self Attesting to Medicare (Medicare Part A question will be set to "Yes") - Update the verification status to E-Verified - Use the self-attestation to Medicare to discontinue eligibility to financial assistance - Non-MAGI Referral will be generated due to Medicare Self-Attestation
Eligibility	Eligibility Determination	40361	While running eligibility which is not a PVC eligibility run during the PVC process, California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall use the cached verification for Medicare and not the verification received from PVC Service for a consumer who has not provided a response to the PVC data.
Eligibility	Eligibility Determination	40362	While running eligibility which is not a PVC eligibility run during the PVC process and no cached verification is present for Medicare, California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall use the existing verification caching rules for updating the verification status and eligibility determination for a consumer who has not provided a response to the PVC reponse.
Eligibility	Eligibility Determination	40363	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) Eligibility run will differentiate between the PVC run and the regular eligibility run
Eligibility	Eligibility Determination	40364	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall set the Origination code on DER-U to CHA when sent as part of the PVC Batch Eligibility run for when, 1. Consumer has not provided a response (Agree/Disagree) and No response auto eligibility batch is triggered at the end of the expiration date 2. Admin saved a response (Agree/Disagree) and the case was picked up by the nightly batch process to run eligibility using the saved response.
Eligibility	Eligibility Determination	40365	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall have an automated process at the end of Medicare Verification Expiration date if the responses have not been provided for any household members: - Remove the Periodic Verification flag - Update the verification status to "Pending" to match the PVC response - Use the Medicare response to grant conditional eligibility - Suppress Non MAGI referrals for cases - If a person is in ROP period due to a previous determination, the ROP date will not be re-set. If there was no ROP date previously then a 95 days ROP date will be set for the individual.
Eligibility	Eligibility Determination	40366	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall trigger an automated process daily to run eligibility on all the cases where atleast one individual have a saved response (Agree, Disagree) and Periodic Verification flag is set to "Yes".
Eligibility	Eligibility Determination	40367	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall use the "Agree" or "Disagree" rules for eligibility determination. The Periodic Verification flag and expiration date will be removed.
Eligibility	Eligibility Determination	40368	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall use the existing EERC code of "CN" on the DER to SAWS for individuals discontinued from APTC/CSR/CAPS benefits due to PVC Agree response for Medicare.
Eligibility	Eligibility Determination	40369	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall create a unique transaction name in the Transaction History table to track actions taken on periodic verification, eligibility determination, and enrollment update
Eligibility	Eligibility Determination	40370	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall clear the Periodic Verification Flag and expiration date for the consumer and apply the existing verification caching and eligibility determination rules in a BRE run if any of the following conditions is met after the person is flagged for Medicare/Deceased verification, 1. When a data element which impacts Medicare and Deceased verification has been updated 2. If an individual is no longer eligible/conditionally eligible for APTC/CSR/CAPS , clear the Periodic Verification flag for Medicare 3. If an individual is no longer eligible/conditionally eligible for APTC/CSR/CAPS and CCP, clear the Periodic Verification flag for Deceased 4. If the individual's case is closed as duplicate or terminated 5. If the flagged individual is Actively or Passively Renewed for the next benefit year for Covered CA programs 6. If the flagged individual with no saved response is re-determined, follow the existing verification caching rules to use Admin verification (if present) or calling the hub based on the run reason. Remove the Periodic Verification flag and expiration date only if the person become Eligible or gets Discontinued due to call to SSA/Non-ESI or Admin verification.

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(Extracted from CalHEERS RTM)

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Category	Sub Category	Req ID	Requirement
Eligibility	Eligibility Determination	40371	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall have an automated process to request Periodic Verification (PVC) Service for Deceased information for all consumers who have an active Health or Dental or both enrollment(s) (Enrolled/Pending) and their eligibility status is: 1. Eligible for CCP OR 2. Conditionally eligible for CCP And 3. Consumers who have an E-Verified SSN
Eligibility	Eligibility Determination	40372	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall exclude cases from the Periodic Verification (PVC) process for deceased, where at least one individual meets the following criteria: - In carry forward status; or - In QHP hold
Eligibility	Eligibility Determination	40373	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall request data from the Periodic Verification (PVC) Service regarding Deceased status.
Eligibility	Eligibility Determination	40374	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall use the Deceased information gathered from the Periodic Verification (PVC) Service for individuals who are flagged for being deceased.
Eligibility	Eligibility Determination	40375	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall flag the consumer when a Deceased response is detected by PVC Batch.
Eligibility	Eligibility Determination	40380	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall allow SAWS to review real time MAGI Medi-Cal Eligibility Results that require SAWS Eligibility Review and result in Conditionally Eligible, Eligible, or Discontinued for California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) access channel eligibility runs.
Eligibility	Eligibility Determination	40381	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall pend MAGI Medi-Cal Eligibility Results when a report a change is submitted for a MAGI Medi-Cal only case until confirmation is received from SAWS.
Eligibility	Eligibility Determination	40382	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall pend MAGI Medi-Cal Eligibility Results when a report a change is submitted for a Mixed Household case until confirmation is received from SAWS.
Eligibility	Eligibility Determination	40383	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall pend MAGI Medi-Cal Eligibility Results when an active Exchange renewal is submitted for a Mixed Household case until confirmation is received from SAWS.
Eligibility	Eligibility Determination	40384	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall allow SAWS to review real time MAGI Medi-Cal Eligibility Results that require SAWS Eligibility Review and result in Conditionally Eligible, Eligible, or Discontinued for SAWS access channel eligibility runs.
Eligibility	Eligibility Determination	40385	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall pend MAGI Medi-Cal Eligibility Results for a MAGI Medi-Cal only intake case until confirmation is received from SAWS.
Eligibility	Eligibility Determination	40386	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall pend MAGI Medi-Cal Eligibility Results for a Mixed Household intake case until confirmation is received from SAWS.
Eligibility	Eligibility Determination	40387	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall pend MAGI Medi-Cal Eligibility Results when a report a change is submitted for a MAGI Medi-Cal only case until confirmation is received from SAWS.
Eligibility	Eligibility Determination	40388	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall pend MAGI Medi-Cal Eligibility Results when a report a change is submitted for a Mixed Household case until confirmation is received from SAWS.
Eligibility	Eligibility Determination	40389	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall pend MAGI Medi-Cal Eligibility Results when a manual MAGI Medi-Cal only renewal is submitted for a MAGI Medi-Cal only case until confirmation is received from SAWS.
Eligibility	Eligibility Determination	40390	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall pend MAGI Medi-Cal Eligibility Results when a manual MAGI Medi-Cal only renewal is submitted for a Mixed Household case until confirmation is received from SAWS.
Eligibility	Eligibility Determination	40391	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall not evaluate individuals for Covered California programs until confirmation is received from SAWS for full scope MAGI Medi-Cal discontinuance.
Eligibility	Eligibility Determination	40392	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall allow MCAP individuals to remain eligible for the MCAP program until transition to MAGI Medi-Cal program is confirmed by SAWS.
Eligibility	Eligibility Determination	40393	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall allow CCHIP individuals to remain eligible for the CCHIP program until transition to MAGI Medi-Cal program is confirmed by SAWS.
Eligibility	Eligibility Determination	40396	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall send the MAGI Medi-Cal Eligibility Results determined by California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) Business Rules Engine as Eligible, Conditionally Eligible, or Discontinued on the DER/DER-U when the MAGI Medi-Cal Eligibility Results in California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) are Pending for SAWS confirmation.
Eligibility	Eligibility Determination	40397	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall trigger Business Rules Engine run when the Medi-Cal Eligibility Results are confirmed by SAWS.
Eligibility	Eligibility Determination	40398	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall display updated messaging to consumers for MAGI Medi-Cal Eligibility Results that are awaiting SAWS confirmation.
Eligibility	Eligibility Determination	40399	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall display the Eligibility Status of "Awaiting Review" for Medi-Cal program on the "Current Eligibility Summary Section" of Program Eligibility by Person page when the MAGI Medi-Cal Eligibility Results in California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) system are Pending for SAWS confirmation.
Eligibility	Eligibility Determination	40400	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall display the Eligibility Status of "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." for Medi-Cal program on the "Program Eligibility History Summary Section" of Program Eligibility by Person page when the MAGI Medi-Cal Eligibility Results in California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) system are Pending for SAWS confirmation.
Eligibility	Eligibility Determination	40401	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall display updated messaging of "Medi-Cal: Awaiting Review" for Medi-Cal program on Household Eligibility Results Summary page when the MAGI Medi-Cal Eligibility Results in California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) system are Pending for SAWS confirmation.

Category	Sub Category	Req ID	Requirement
Eligibility	Eligibility Determination	40402	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall display the PVC expiration date for Deceased on the following pages: - Account home - Verifications screen
Eligibility	Eligibility Determination	40403	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall not flag the consumer when the PVC service returns a "Not Verified" status for a consumer while checking for Deceased.
Eligibility	Eligibility Determination	40404	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall clear the Periodic Verification Fag for the consumer when a user provisioned with access to the case records a response to the Deceased Verification. California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall clear the cache, update the verification for Deceased and not flag the consumer when the PVC service returns a value indicating that the consumer is not deceased.
Eligibility	Eligibility Determination	40405	For consumers who respond "Disagree" to the Deceased data and for which an eligibility run has occurred, California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall take the following actions: - Remove the Periodic Verification flag - Update the verification status to Admin Pass and discard the PVC response for deceased - Eligibility status will be "Eligible" based on deceased verification status, if otherwise eligible - Remove the ROP date if it exists for deceased from a previous run
Eligibility	Eligibility Determination	40406	For consumers who respond "Agree" to the Deceased data and for which an eligibility run has occurred, California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall take the following actions: - Remove the Periodic Verification flag - Update the default value of deceased self-attestation on the Verification page to "Yes". This value should not flip back to "No", once set as "Yes" due to Agreed response unless clear verification action is performed on the Verification page. - Update the Deceased Verification Status to "E-Verified" - Discontinue consumer from CCP/APTC/CSR/CAPS (all programs)
Eligibility	Eligibility Determination	40407	While running eligibility which is not a PVC eligibility run during the PVC process, California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall use the cached verification for Deceased and not the verification received from PVC Service for a consumer who has not provided a response to the PVC data.
Eligibility	Eligibility Determination	40408	While running eligibility which is not a PVC eligibility run during the PVC process and no cached verification is present for Deceased, California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall use the existing verification caching rules for updating the verification status and eligibility determination for a consumer who has not provided a response to the PVC reponse.
Eligibility	Eligibility Determination	40409	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall have an automated process at the end of the Verification Expiration date if the responses have not been provided for any household members: - Remove the Periodic Verification flag - Update the verification status to "Pending" to match the PVC response - Use the Deceased response to grant conditional eligibility - If a person is already in ROP due to a previous determination, do not re-set the ROP date. If there was no previous ROP date then set a ROP date of 95 days.
Eligibility	Eligibility Determination	40410	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall trigger an automated process daily to run eligibility on all the cases where atleast one individual have a saved response (Agree, Disagree) and Periodic Verification flag is set to "Yes".
Eligibility	Eligibility Determination	40411	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall use the "Agree" or "Disagree" rules for eligibility determination. The Periodic Verification flag and expiration date will be removed.
Eligibility	Eligibility Determination	40412	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall create and send a new EERC code for individuals discontinued from APTC/CSR/CAPS/CCP benefits due to PVC Agree response for Deceased on the DER-U to SAWS for Mixed Household cases.
Eligibility	Eligibility Determination	40413	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall persist date of death received from the PVC response for sending to SAWS on the DER-U.
Eligibility	Eligibility Determination	40414	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall call the hub for Medicare and/or Deceased during a RAC if the verification status is "Pending" and eligibility status is "Conditionally Eligible" due to PVC when the consumer did not respond.
Eligibility	Eligibility Determination	40415	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall only update the cache and use the response from hub for Eligibility Determination if the individual's eligibility status becomes "Eligible" due to the verification status as result of hub call.
Eligibility	Eligibility Determination	40420	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall send the "Date of Death" to SAWS via eHIT in the DER/DER-U as part of the Demographics node when eligibility is determined due to agree response to Deceased verification for Periodic Verification Confirmation (PVC).
Eligibility	Eligibility Determination	40436	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall display updated messaging of "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." for Medi-Cal program on Individual Eligibility Details section of Household Eligibility Results Summary page when the MAGI Medi-Cal Eligibility Results in California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) system are Pending for SAWS confirmation.
Eligibility	Eligibility Determination	40437	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall display the "Program Eligibility" as "Medi-Cal: Awaiting Review" on the "Household Summary Section" of the "Account Home Page" when the MAGI Medi-Cal Eligibility Results in California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) system are Pending for SAWS confirmation.
Eligibility	Eligibility Determination	40439	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall have the functionality to insert case notes in the California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) portal when MAGI Medi-Cal Eligibility Results are confirmed by SAWS.
Eligibility	Eligibility Determination	40440	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall send an Eligibility Evaluation Reason Code of "Prospective Change to MAGI Medi-Cal Eligibility Result" (PM) when an individual has a prospective change to MAGI Medi-Cal Eligibility Result that is not being sent on the DER/DER-U for the benefit month.

Appendix A-4 - SOW Exhibit A - System Requirements Specification
(Extracted from CalHEERS RTM)

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Category	Sub Category	Req ID	Requirement
Eligibility	Eligibility Determination	40441	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall suppress MAGI Medi-Cal only eligibility determination factors on Individual Eligibility Details section of Household Eligibility Results Summary page when the MAGI Medi-Cal Eligibility Results in California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) system are Pending for SAWS confirmation.
Eligibility	Eligibility Determination	40478	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall use the Alternate fair share adjustment percentage for APTC for the evaluated benefit year.
Eligibility	Eligibility Determination	40479	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall have a configurable setting for using the alternate fair share percentage for APTC for the evaluated benefit year, based on the specified effective date.
Eligibility	Eligibility Determination	40480	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall grant eligibility to Federal APTC subsidy for individuals whose APTC household income is > 400% FPL and who are otherwise eligible or conditionally eligible to APTC.
Eligibility	Eligibility Determination	40481	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall use the Aid Code of X1 to grant eligibility to APTC for individuals whose APTC household income is > 400% FPL
Eligibility	Eligibility Determination	40482	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall use the Aid Code of X6 to grant eligibility to APTC for AI/AN individuals whose APTC household income is > 400% FPL
Eligibility	Eligibility Determination	40483	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall have a configurable setting for using the Alternate APTC Cliff for the evaluated benefit year based on the specified effective date.
Eligibility	Eligibility Determination	40484	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall have a configurable APTC Cliff value (APTC upper limit) for the evaluated benefit year and it will be used only if the APTC Cliff configuration is effective.
Eligibility	Eligibility Determination	40485	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall develop a one-time process to run eligibility on all subsidized applications with Covered CA enrollment, to get the eligibility and subsidy amounts as per the new FPL limits for APTC eligibility
Eligibility	Eligibility Determination	40486	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall make updates to Eligibility Results screen to display the below message for consumers conditionally eligible/eligible to APTC/CAPS and their monthly APTC amount or/and monthly State Subsidy amount is \$0: "If your premium assistance amount is \$0.00, it is because the cost of the standard plan in your area is less than the maximum monthly amount you are expected to pay for a health plan. It could also be because you have received all the premium assistance your household qualifies for this year."
Eligibility	Eligibility Determination	40553	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall develop a one-time process to run eligibility on all the existing subsidized applications with at least one person eligible/conditionally eligible to CCP, using the alternate APTC cliff and alternate fair share percentage adjustments for APTC for the evaluated benefit year.
Eligibility	Eligibility Determination	40554	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall exclude the following cases from the one-time process to run eligibility using the alternate APTC cliff and alternate fair share percentage adjustments for APTC for the evaluated benefit year, 1. At least one member on the case is in Carry Forward status 2. A case is closed as duplicate 3. Cases with Intake/Re-determination post 4/5 (M1 implementation) 4. Cases with Dental Enrollment Only 5. Cases with Health plan in "Terminated" or "Cancelled" status (For all members on the case) 6. Cases with no consent for the current year (Individuals receiving CCP Only due to no consent in 2021) 7. Cases where all CCP eligible individuals are ineligible/discontinued to APTC/CSR/CAPS due to reasons other than income limit (For e.g., self-attested to Medicare) 8. Cases with Application Status as "Terminated"
Eligibility	Eligibility Determination	40555	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall use the new Sub Run Reason Code "CLF" in the Re-determination batch (ELG-1002-DD-01) when running eligibility on the cases as part of this one-time redetermination process using the alternate APTC cliff and alternate fair share percentage adjustments for APTC for the evaluated benefit year.
Eligibility	Eligibility Determination	40556	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall use the QLE reason "None of the above" in the Re-determination batch (ELG-1002-DD-01) when running eligibility on the cases as part of this one-time redetermination process using the alternate APTC cliff and alternate fair share percentage adjustments for APTC for the evaluated benefit year.
Eligibility	Eligibility Determination	40557	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall add the following text to the case notes in the Re-determination batch (ELG-1002-DD-01) when running eligibility on the cases as part of this one-time redetermination process using the alternate APTC cliff and alternate fair share percentage adjustments for APTC for the evaluated benefit year, "Due to a legislative update, the eligibility for this case has been run with the updated required contribution table. No change to application data has been made. Financial assistance may have been updated effective 05/01/2021. Billing from the carrier may not reflect the change until the June invoice."
Eligibility	Eligibility Determination	40558	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall calculate preliminary eligibility results in the Shop and Compare tool using the alternate APTC Cliff and alternate FPL contribution percentage table for the applicable benefit year.
Eligibility	Eligibility Determination	40559	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall display preliminary eligibility results in the Shop and Compare tool using the alternate APTC Cliff and alternate FPL contribution percentage table for the applicable benefit year.
Eligibility	Eligibility Determination	40613	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall override the subsidy household FPL if either the primary tax filer or spouse of the primary tax filer has UI income greater than zero and at least one individual in the primary tax filer's household is otherwise conditionally eligible/eligible to APTC benefits.
Eligibility	Eligibility Determination	40614	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall have a configuration to toggle on and off the functionality for APTC FPL Lock due to UI in a benefit year, based on a specified effective date.
Eligibility	Eligibility Determination	40615	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall grant consumers aid codes based on the overridden FPL%.
Eligibility	Eligibility Determination	40616	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall not apply UI Lock to cases where at least one person in the case is in carry forward status.
Eligibility	Eligibility Determination	40617	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall not apply UI Lock to cases where the individual(s) receiving UI on the case have either HH Income-Subsidy or HH Income -CA State Subsidy failed.
Eligibility	Eligibility Determination	40618	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall use the self attested countable income for reasonable compatibility if individual met the UI Lock criteria.

Appendix A-4 - SOW Exhibit A - System Requirements Specification
(Extracted from CalHEERS RTM)

Category	Sub Category	Req ID	Requirement
Eligibility	Eligibility Determination	40619	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall override the income verification status (Subsidy/CA Subsidy) for individuals who met the UI Lock criteria to "E-verified" if their income verification status is "Pending" or "Not Verified".
Eligibility	Eligibility Determination	40620	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall display "Overridden" as verification source for income verification (Subsidy/CA Subsidy) for individuals who met the UI Lock criteria when their income verification status is overridden to "E-Verified".
Eligibility	Eligibility Determination	40621	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall send "Overridden" as verification source for income verification (subsidy/CA Subsidy) in the eHIT transaction to SAWS when the verification status is overridden to "E-Verified".
Eligibility	Eligibility Determination	40622	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall make updates to Eligibility Results screen to provide explanation for overridden APTC FPL.
Eligibility	Eligibility Determination	40623	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall send a new EERC code (UI) in the eHIT transaction when eligibility is run on cases with overridden APTC FPL.
Eligibility	Eligibility Determination	40624	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall display the overridden APTC household FPL on the budget worksheet when the FPL is overridden due to unemployment income in the benefit year.
Eligibility	Eligibility Determination	40625	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall display a flag on the budget worksheet that indicates that the APTC FPL has been overridden due to unemployment income in the benefit year.
Eligibility	Eligibility Determination	40626	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall suppress the Overridden flag and overridden FPL% on the budget worksheet if the UI lock change is not effective at eligibility determination.
Eligibility	Eligibility Determination	40627	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall display a warning message to alert admins who are attempting to delete a UI income record for an individual.
Eligibility	Eligibility Determination	40637	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall display a banner/message on the Shop and Compare page indicating that UI lock changes are not applied when eligibility is determined using Shop and Compare tool if the coverage year is 2021.
Eligibility	Eligibility Determination	40638	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall not display this banner/text if the coverage year is 2022 and beyond.
Eligibility	Eligibility Determination	40647	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall develop a one-time process to run eligibility on all the existing subsidized applications where either primary tax filer or spouse of the primary tax filer has UI income (greater than \$0) and at least one individual in the Primary Tax Filer's Household is otherwise eligible/conditionally eligible to APTC benefits.
Eligibility	Eligibility Determination	40648	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall exclude the following cases from the one-time process to run eligibility for overriding the exchange FPL% for the evaluated benefit year, 1. At least one member on the case is in Carry Forward status 2. A case is closed as duplicate 3. Cases with Dental Enrollment Only 4. Cases with Health plan in "Terminated" or "Cancelled" status (For all members on the case) 5. Cases with no consent for the current year (Individuals receiving CCP Only due to no consent in 2021) 6. Cases where all CCP eligible individuals are ineligible/discontinued to APTC/CSR/CAPS due to reasons other than income limit (For e.g., self-attested to Medicare) 7. Cases with Application Status as "Terminated" 8. Cases where the income verification for HH Income-Subsidy or HH Income -CA State Subsidy is failed
Eligibility	Eligibility Determination	40649	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall use the new Sub Run Reason Code "UIL" in the Re-determination batch (ELG-1002-DD-01) when running eligibility for overriding the exchange FPL% on the cases as part of this one-time redetermination process for the evaluated benefit year.
Eligibility	Eligibility Determination	40650	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall use the QLE reason "None of the above" in the Re-determination batch (ELG-1002-DD-01) when running eligibility on the cases as part of this one-time redetermination process for overriding the exchange FPL% for the evaluated benefit year.
Eligibility	Eligibility Determination	40651	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall add the following text to the case notes in the Re-determination batch (ELG-1002-DD-01) when running eligibility on the cases as part of this one-time redetermination process for overriding the exchange FPL% for the evaluated benefit year, "Due to the American Rescue Plan, the eligibility for this case has been redetermined to check for additional financial assistance because a household member reported receiving unemployment income for this benefit year. No change to application data has been made. Financial assistance may have been updated effective 07/01/2021. Billing from the carrier may not reflect the change until the August invoice."
Eligibility	Eligibility Determination	40652	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall create and generate a new snippet for Covered CA eligibility section in the NOD01 for members who are eligible for APTC/CCP and Eligible/Conditionally eligible for CSR and UI lock is applied to override their FPL%. "You are eligible for health and dental plans through Covered California. Because your household reported Unemployment Insurance benefits for {Benefit Year}, your household qualifies for up to \${TAX_CREDIT_AMOUNT} per month in federal premium tax credits. You also qualify for cost-sharing reductions (CSR). If you enroll in a Silver plan you can save money when you receive medical care. Cost-sharing reductions lower out-of-pocket costs, such as copays, coinsurance and deductibles."
Eligibility	Eligibility Determination	40653	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall suppress this snippet if snippet 775 or 361 is triggered.
Eligibility	Eligibility Determination	40654	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall create and generate a new snippet for Covered CA eligibility section in the NOD01 for members who are conditionally eligible for APTC/CSR/CCP and UI lock is applied to override their FPL%. "You are conditionally eligible for health and dental plans through Covered California. Because your household reported Unemployment Insurance benefits for {Benefit Year}, your household qualifies for up to \${TAX_CREDIT_AMOUNT} per month in federal premium tax credit. We need more information to continue your eligibility. Look for the "We need proof" section below. You also qualify for cost-sharing reductions (CSR). If you enroll in a Silver plan you can save money when you receive medical care. Cost-sharing reductions lower out-of-pocket costs, such as copays, coinsurance and deductibles."
Eligibility	Eligibility Determination	40655	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall suppress this snippet if snippet 775 or 788 is triggered.

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(Extracted from CalHEERS RTM)

Category	Sub Category	Req ID	Requirement
Eligibility	Eligibility Determination	40656	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall create and generate a new snippet under the introduction section of NOD01 for all cases that have their eligibility redetermined by the 2021 UI Lock batch.
Eligibility	Eligibility Determination	40668	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall discontinue MAGI Medi-Cal eligibility when an adverse action occurs for an individual whose eligibility status is Pending and the month preceding the Pending status was Eligible or Conditionally Eligible.
Eligibility	Eligibility Determination	40679	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall correct Spanish Translations for all the HBX consumer facing text on the screens in the Spanish version of the portal.
Eligibility	Eligibility Determination	40680	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall correct Spanish Translations for 'help screen' and 'question icon' in the Spanish version of the portal to assist consumers with navigation and questions.
Eligibility	Eligibility Determination	40681	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall correct Spanish Translations for all the dropdown values on the screens in the Spanish version of the portal.
Eligibility	Eligibility Determination	40708	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall update the fair share adjustment percentage amount for California Premium Subsidy for the benefit year 2022
Eligibility	Eligibility Determination	40709	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall grant eligibility to CA premium subsidy for individuals who are otherwise eligible or conditionally eligible to APTC and whose income is > 138% and <= 200% FPL, and ineligible for full scope Medi-Cal benefits
Eligibility	Eligibility Determination	40710	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall grant eligibility to CA premium subsidy for individuals whose income is > 138% and <= 200% FPL based on a yearly configuration setting
Eligibility	Eligibility Determination	40711	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall calculate and display preliminary eligibility results for CA premium subsidy for individuals whose income is > 138% and <= 200% FPL in the Shop and Compare tool.
Eligibility	Eligibility Determination	40725	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall not send an update transaction (HX20-U) for the California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) Renewal to MEDS during the month of October if the consumer has been subsequently, after the Renewal, discontinued for the current benefit year and an HX20-U transaction was held due to the unavailability of the MEDS Renewal Calendar for January.
Eligibility	Eligibility Determination	40726	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall display multiple Calls to Action in the Next Steps Module on the Account Home
Eligibility	Eligibility Determination	40727	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall always display the year toggle with two years for Admins.
Eligibility	Eligibility Determination	40728	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall display the year toggle for all other user roles including Admins when current year and future year are available to take action on.
Eligibility	Eligibility Determination	40729	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall display the 1st of the following month coverage start date during the open enrollment period when the system is configured to allow this coverage start date.
Eligibility	Eligibility Determination	40730	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall expand the configurations for open enrollment extension dates found on the Account Home Page.
Eligibility	Eligibility Determination	40731	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall display MAGI Medi-Cal Renewal Mode for Mixed Households which have started CCA Renewal but not completed it and have received a MC Renewal EDR.
Eligibility	Eligibility Determination	40732	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall update the fair share adjustment percentage amount for APTC for the benefit year 2022.
Eligibility	Eligibility Determination	40736	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall not send demographic transaction (HX12) for the California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) Renewals to MEDS during the month of October if the consumer has been subsequently, after the Renewal, discontinued for the current benefit year and an HX12 transaction was held due to the unavailability of the MEDS Renewal Calendar for January.
Eligibility	Eligibility Determination	40825	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall allow a consumer to reapply for coverage through the California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) Portal when their current eligibility status is Ineligible, Discontinued, or Undetermined for financial assistance programs.
Eligibility	Eligibility Determination	40826	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall apply MAGI Medi-Cal/MCAP/CCHIP Programs applicant rules on consumers who are reapplying through the California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) Portal when their current eligibility status is Ineligible, Discontinued, or Undetermined for all financial assistance programs.
Eligibility	Eligibility Determination	40827	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall lift Negative Action or Non-Compliance for a consumer who is reapplying for coverage through the California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) Portal.
Eligibility	Eligibility Determination	40831	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall lift Negative Action or Non-Compliance when a consumer is outside of the MAGI Medi-Cal FPL limit.
Eligibility	Eligibility Determination	40832	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall lift Negative Action when a consumer is outside of the MAGI Medi-Cal FPL limit and the Negative Action is configured to not apply to Exchange Subsidized programs.
Eligibility	Eligibility Determination	40834	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall continue to determine a person as Ineligible or Discontinued for MAGI Medi-Cal when the person has a Negative Action or Non-Compliance that was automatically lifted, and the person remains outside of the MAGI Medi-Cal income limit.
Eligibility	Eligibility Determination	40835	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall apply the verification Reapplication Caching Rules for consumers that do not have active eligibility, and are reapplying for coverage through the California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) portal when Negative Action or Non-Compliance is lifted by California Healthcare Eligibility, Enrollment and Retention System (CalHEERS).
Eligibility	Eligibility Determination	40841	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall ensure that a person who has been discontinued from MAGI Medi-Cal and did not go into Soft Pause due to a Soft Pause lift from SAWS, will remain Discontinued from MAGI Medi-Cal when outside of the MAGI Medi-Cal FPL limit.
Eligibility	Eligibility Determination	40923	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall update the effective dating logic for individuals who transition from restricted to full scope MAGI Medi-Cal eligibility to be the first of the redetermination month.
Eligibility	Eligibility Determination	41129	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall change 60 days postpartum to 365 days postpartum (365 day period after the pregnancy ends and any remaining days in the month in which the 365th day falls)
Eligibility	Eligibility Determination	41130	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall apply the extended postpartum period to all the individuals who are subject to postpartum protection.
Eligibility	Eligibility Determination	41131	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall extend the postpartum protection period for existing individuals with an ongoing unexpired postpartum date when eligibility is determined on or after the policy effective date.

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(Extracted from CalHEERS RTM)

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Category	Sub Category	Req ID	Requirement
Eligibility	Eligibility Determination	41133	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall have a configurable functionality to turn this change ON/OFF based on the policy effective date.
Eligibility	Eligibility Determination	41134	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall add the functionality to set a configurable postpartum period (in number of days) when this change is effective based on the configurable effective date of the policy.
Eligibility	Eligibility Determination	41135	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall send the configured postpartum period (Number of Days) to SAWS on E-Hit transaction when eligibility is determined.
Eligibility	Eligibility Determination	41136	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall send the postpartum end date to SAWS on E-Hit transaction when eligibility is determined.
Eligibility	Eligibility Determination	41137	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall display the postpartum end date on the Budget worksheet when eligibility is determined.
Eligibility	Eligibility Determination	41138	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall run a one-time batch for redetermining eligibility for individuals who are MCAP eligible with an unexpired post partum end date after the change is effective for postpartum extension
Eligibility	Eligibility Determination	41139	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall exclude the following cases from this one-time staging batch, 1. Cases closed as duplicate 2. Cases with application status as Terminated
Eligibility	Eligibility Determination	41140	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall set the following case note for the one-time staging batch - 'Effective April 1, 2022, pursuant to the American Rescue Plan Act (ARPA), an individual eligible for pregnancy and postpartum care services under the Medi-Cal Access Program (MCAP) is entitled to 365 days of postpartum coverage instead of 60 days. Coverage will be effective until the end of the month in which the 365th day falls'
Eligibility	Eligibility Determination	41141	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall set the QLE reason as 'None of the Above (Continue to Review my application for Medi-Cal or MCAP)' for one-time staging batch
Eligibility	Eligibility Determination	41142	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall apply the extended postpartum period to all the individuals irrespective of the MAGI Medi-Cal Aid Code.
Eligibility	Eligibility Determination	41143	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall apply the discontinuance rules for individuals in postpartum period only if specific Negative Action is received.
Eligibility	Eligibility Determination	41144	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall not apply any discontinuance rules for individuals in postpartum period when Non-compliance action is received.
Eligibility	Eligibility Determination	41195	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall update the portal language in the tool tips for Minimum Value and Affordability Standards in consumer view.
Eligibility	Eligibility Determination	41196	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall update the portal language in the hover over icon for Minimum Value and Affordability Standards in flexible application.
Eligibility	Eligibility Determination	41197	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall update the link provided in the consumer view portal for definition of Minimum Value Standard.
Eligibility	Eligibility Determination	41198	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall update the link provided in the consumer view portal for definition of Affordability.
Eligibility	Eligibility Determination	41199	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall update the Spanish translation text for incorrect Authentication Code error messages on Consumer Delegation page
Eligibility	Eligibility Determination	41200	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall update the link provided in the consumer view portal for definition of Employer Coverage.
Eligibility	Eligibility Determination	41201	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall update the Spanish portal language in the tool tips for Employer Coverage in consumer view.
Eligibility	Eligibility Determination	41228	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall rebrand 'Coverage Date Category' as 'Eligibility Effective Date Category' on the Special Enrollment page and the Household Verifications page.
Eligibility	Eligibility Determination	41229	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall add a new Eligibility Effective Date Category of 'Loss of Coverage (MEC)' on the Special Enrollment page and the Household Verifications page.
Eligibility	Eligibility Determination	41230	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall assign an exchange eligibility effective date of the 1st day of the month following either the application date or the QLE date, whichever is later, when the Eligibility Effective Date Category 'Loss of Coverage (MEC)' is selected by the admin user.
Eligibility	Eligibility Determination	41231	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall assign an exchange eligibility effective date of the 1st day of the month following either the Report a Change date or the QLE date, whichever is later, and the Eligibility Effective Date Category 'Loss of Coverage (MEC)' is selected by the admin user.
Eligibility	Eligibility Determination	41233	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall add functionality to no longer send the TermDateOfCurrentOrOfferedCoverage element on the DER/DER-U.
Eligibility	Eligibility Determination	41234	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall add functionality to no longer persist or use the TermDateOfCurrentOrOfferedCoverage element when received from SAWS via the EDR.
Eligibility	Eligibility Determination	41235	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall turn off business validation 153 - 'Current Coverage Ind Mapped to Yes'.
Eligibility	Eligibility Determination	41236	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall apply updated exchange eligibility determination rules when SEP reason 'Lost or will lose Health Coverage' is selected.
Eligibility	Eligibility Determination	41240	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall assign an exchange eligibility effective date of the 1st day of the month following either the application date or the QLE date, whichever is later, when SEP reason 'Lost or will lose health coverage' is selected.
Eligibility	Eligibility Determination	41241	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall assign an exchange eligibility effective date of the 1st day of the month following either the Report a Change date or the QLE date, whichever is later, when SEP reason 'Lost or will lose health coverage' is selected.
Eligibility	Eligibility Determination	41242	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall evaluate the individual for all Exchange programs when other health coverage is ending in the next 60 days.
Eligibility	Eligibility Determination	41243	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall only evaluate the individual for unsubsidized program eligibility when other health coverage is not ending in the next 60 days, and discontinue subsidy if the individual is found previously eligible for subsidy programs.
Eligibility	Eligibility Determination	41244	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall auto-populate the Eligibility Effective Date Category based on the SEP reason selected on the Special Enrollment page.
Eligibility	Eligibility Determination	41245	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall update the label on the QLE Date field on the Special Enrollment page.
Eligibility	Eligibility Determination	41246	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall update the Accordion on the QLE Date field on the Special Enrollment page.

Appendix A-4 - SOW Exhibit A - System Requirements Specification
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Category	Sub Category	Req ID	Requirement
Eligibility	Eligibility Determination	41247	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) BRE shall detect the SEP reason 'APTC – Detected low FPL' during OSEP and SEP, for individuals whose APTC household income is at or below a configured FPL limit and at least one member of the household meets all other eligibility criteria to be deemed Eligible or Conditionally Eligible to APTC/CSR, regardless of whether the household attested to a valid QLE.
Eligibility	Eligibility Determination	41248	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall have a configurable setting for the FPL limit used to determine the Detected SEP Reason 'APTC – Detected low FPL' for exchange eligible individuals.
Eligibility	Eligibility Determination	41249	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall have a configurable setting for the Detected SEP Reason 'APTC – Detected low FPL' to be turned on and off.
Eligibility	Eligibility Determination	41250	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall apply the first of following month rule to determine the eligibility effective date when the new SEP reason 'APTC – Detected low FPL' is detected.
Eligibility	Eligibility Determination	41251	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall grant Exchange eligibility for individuals when the attested SEP reason is 'None of the above', detected SEP reason is 'APTC - Detected Low FPL' and the individual meets all the other eligibility criteria to be Eligible or Conditionally Eligible to APTC/CSR.
Eligibility	Eligibility Determination	41252	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) BRE shall apply the most advantageous Exchange eligibility effective date when the attested SEP reason, detected SEP reason, or Eligibility Effective Date Category is present, with the following exception: - When the attested SEP reason has a valid prospective QLE date and the detected SEP reason is not 'Loss of MEC', the eligibility effective date rule for the attested SEP reason shall apply.
Eligibility	Eligibility Determination	41254	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall send the detected SEP reason of 'APTCDetectedLowFPL' in the Extended Applicant Event Code to GI via Account transfer, if 'APTC – Detected low FPL' is used to determine the eligibility for that BRE run.
Eligibility	Eligibility Determination	41255	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall display the 'Change Plan' button on the Eligibility Results Page once the user has chosen the plan and the 'APTC-Detected Low FPL' is detected until a different SEP is sent to GI via Account Transfer.
Eligibility	Eligibility Determination	41256	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall display the 'Change Plan' button on the Account Home Page once the user has chosen the plan and 'APTC-Detected Low FPL' is detected until a different SEP is sent to GI via Account Transfer.
Eligibility	Eligibility Determination	41257	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall add "Current health care program or Medicare coverage to end in the next 60 days, resulting in loss of coverage?" with the values "Yes/No" on the following pages: Health Care & Citizenship Review Final Review: Individual Info
Eligibility	Eligibility Determination	41258	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall replace the "MM/DD/YYYY Day/Time" values with the values "Y/N" for the question "Is [HJM] expecting their current health care program or Medicare to end in the next 60 days resulting in the loss of coverage?" on the Application PDF.
Eligibility	Eligibility Determination	41286	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall update the technical components for the California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) SAWS Interface (known as EHIT) for communication with the SAWS for functional changes made to the system for the following Release 22.2 functional CRs: - CR 171387 (Case Linkage) - CR 168267 (Implement additional language preferences per MEDS update) - CR 164426 (Implement “Verify Current Income” Service for FDSH e-verification of Income) - CR 171373 (BREfS Initiative #10: California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) Application Life Cycle) - CR 172212 (California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) Verification Caching Update Phase II) - CR 182474 (Provide 12 months postpartum coverage to all aid codes with pregnancy services (M7, M8, M9, M0 & 0E))
Eligibility	Eligibility Determination	41288	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall enable the 'Choose Plan' button on the Eligibility Results Page for initial enrollment when 'APTC-Detected Low FPL' is detected, until a different SEP reason is sent to GI via Account Transfer.
Eligibility	Eligibility Determination	41289	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall enable the 'Choose Plan' button on the Account Home Page for initial enrollment when 'APTC-Detected Low FPL' is detected, until a different SEP reason is sent to GI via Account Transfer.
Eligibility	Eligibility Determination	41295	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall update the "Newly qualifies for app-based driver stipend" SEP reason to have its separate code and send to GI and SAWS.
Eligibility	Eligibility Determination	41296	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall send and receive the SEP reason code for "Newly qualifies for app-based driver stipend" to SAWS via eHIT transaction.
Eligibility	Eligibility Determination	41298	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall update the list of federally recognized tribes.
Eligibility	Eligibility Determination	41345	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall add the states of Virginia and Indiana to the dropdown of State for the AI/AN tribes.
Eligibility	Eligibility Determination	41346	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall add the recognized tribes to the database.
Eligibility	Eligibility Determination	41347	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall not display tribes which are no longer recognized by the Federal Tribe recognition website.
Eligibility	Eligibility Determination	41348	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall update tribes to match the tribes on the Federal website.
Eligibility	Eligibility Determination	41349	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall send and receive the newly added tribes via the eHIT transaction.
Eligibility	Eligibility Determination	41350	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall deprecate State Recognized tribes from eHIT.
Eligibility	Eligibility Determination	41351	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall update individuals in the following tribes to "Tribe Not Listed": 1. AK - Unrelated 2. WI - Reservation of Wisconsin
Eligibility	Eligibility Determination	41352	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall add a case note: "The tribal affiliation that was previously selected by a household member is not federally recognized. The tribal affiliation has been updated to Tribe Not Listed" for individuals who have had their tribe updated to "Tribe Not Listed" as their Tribe selected is no longer federally recognized.
Eligibility	Eligibility Determination	41353	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall move individuals from “Table Bluff Reservation-Wiyot Tribe” to “Wiyot Tribe (formerly the Table Bluff Reservation-Wiyot Tribe)”.

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Category	Sub Category	Req ID	Requirement
Eligibility	Eligibility Determination	41354	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall implement a user-friendly approach for consumers to select the federally recognized tribe for the state that is selected.
Eligibility	Eligibility Determination	41355	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall update the flexi app to display the AI/AN Tribes in alphabetical order.
Eligibility	Eligibility Determination	41356	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall deprecate code 255 in eHIT code categories tribe list.
Eligibility	Eligibility Determination	41357	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall add effective dating logic for the display of AI/AN Tribes.
Eligibility	Eligibility Determination	41358	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall display BV163 if a tribe that has been end dated is submitted in EDR.
Eligibility	Eligibility Determination	41359	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall update Spanish translations of the updated tribe names.
Eligibility	Eligibility Determination	41493	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall disregard incarceration verification when determining eligibility for the MAGI Medi-Cal program.
Eligibility	Eligibility Determination	41494	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall have the ability to configure the disregarding of the incarceration verification and the disregarding of the admin fail for incarceration.
Eligibility	Eligibility Determination	41497	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall disregard admin fail for incarceration verification for MAGI Medi-Cal determination.
Eligibility	Eligibility Determination	41498	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall update the eligibility results screen to: 1. Update Elig Factor 022, to display for CCP/MAGI Medi-Cal when SSA returns an individual is incarcerated or when an Admin Fails the Incarceration Verification. 2. Update upload documents next steps section when SSA returns an individual is incarcerated and has an outstanding incarceration verification that the individual may provide documents and therefore is not required to provide documents.
Eligibility	Eligibility Determination	41499	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall send EERC 'NS' in DER when individuals are discontinued due to the new Negative Action for Incarceration.
Eligibility	Eligibility Determination	41513	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall deprecate all Portal snippet language referencing premiums for MCAP, CCHIP and OTLICP (Optional Targeted Low Income Children Program - MAGI Medi-Cal aid codes T1 through T0).
Eligibility	Eligibility Determination	41514	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall make the deprecation of portal snippet language configurable.
Eligibility	Eligibility Determination	41517	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall remove the discontinuance reason "Non-Payment of Premium" from the Discontinue County Children's Health Initiative Program (CCHIP) screen.
Eligibility	Eligibility Determination	41518	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall make the removal of the discontinuance reason "Non-Payment of Premium" from the Discontinue County Children's Health Initiative Program (CCHIP) screen configurable.
Eligibility	Eligibility Determination	41519	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall update EligStatus_020 to change the number of days required to submit documentation from 23 to 17 days.
Eligibility	Eligibility Determination	41591	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall round the Maximum Premium Percentage to the nearest hundredth percent while calculating APTC and/or State Subsidy amounts.
Eligibility	Eligibility Determination	41592	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall truncate the decimal values for the household FPL % that is used to calculate MPP (Maximum Premium Percentage).
Eligibility	Eligibility Determination	41593	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall include the truncated FPL % in the budget worksheet under the APTC section.
Eligibility	Eligibility Determination	42118	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall display the link and PDF for the "Medi-Cal Confirmation Letter" to all consumers who are Conditionally Eligible for MAGI Medi-Cal programs.
Eligibility	Eligibility Determination	42176	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) will detect 'Loss of MEC' QLE when an MCAP individual is discontinued at the end of the postpartum period.
Eligibility	Eligibility Determination	42177	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall determine the next program eligibility when the MCAP individual has been discontinued due to the postpartum period ending.
Eligibility	Eligibility Determination	42178	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall create a monthly MCAP discontinuance staging batch for active cases that have an MCAP individual with a postpartum end date in the benefit month when batch is run.
Eligibility	Eligibility Determination	42179	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall set the following case note for the Monthly MCAP discontinuance batch - 'MCAP discontinued by batch due to end of postpartum period'
Eligibility	Eligibility Determination	42180	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall set the QLE reason as 'None of the Above (Continue to Review my application for Medi-Cal or MCAP)' for the staging batch for MCAP.
Eligibility	Eligibility Determination	42181	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall exclude the following cases from this monthly staging batch, 1. Cases closed as duplicate 2. Cases with application status as Terminated
Eligibility	Eligibility Determination	42182	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall not apply the discontinuance rules for individuals post postpartum period for prior Negative action & Non-Compliance reasons.
Eligibility	Eligibility Determination	42183	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall not apply the discontinuance rules for individuals post postpartum who received a Negative action that was not applied during the postpartum period.
Eligibility	Eligibility Determination	42184	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall not apply the discontinuance rules for individuals post postpartum who received a Non-Compliance reason that was not applied during the postpartum period
Eligibility	Eligibility Determination	42185	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall run a one-time DBCR to end date Negative Action and Non-Compliance records across existing MAGI Medi-Cal cases where an individual is under active pregnancy or active post partum and the individual was not Discontinued
Eligibility	Eligibility Determination	42186	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall create a one-time staging batch for active cases that have MCAP Discontinuance built for a future month with respect to the batch run date and system determined postpartum end date is in future
Eligibility	Eligibility Determination	42187	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall set the following case note for the staging MCAP batch - 'One time batch to fix defect 58925-CCP eligibility for December 2022 is an error - MCAP eligibility is protected for 365 days after the end of pregnancy. No loss of MEC.'

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Category	Sub Category	Req ID	Requirement
Eligibility	Eligibility Determination	42188	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall set the QLE reason as 'None of the Above (Continue to Review my application for Medi-Cal or MCAP)' for the one-time MCAP Determination staging batch.
Eligibility	Eligibility Determination	42189	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall exclude the following cases from this one-time staging batch, 1. Cases closed as duplicate 2. Cases with application status as Terminated
Eligibility	Eligibility Determination	42257	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall update the fair share adjustment percentage amount for APTC for the benefit year 2023.
Eligibility	Eligibility Determination	43110	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall remove the “or click Renew” text and link in the Renewal Video section.
Eligibility	Eligibility Determination	43111	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall relabel the Renew button as the “Continue” button under the “RENEW YOUR COVERED CALIFORNIA COVERAGE” and "MEDI-CAL RENEWAL" sections that brings you to the “Renewal Summary” page.
Eligibility	Eligibility Determination	43112	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall relabel the “RENEW HEALTH PLAN” button to “CHOOSE HEALTH PLAN” on the Renewal Enrollment Introduction page.
Eligibility	Eligibility Determination	43113	The following sentence will be removed from the Renewal Enrollment Introduction page: “If your plan is not available for next year, you must take action to prevent a break in coverage. If you do not pick a plan by 12/15/2014, you will not have coverage for 1/1/2015.”
Eligibility	Eligibility Determination	43114	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall replace the following sentence, “For Covered California, if you do not select a plan by DATE, Covered California will automatically enroll you in your current plan for the 2015 benefit year.” with the following: “For Covered California, in most cases if you do not select a plan by <Cutoff Date>, Covered California will automatically enroll you in your current plan for the <Benefit Year> benefit year.”
Eligibility	Eligibility Determination	43115	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall disable the “Apply” and "Preview Plan" header navigation tabs on the menu bar when a user in Renewal mode is logged in.
Eligibility	Eligibility Determination	43116	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall update the Report A Change Summary page by changing “To make changes, click Edit or click next to the number you want to change” to read “To make changes, Click Edit”.
Eligibility	Eligibility Determination	43117	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall remove the question “Is this person a member of a Federally-recognized Indian Tribe?” from the Personal Data - Optional Data Page.
Eligibility	Eligibility Determination	43118	When a user's response is "Yes" on the Personal Data - Demographic Page to the question "Is this person a member of a Federally-recognized Indian Tribe?", the California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) system shall display the question "What state is the tribe recognized in?".
Eligibility	Eligibility Determination	43119	When a user's response is "Yes" on the Personal Data - Demographic Page to the question "Is this person a member of a Federally-recognized Indian Tribe?", the California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) system shall display the question "What is the name of the tribe?".
Eligibility	Eligibility Determination	43120	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall send the first ten Race options listed by the Consumer in GI and 834-outbound transactions.
Eligibility	Eligibility Determination	43121	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) system shall provide messaging on the Eligibility Results page and the plan selection page when the eligibility start date is in the current year but the reported change cannot take effect during the current enrollment year.
Eligibility	Eligibility Determination	43122	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall support the ability to opt in and opt out of Exchange Renewals.
Eligibility	Eligibility Determination	43123	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall enable an admin user only to opt in or opt out of an Exchange Renewal.
Eligibility	Eligibility Determination	43124	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall allow an admin user to opt in or opt out of an Exchange Renewal until the renewal has been completed.
Eligibility	Eligibility Determination	43125	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall have the ability to remove a consumer from the automated batch renewal process for exchange renewals.
Eligibility	Eligibility Determination	43126	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall provide the consumer the ability to terminate enrollment in the same manner as an Admin User.
Eligibility	Eligibility Determination	43127	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall be limited to at most two enrollment years at a time as defined by the REF_CALENDAR Specification.
Eligibility	Eligibility Determination	43128	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall enable/disable multi-year functionality through "Year" dropdown features. This includes on the Terminate Participation, Reinstate, Change Plan Effective Dates, and Preview Plan pages.
Eligibility	Eligibility Determination	43129	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall have validation rules for Terminate Participation, Reinstatement and Change Plan Effective Date, and Update Year of Consent pages so that data integrity is maintained.
Eligibility	Eligibility Determination	43130	"The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall use the following validation logic on the Terminate Participation page: - Termination Date must be between 1/1 and 12/31 of the benefit year in question. - Termination Date must be after the coverage start date."
Eligibility	Eligibility Determination	43131	"The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall use the following validation logic on the Reinstatement and Change Plan Effective Date page: - Start date must be on or after 1/1 of the benefit year in question. - End date must be between 1/1 and 12/31 of the benefit year in question, and must be after the coverage start date."
Eligibility	Eligibility Determination	43132	"The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall use the following validation logic on the Update Year of Consent page: - No dates before 10/01/2013 - No future dates from date user enters value."
Eligibility	Eligibility Determination	43133	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall enable Report a Change right hand navigation link for the renewal year following the renewal application submission.
Eligibility	Eligibility Determination	43134	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall always show an actionable button on the Individual Landing page regardless of whether the case is currently under magi medical renewal.

Category	Sub Category	Req ID	Requirement
Eligibility	Eligibility Determination	43135	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall display conditional linfomation for MAGI and Exchange Renewals and a single "Continue" button when either program is in renewal mode.
Eligibility	Eligibility Determination	43136	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall navigate the user to the appropriate page when they click the Continue button when either program is in Renewal Mode.
Eligibility	Eligibility Determination	43137	The California Healthcare Eligiblity, Enrollment and Retention System (CalHEERS) System shall modify the page display for the Renewals landing page to inlcude a single box containing conditionally displayed text informing the consumer of their next actions to complete renewal.
Eligibility	Eligibility Determination	43157	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall bypass the plan selection process for an Exchange Program when the user reports only a change in residence address, regardless of life event when the rating region based on zip code and/or county code has not been changed.
Eligibility	Eligibility Determination	43158	The California Healthcare Eligiblity, Enrollment and Retention System (CalHEERS) System shall bypass the plan selection process for a case when the user reports only a change in mailing address regardless of life event.
Eligibility	Eligibility Determination	43159	The California Healthcare Eligiblity, Enrollment and Retention System (CalHEERS) System shall accept out of State Mailing Addresses.
Eligibility	Eligibility Determination	43160	The California Healthcare Eligiblity, Enrollment and Retention System (CalHEERS) System shall allow out of state addresses on the following pages: Primary Contact, Address and Contact, and Flexible Application
Eligibility	Eligibility Determination	43161	"The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall grant whichever CSR level is available to all members of an APTC Household whenever an eligibility determination is completed including during Batch runs. Per Covered California regulations §6474(d)(4), the hierarchy of CSR categories are: 1. AI/AN <300% FPL (CS2) 2. Silver 94 (CS6) 3. Silver 87 (CS5) 4. Silver 73 (CS4) 5. AI/AN >300% FPL (CS3) 6. Ineligible for CSR (CS1) "
Eligibility	Eligibility Determination	43162	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall automatically determine when to apply Special Enrollment rules even during an Open Enrollment period.
Eligibility	Eligibility Determination	43163	"The California Healthcare Eligiblity, Enrollment and Retention System (CalHEERS) System shall have the functionality for Admin users to select a Qualifying Life Event that is associated with the Special Enrollment Period during the Open Enrollment Period."
Eligibility	Eligibility Determination	43164	"The California Healthcare Eligiblity, Enrollment and Retention System (CalHEERS) System shall have the functionality for Non-Admin users to select a Qualifying Life Event that is associated with the Special Enrollment Period during the Open Enrollment Period. "
Eligibility	Eligibility Determination	43165	The California Healthcare Eligiblity, Enrollment and Retention System (CalHEERS) System shall have the functionality to determine eligibility for consumers with Qualifying Life Events associated with the Special Enrollment Period during the Open Enrollment Period.
Eligibility	Eligibility Determination	43166	The California Healthcare Eligiblity, Enrollment and Retention System (CalHEERS) System shall have the functionality to allow Non-Admin Users to Report A Change for the current benefit year during the Open Enrollment Period until 12/31.
Eligibility	Eligibility Determination	43216	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall provide the ability for an Admin to Redetermine Eligibility without a special enrollment reason.
Eligibility	Eligibility Determination	43217	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) system shall trigger eligibility determination process whenever an applicant's name is changed and there is a resultant change in the SSA/VLP verification results.
Eligibility	Eligibility Determination	43218	The California Healthcare Eligiblity, Enrollment and Retention System (CalHEERS) System shall display the View Confirmation Pop-Up for Admin Users on click of RAC 2014 link on the Individual Landing Page.

Category	Sub Category	Req ID	Requirement
Eligibility		43219	"The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall validate Email with the following rules. Email: - Minimum of 1 character (if required) and maximum of 50 characters - Name - If there is a period, first characters prior to first period character (any combination of) - Underscores - Lower case letters - Upper case letters - Digits 0 through 9 - Hyphens - Rest of name (any combination of) - Periods - Underscores - Lower case letters - Upper case letters - Digits 0 through 9 - Hyphens - @ symbol - Domain name (any combination of) - If there is a period, prior to first period - Lower case letters - Upper case letters - Digits 0 through 9 - Hyphens - After first period (any combination of) - Periods - Lower case letters - Upper case letters - Digits 0 through 9 - Hyphens - Extension (last period precedes extension) - 2 to 4 lower case letters or upper case letters for example ('com', 'net', 'org', etc.)"
Eligibility	Eligibility Determination	43220	"The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall validate Address Line 1, Address Line 2 with the following rules. Address Line 1 and Address Line 2 (any combination of): • Minimum of 1 character (if required) and maximum of 50 characters • Digits 0 to 9 • Lower case letters • Upper case letters • Periods • Apostrophes • Hyphens • Commas • Spaces • Forward Slash • Backward Slash • Number Sign (#) "
Eligibility	Eligibility Determination	43225	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall display the qualifying life events of "Had a baby or adopted a child" and "None of the above (Continue to review my application for Medi-Cal or MCAP)" when the Consumer is in Open Special Enrollment and may qualify for an earlier start date.
Eligibility	Eligibility Determination	43307	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) system shall Discontinue Pending Medi-Cal individuals that were previously Conditionally Eligible or Eligible on Medi-Cal for the same application when a Negative Action is applied.
Eligibility	Eligibility Determination	43308	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall issue a Denial for individuals reapplying for aid regardless when the person was previously Conditionally Eligible or Eligible on Medi-Cal when a Negative Action is applied.
Eligibility	Eligibility Determination	43309	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall observe a 10-day notice period (10 calendar days from the last day of the current month) prior to discontinuing benefits for an individual who has gone from Conditionally Eligible or Eligible to Pending for MAGI Medi-Cal and a Negative Action is applied.

Appendix A-4 - SOW Exhibit A - System Requirements Specification
(Extracted from CalHEERS RTM)

Category	Sub Category	Req ID	Requirement
Eligibility	Eligibility Determination	43310	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall not observe a 10-day notice period (10 calendar days from the last day of the current month) prior to discontinuing benefits for an individual who has gone from Conditionally Eligible/Eligible to Pending for MAGI Medi-Cal and a Negative Action is applied if one of the following individual level negative action run reason codes is provided for at least one member in the household: o 85 - Deceased o K4 - Requested Disc. - Written o CN - On Aid Another Case o 07 - Whereabouts Unknown
Eligibility	Eligibility Determination	44488	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall apply the existing IAP Application rules for Intake/Add a Person during the Open Enrollment and Renewal period when determining eligibility for MAGI Medi-Cal, MCAP or CCHIP.
Eligibility	Eligibility Determination	44489	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall display "Apply Now" mode for MAGI Medi-Cal only cases when MAGI-Medi-Cal eligibility for all members is Inactive.
Eligibility	Eligibility Determination	44490	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall display Report a Change (RAC) for MAGI Medi-Cal only cases when MAGI-Medi-Cal eligibility for one or more members is Active
Eligibility	Eligibility Determination	45786	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall place a MAGI Medi-Cal beneficiary in Awaiting Review status when a beneficiary's eligibility is set to discontinue during SAWS Batch Renewal and the beneficiary does not meet Soft-Pause criteria
Eligibility	Eligibility Determination	45827	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall display "Report A Change" button for the future year after the in-progress Renewal Report A Change (RRC) is withdrawn by the BAT 41 Closure batch
Eligibility	Eligibility Determination	45828	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall display "Apply Now" button for the future year after the in-progress/unsubmitted Renewal application is withdrawn by the BAT 41 Closure batch
Eligibility	Eligibility Determination	45829	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall not withdraw submitted Renewal or submitted Renewal Report a Change (RRC) applications when Admin opt out of renewal has been performed on the case for future benefit year
Eligibility	Eligibility Determination	45830	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall withdraw in-progress/unsubmitted Renewal applications when Admin opt out has been performed on the case for future benefit year
Eligibility	Eligibility Determination	45831	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall not withdraw In-progress Renewal Report A Change (RRC) applications when Admin opt out has been performed on the case for future benefit year
Eligibility	Eligibility Determination	45847	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall not trigger Soft-Pause for MAGI Medi-Cal beneficiaries moving from a MAGI Medi-Cal non-premium aid code to a MAGI Medi-Cal premium aid code, when there is a change initiated during an eligibility run if an individual meets the Soft-Pause criteria and the configuration is turned ON.
Eligibility	Eligibility Determination	45848	When moving from non-premium MAGI Medi-Cal aid code to premium MAGI Medi-Cal aid code, the Soft Pause functionality will be configured such that it can be turned on or off.
Eligibility	Eligibility Determination	45849	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall not apply the Soft-Pause for MAGI Medi-Cal beneficiaries moving from a MAGI Medi-Cal non-premium aid code to a MAGI Medi-Cal premium aid code when the configuration is turned ON
Eligibility	Eligibility Determination	45850	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall apply the Soft-Pause for MAGI Medi-Cal beneficiaries moving from a MAGI Medi-Cal non-premium aid code to a MAGI Medi-Cal premium aid code when the configuration is turned OFF
Eligibility	Eligibility Determination	45851	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall make text updates to ROP snippets in the NOD01 ab/c.
Eligibility	Eligibility Determination	45852	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall make text and triggering updates to ROP snippets in the NOD01ab/c
Eligibility	Eligibility Determination	45853	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall update the text for snippet 301 in the NOD01
Eligibility	Eligibility Determination	45854	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall update the triggering conditions for snippet 301 under NOD01 Snippet Table
Eligibility	Eligibility Determination	45855	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall create a new snippet for the NOD01ab/c for consumers who are conditionally eligible for CCA/CCHIP or pending MCAP
Eligibility	Eligibility Determination	45856	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall update the text of the triggering conditions for snippets 890 and 891 to reflect current functionality
Eligibility	Eligibility Determination	45857	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall create a new snippet containing Health Insurance Counseling & Advocacy Program (HICAP) information in case a consumer would like to utilize those resources.
Eligibility	Eligibility Determination	45858	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall make triggering updates to snippets in the NOD01ab/c.
Eligibility	Eligibility Determination	45859	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall not trigger the NOD70A/b for households with the following criteria: • Was enrolled in a QHP or QDP at the time of staging but both QHP and QDP are in terminated or cancelled status at the time of notice generation
Eligibility	Eligibility Determination	45860	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall update the SB260 fliers in all threshold languages to remove the Bright HealthCare logo on the bottom of the first page.
Eligibility	Eligibility Determination	45940	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall not set the ROP date if an individual is in the PVC process for one of the data elements – Medicare or Deceased and a RAC is performed in a subsequent run which meets ROP criteria for the same data element with the following exception: When cache is cleared for the verification attribute that is in the PVC process
Eligibility	Eligibility Determination	45943	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall update the triggering conditions for the Eligibility factors Elig Factor_021, EligFactor_058 and EligFactor_91 to display on the Eligibility Individual Result
Eligibility	Eligibility Determination	45944	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall update the eligibility results screen to update the Language for Elig Factor_021, EligFactor_058 and EligFactor_91.
Eligibility	Eligibility Determination	45945	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall deprecate EligFactor_124.
Eligibility	Eligibility Determination	45946	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall add a new Eligibility Snippet to display when a household member is Discontinued from Exchange Financial Assistance Programs as a result of the PDM Discontinuance Batch run due to an expired Medicare due date.

Category	Sub Category	Req ID	Requirement
Eligibility	Eligibility Determination	45950	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall interpret the correct verification status for Non-ESI and ESI when the individual has been verified to have Non-ESI or ESI.
Eligibility	Eligibility Determination	45951	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall not mark an SSN verification as e-verified when the SSN is removed prior to Intake submission.
Eligibility	Eligibility Determination	45952	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall only use the current SSN data attested regardless of the verification status for SSA calls
Eligibility	Eligibility Determination	45953	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall call all electronic verification services, except VLP and MEDS, only when an SSN is e-verified
Eligibility	Eligibility Determination	45954	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall create a mock service for the State Residency verification attribute to indicate the verification source that is used to determine electronic verifications.
Eligibility	Eligibility Determination	45955	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall display an individual's first name and last name on the VLP Summary screen when the DocumentInfo tag received under EDR didn't have the required details.
Eligibility	Eligibility Determination	45956	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall re-verify the SSN when date of birth has changed.
Eligibility	Eligibility Determination	45957	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall update an Admin's ability to update Verification Statuses on the Personal Verification page of the California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) Portal or via the SAWS access channel.
Eligibility	Eligibility Determination	45958	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall update mock services for testing of 5 Year Bar functionality by removing invalid mock services from Step 1, Step 2, and Step 3.
Eligibility	Eligibility Determination	45959	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall update the BRF01.03 to indicate that the eligibility impact from 5 Year Bar is contained in BRF01.16.
Eligibility	Eligibility Determination	45960	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall update the PRUCOL verification status to display only 'Not Verified', 'Admin Pass' or 'Admin Fail'.
Eligibility	Eligibility Determination	45961	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall have the ability to recall a VLP Step after the 24 hour retry has ended for Step 2 or Step 3, and the case is in an error status or the VLP case can be closed to recall Step 1.
Eligibility	Eligibility Determination	45962	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall not display "Not Lawfully Present" on VLP Admin pages when the call has a response code other than HS000000.
Eligibility	Eligibility Determination	45963	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall create mock services for a scenario where self-attested application has \$0 income and is determined as Reasonable Compatible via all sources.
Eligibility	Eligibility Determination	45964	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall update WPS08.18c to specify the display logic for the Outstanding Verification page.
Eligibility	Eligibility Determination	45965	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall update BRF01.16 to state that Incarceration and Deceased should not be getting a ROP date if SSN has not been provided
Eligibility	Eligibility Determination	46008	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall update the attribute name of 5 Year Bar met/exempt on the Personal Verification page.
Eligibility	Eligibility Determination	46025	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall use the saved response (Agree/Disagree) for the PVC flagged individual(s) at subsequent eligibility determination run during the PVC process and remove the PVC flag and PVC expiration date regardless of, - If call to SSA/Non-ESI is made due to a "Pending" or "Not Verified" verification status for Medicare and/or Deceased - If SSA is called due to update to data elements other then deceased (E.g., income), Deceased verification is returned regardless, as it is a tag along element? If there is an Admin verification (Pass/Fail) received from SAWS/California Healthcare Eligibility, Enrollment and Retention System (CalHEERS)
Eligibility	Eligibility Determination	46060	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall utilize existing/cached e-verifications or admin verifications for Income, Medicare, and Deceased from up to 90 days prior to the eligibility determination request date if available for SAWS MAGI Medi-Cal Renewals verification.
Eligibility	Eligibility Determination	46061	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall utilize the existing/cached e-verification or admin verification within the past 365 days for Incarceration when available for SAWS MAGI Medi-Cal Renewals verification.
Eligibility	Eligibility Determination	46088	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall not allow an Admin user to directly update the verification status of attributes with an existing "E-Verified" status unless the verification cache is cleared.
Eligibility	Eligibility Determination	46089	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall not consume Admin Pass or Admin Fail received from SAWS for an existing "E-Verified" status unless the verification cache is cleared.
Eligibility	Eligibility Determination	46090	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall only allow an Admin user to update verifications from "Pending", "Not Verified", "Pass", or "Fail" statuses to only "Pass" or "Fail".
Eligibility	Eligibility Determination	46315	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall grant full scope Medi-Cal eligibility for all Modified Adjusted Gross Income (MAGI) eligible individuals who are 26 through 49 years of age, inclusive, regardless of their citizenship or immigration status if they meet all other eligibility criteria.
Eligibility	Eligibility Determination	46316	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall apply the corresponding full scope aid codes for otherwise eligible individuals who are 26 through 49 years of age, inclusive, regardless of their citizenship or immigration status.
Eligibility	Eligibility Determination	46317	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall implement configurable functionality to grant full scope Medi-Cal eligibility to otherwise eligible individuals who are 26 through 49 years of age, inclusive, regardless of their citizenship or immigration status (without impacting other release functionality) based on the policy effective date, 1/1/2024.
Eligibility	Eligibility Determination	46318	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall provide all necessary system testing and batch processing support for SAWS as needed.
Eligibility	Eligibility Determination	46334	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall allow users to navigate further when a file is not uploaded successfully on the Eligibility Results Upload Document screen.
Eligibility	Eligibility Determination	46335	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall update the error message as There was a file upload error. You will need to upload this document again. when a file upload is unsuccessful on the Eligibility Results Upload Document screen.
Eligibility	Eligibility Determination	46336	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall only allow specific users to access the Link ECM Document under Add Document section.
Eligibility	Eligibility Determination	46346	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall update eligibility re-determination rules that will allow a MCAP individual with a postpartum ending in the month of December to be re-determined for the current and upcoming benefit year.

Appendix A-4 - SOW Exhibit A - System Requirements Specification
(Extracted from CalHEERS RTM)

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Category	Sub Category	Req ID	Requirement
Eligibility	Eligibility Determination	46470	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall always reference the income tax data from most recent tax year available from FTB income verification source across all eligibility run reasons
Eligibility	Eligibility Determination	46471	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall create a new mock service rule to specify the tax year of income data which is received from FTB income verification source.
Eligibility	Eligibility Determination	46586	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall update the triggering conditions for the EligFactor_91 to display on the Eligibility Individual Result: 1. Display if person household member is Discontinued or denied because an admin set the Medicare verification to“Fail”. 2. Display when the individual household member does not qualify for APTC/CSR/CAPS due to Medicare coverage because they are enrolled in a plan and the hub returns that the person has Medicare coverage. Please note having a plan includes "enrolled", "pending" and "future terminations of a plan".
Eligibility	Eligibility Determination	46626	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall update the configuration for the "valid cache period" for SAWS Batch Renewals to be -1 for Income, Incarceration, Medicare, and Deceased so verification calls are always made for these verification types during SAWS Batch Renewals.
Eligibility	Eligibility Determination	46627	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall update the configuration for the "valid cache period" for SAWS Manual Renewals to be 999999 for Income, Incarceration, Medicare, and Deceased so verification calls are not made for these verification types unless there is a change in an impacted data element during SAWS Manual Renewals.
Eligibility	Eligibility Determination	46651	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall grant Accelerated Enrollment for all Modified Adjusted Gross Income (MAGI) Medi-Cal eligible adults regardless of category (Adult, Parent/Caretaker, pregnancy, Etc.) and who are Pending/Not Verified for any verifications except Pending MEC MEDS or Not Verified MEC MEDS without a CIN from California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) access channel for following intake scenarios : - Initial Intake/Same day remediation, - Add a person scenario (Report a Change/Renewals), - RAC/Renewal scenario where existing household member becomes a new Applicant.
Eligibility	Eligibility Determination	46652	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall grant Accelerated Enrollment for all Modified Adjusted Gross Income (MAGI) Medi-Cal eligible Children who are under 19 years of age and who are Pending or Not Verified for any verifications except Pending MEC MEDS or Not Verified MEC MEDS without CIN from California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) access channel for following intake scenarios: - Initial Intake/Same day remediation, - Add a person scenario (Report a Change/Renewals), - RAC/Renewal scenario where existing household member becomes a new Applicant.
Eligibility	Eligibility Determination	46653	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall implement three configuration settings that will be set for all Negative Action Reasons, at the reason code level, which in addition to the active/ pending enrollment status for the individual, will determine if the negative action will impact eligibility to CCP/APTC/CAPS/CSR.
Eligibility	Eligibility Determination	46654	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall implement a configuration setting that will be set for all Negative Action Reasons, in addition to the active/ pending enrollment status for the individual, will decide if the negative action will impact eligibility to CCP for consumers who are within MAGI Medi-Cal Income limits. If the setting is "ON", the person will be eligible for CCP regardless of the enrollment status. If the setting is "OFF" and the individual is not actively enrolled, the person will be ineligible for CCP.
Eligibility	Eligibility Determination	46655	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall implement a configuration setting that will be set for all Negative Action Reasons, which in addition to the active/ pending enrollment status for the individual, will decide if the negative action will impact eligibility to CCP for consumers who are outside MAGI Medi-Cal Income limits.
Eligibility	Eligibility Determination	46656	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall implement a configuration setting that will be set for all Negative Action Reasons, which in addition to the active/ pending enrollment status for the individual, will decide if the negative action will impact eligibility to APTC/CAPS/CSR programs for consumers who are outside MAGI Medi-Cal Income limits.
Eligibility	Eligibility Determination	46657	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall evaluate the individual for Exchange program eligibility, if the individual is actively enrolled (Active/Pending) and a negative action is received for the individual, regardless of the configuration settings for the negative action.
Eligibility	Eligibility Determination	46658	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall deny (Ineligible)/discontinue Exchange eligibility for an individual who does not have an active/pending enrollment, when SAWS sends a Negative Action of "On aid on another case" and SAWS admin verification for MEDS MEC is set as 'Fail', regardless of the Negative Action configurations.
Eligibility	Eligibility Determination	46659	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall utilize the results from the MEDS MEC check and consider an individual's MAGI Medi-Cal MEC AID Code received from MEDS to indicate the individual is receiving MEC and ineligible for exchange programs if the individual is not transitioning/discontinuing from MAGI Medi-Cal eligibility on the same case.
Eligibility	Eligibility Determination	46660	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall evaluate the individual for conditional eligibility to exchange program(APTC/CSR/CAPS) if the MEDS MEC check response is for a MAGI Medi-Cal MEC Aid Code for a future period.
Eligibility	Eligibility Determination	46666	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall implement a functionality to determine Strike Lockout (SLS) Benefit Eligibility for consumers who have attested to Loss of MEC and attested to the fact that the loss is due to labor disputes caused by a Strike Lockout.
Eligibility	Eligibility Determination	46667	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall create and display a new question asking the user "Did you lose health coverage due to a Strike or Lockout" in an intake application during the OE period to all users.
Eligibility	Eligibility Determination	46668	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall only display the new Strike Lockout question "Did you lose health coverage due to a Strike or Lockout" in intake applications during SEP if the user selects the QLE "Lost or will lose health Coveage"
Eligibility	Eligibility Determination	46669	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall display the new Strike Lockout question "Did you lose health coverage due to a Strike or Lockout"during the RAC flow if the consumer does not have a previously attested Strike Lockout instance and selects the QLE "Lost or will lose health coverage"
Eligibility	Eligibility Determination	46670	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall create a new screen that will maintain the strikes/lockouts that are active and will maintain the duration of the Strike Lockout.
Eligibility	Eligibility Determination	46671	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall allow specific admin users with access to add or edit Strike Lockout instances
Eligibility	Eligibility Determination	46672	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall display all active Strike Lockout records in the active tab of the new Strike Lockout admin screen.
Eligibility	Eligibility Determination	46673	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall display all inactive Strike Lockout records in the inactive tab of the new Strike Lockout admin screen where they will be view only and cannot be edited

Appendix A-4 - SOW Exhibit A - System Requirements Specification
(Extracted from CalHEERS RTM)

Category	Sub Category	Req ID	Requirement
Eligibility	Eligibility Determination	46674	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall have the functionality to display the active strikes/lockout on the Portal for the consumer/user to select while attesting to being impacted by labor disputes.
Eligibility	Eligibility Determination	46675	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall display default values "Not Listed" and "Labor Dispute" as an option if consumers cannot find an impacted active Strike Lockout instance
Eligibility	Eligibility Determination	46676	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall display a next text box for user entry to add a Strike Lockout detail when consumer selects an active strike record as "Not Listed" or "Labor Dispute"
Eligibility	Eligibility Determination	46677	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall cease to display a strike record under the Portal SLS option after it is inactivated or end dated under the admin screen
Eligibility	Eligibility Determination	46678	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall add the ability for users to select and indicate which household members are impacted by the Strike Lockout reason while attesting for an active Strike Lockout
Eligibility	Eligibility Determination	46679	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall require that consumers apply for an Insurance Affordability Program (IAP) with a subsidized application in order to be eligible for Strike Lockout benefit.
Eligibility	Eligibility Determination	46680	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall add the responses to the Strike Lockout questions in the review before application submission page
Eligibility	Eligibility Determination	46681	CalHEERS shall add the responses to the Strike Lockout questions in the application pdf that is generated from the view application link from the Eligibility Results page
Eligibility	Eligibility Determination	46682	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall add the folowing messaging in the application flow, when a consumer attests to being impacted by a strike: The Strike Lockout Benefit will not show in your eligibility. Do not pick a plan once you submit your information. Please call our service center at (800) 793-6385 so we can enroll you in a plan that saves you the most on your premium (monthly cost).
Eligibility	Eligibility Determination	46842	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall disregard MAGI Medi-Cal Discontinuance records from the look-back logic for MAGI Medi-Cal eligibility determinations that occurred within the Continuous Coverage [Start Date] and [End Date].
Eligibility	Eligibility Determination	46844	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall have the ability to configure [Start Date], [End Date] and the [Discontinuance Start Date].
Eligibility	Eligibility Determination	46846	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall generate the following case note at the case level when the enhanced look back logic is triggered on the case: 'CR 247111 Enhanced Lookback logic was triggered on this case. MAGI Medi-Cal eligibility determination may have disregarded a previous discontinuance if it occurred during the Medicaid Continuous Coverage period due to the Public Health Emergency.'
Eligibility	Eligibility Determination	46888	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall add a configuration for Policy Effective Date to determine DACA as lawful presence and eligibility for APTC/CSR/CCP/CAPS programs
Eligibility	Eligibility Determination	46889	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall update mock services to include DACA as Lawfully Present.
Eligibility	Eligibility Determination	46890	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall send DE2009 as '3' if any of the following conditions meet: - - consumer attests to Immigration status of 'DACA' - if COA Code returned from VLP is DAT or ER
Eligibility	Eligibility Determination	47041	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall apply the income verification waiver to Current Monthly Income (CMI) and Projected Annual Income (PAI) for individuals that are renewed on MAGI Medi-Cal renewals (RE) if their attested household income is at or below 100% FPL and their CMI and/or PAI verification is either pending or not verified until the income verification waiver expires.
Eligibility	Eligibility Determination	47042	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall add a new eligibility determination factor of "IWC" (person meets income verification waiver - CMI) for any individual with an attested CMI at or below 100% FPL whose income verification was waived during MAGI Medi-Cal renewals (RE).
Eligibility	Eligibility Determination	47043	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall have an ability to configure the Income Verification Waiver Expiration Date.
Eligibility	Eligibility Determination	47044	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall set a person's MAGI Medi-Cal CMI and PAI verification statuses to be Admin Pass with a verification source of "Admin Verified" when applicable when their income verification is waived.
Eligibility	Eligibility Determination	47045	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall add a case note to a California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) case when the income verification waiver is applied to any individual on the case.
Eligibility	Eligibility Determination	47046	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall add a new eligibility determination factor of "IWP" (person meets income verification waiver - PAI) for any individual with an attested PAI at or below 100% FPL whose income verification was waived during MAGI Medi-Cal renewals (RE).
Eligibility	Eligibility Determination	47084	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall update the URL for Acceptable Documentation List hyperlink on Identity Proofing Options modal in both Consumer View and Flexible App View. English: https://www.coveredca.com/documents-to-confirm-eligibility/ Spanish: https://www.coveredca.com/espanol/documents-to-confirm-eligibility/
Eligibility	Eligibility Determination	47085	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall update the URL for "Click here to start this process" hyperlink on "Why we're asking this" tooltip on Primary Contact Address page in Consumer View. URL: https://www.coveredca.com/pdfs/privacy/Request_to_Amend_by_Rep.pdf
Eligibility	Eligibility Determination	47112	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall grant Accelerated Enrollment for all Modified Adjusted Gross Income (MAGI) Medi-Cal eligible adults regardless of category (Adult, Parent/Caretaker, pregnancy, Etc.) during the application month and who are Pending/Not Verified for any verifications except Pending MEC MEDS or Not Verified MEC MEDS without a CIN from SAWS or California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) access channel when the initial MAGI Medi-Cal eligibility was determined as Pending due to outstanding verification (Not Verified MEC MEDS without a CIN) and during any subsequent runs, CIN was established for that individual

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(Extracted from CalHEERS RTM)

Category	Sub Category	Req ID	Requirement
Eligibility	Eligibility Determination	47113	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall grant Accelerated Enrollment for all Modified Adjusted Gross Income (MAGI) Medi-Cal eligible Children who are under 19 years of age during the application month and who are Pending/Not Verified for any verifications except Pending MEC MEDS or Not Verified MEC MEDS without a CIN from SAWS or California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) access channel when the initial MAGI Medi-Cal eligibility was determined as Pending due to outstanding verification (Not Verified MEC MEDS without a CIN) and during any subsequent runs, CIN was established for that individual.
Eligibility	Eligibility Determination	47281	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall determine eligibility for the Family PACT program based on client attested data.
Eligibility	Eligibility Determination	47282	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall determine potential eligibility for a Family PACT client based on questions in a pre-application screener to determine potential eligibility before the client continues to the intake application.
Eligibility	Eligibility Determination	47283	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall determine a Family PACT client eligible if the client's self-attestation meets the following program eligibility requirements: • California resident; • Total taxable family income at or below 200 percent of the federal poverty guidelines; • No other source of health coverage (OHC) for family planning services, or meet the criteria specified for eligibility with OHC • At least 12 years of age
Eligibility	Eligibility Determination	47284	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall determine the client's total family taxable income and household size based on the information provided which could include the following people: • Client • Client's spouse, if the client is married or has a common law marriage established in a state where common law marriages are legally recognized; it does not recognize common-law marriages occurring in California • Any minor children (age 17 and below) claimed as a tax dependent • If the client is claimed as a tax dependent by spouse or parents, the client's basic family unit includes the client, spouse if living together, the tax filer and the tax filer's other tax dependents.
Eligibility	Eligibility Determination	47285	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall evaluate the consumer to be having Other Health Coverage if the consumer answers yes to one of the following questions: • I currently receive Medi-Cal benefits. • I have restricted Medi-Cal (such as "Emergency Medi-Cal") that cover contraceptive methods. • I have Other Health Coverage that covers contraceptive methods. Other Health Coverage may include Medi-Cal Managed Care plans, Commercial Health Plans (Kaiser, BlueCross, Health Net) or student health insurance.
Eligibility	Eligibility Determination	47286	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall determine the Family PACT client eligible if the client has Other Health Coverage (OHC), but meets the following criteria specified for eligibility with OHC: • If the other health coverage requires an annual deductible that you are unable to meet on the date of service. • If you have a Medi-Cal unmet share of cost on the date of service. • If you have limited-scope (restricted) Medi-Cal that does not cover family planning (including contraceptive methods). • You are not able to access contraceptive methods because you are worried your parents, partner or spouse could find out your use it for family planning (this is called a barrier to access). • I do not know if I have other health coverage.
Eligibility	Eligibility Determination	47287	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall determine the client ineligible for report a change (RAC) and recertify Family PACT applications for at least one of the following reasons: • Not a California resident • Total taxable family income above 200 percent of the federal poverty guidelines • Receives health insurance coverage for family planning services without barrier to access • Full scope Medi-Cal (does not have an unmet SOC) without barrier to access • Pregnant • Below the minimum age of 12
Eligibility	Eligibility Determination	47288	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall discontinue Family PACT coverage for the at least one of following reasons: • No longer a California resident • Total taxable family income is above 200 percent of the federal poverty guidelines • Sterilized, no longer contracepting • Receives other health insurance coverage for family planning services • Full scope Medi-Cal (does not have an unmet SOC) without barrier to access • Requesting discontinuance • Failure to complete annual recertification • Provider permanent deactivation of HAP ID (lost/stolen) • No longer has a medical necessity (i.e., ability to get pregnant or cause a pregnancy) for family planning services • Becomes pregnant
Eligibility	Eligibility Determination	47289	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall use a periodic batch process to deactivate the HAP ID's for Family PACT clients that do not complete their annual recertification.

Category	Sub Category	Req ID	Requirement
Eligibility	Eligibility Determination	47291	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall allow a Family PACT provider to request discontinuance on behalf of a Family PACT client for at least one of the following reasons: • No longer a California resident • Client is over 200 percent of the poverty level guidelines • Client no longer has a medical necessity (sterilization) • Client has health insurance coverage for family planning services • Client has full-scope Medi-Cal without Share of Cost • Permanent deactivation
Eligibility	Eligibility Determination	47292	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall allow a Family PACT super admin to request discontinuance on behalf of a Family PACT client for at least one of the following reasons: • No longer a California resident • Client is over 200 percent of the poverty level guidelines • Client no longer has a medical necessity (sterilization) • Client has health insurance coverage for family planning services • Client has full-scope Medi-Cal without Share of Cost • Permanent deactivation
Eligibility	Eligibility Determination	47293	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall assign aid code 8H to client who are eligible for the Family PACT program.
Eligibility	Eligibility Determination	47294	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall have the functionality to determine Family PACT eligibility if no SSN is provided by/for the client.
Eligibility	Eligibility Determination	47295	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall determine the client ineligible for initial and reapply Family PACT applications for at least one of the following reasons: • Not a California resident • Total taxable family income above 200 percent of the federal poverty guidelines • Receives health insurance coverage for family planning services without barrier to access • Full scope Medi-Cal (does not have an unmet SOC) without barrier to access • Pregnant • Below the minimum age of 12
Eligibility	Eligibility Determination	47296	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall determine the Family PACT eligibility effective date to be the system run date of application submission.
Eligibility	Eligibility Determination	47297	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall determine the Family PACT eligibility end date to be plus 1 year, minus 1 day of the system run date of intake/reapplication submission.
Eligibility	Eligibility Determination	47298	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall set the Family PACT eligibility end date to be plus 1 year, minus 1 day from the system run date of recertification submission.
Eligibility	Eligibility Determination	47299	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall retain the same eligibility end date as that of application submission when a report a change (RAC) is submitted that does not impact the Family PACT consumer's eligibility status.
Eligibility	Eligibility Determination	47300	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall discontinue the Family PACT eligibility effective the system run date when the change is reported as part of report a change (RAC) or recertify such that one of the ineligible reasons is met.
Eligibility	Eligibility Determination	47301	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall generate the Health Access Program (HAP) ID when the client is found to be eligible for the Family PACT program using the following format: - 10 digit alphanumeric - 1st digit: always '9' - 2nd-8th digit: unique number generated sequentially (beginning with '0000001') - 9th digit: always 'Z' - 10th digit: Sum the odd digits values of HAP ID number and sum the even digits values of HAP ID number. Then sum these results from odd and sum calculation. Then move this result's singular position digit value to HAP ID number's tenth digit, also known as HAP-CHECK-DIGIT
Eligibility	Eligibility Determination	47430	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall have an automated process at the end of the Deceased Verification Expiration date if the responses have not been provided for any household members: - Remove the Periodic Verification flag - Update the verification status to "Pending" to match the PVC response - Use the Deceased response to discontinue eligibility to all exchange programs (CCP/APTC/CAPS/CSR) - Terminate the enrollment from the day after the date of death or the first day of the current benefit year, whichever is later
Eligibility	Eligibility Determination	47431	For consumers who respond "Agree" to the Deceased data and for which an eligibility run has occurred, California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall take the following actions: - Remove the Periodic Verification flag - Update the default value of deceased self-attestation on the Verification page to "Yes". This value should not flip back to "No", once set as "Yes" due to Agreed response unless clear verification action is performed on the Verification page. - Update the Deceased Verification Status to "E-Verified" - Discontinue consumer from all exchange programs (CCP/APTC/CSR/CAPS) - Terminate the enrollment from the day after the date of death or the first day of the current benefit year, whichever is later

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(Extracted from CalHEERS RTM)

Category	Sub Category	Req ID	Requirement
Eligibility	Eligibility Determination	47435	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall stop generating the case note that was implemented in CR 199836 - PDM Phase 2
Eligibility	Eligibility Determination	47447	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall not display EligFactor_025 and EligFactor_015 snippets when individual has Former Foster Youth eligibility.
Eligibility	Eligibility Determination	47448	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall perform a MEC MEDS check for a non-applying child when that child is a dependent child of an applying parent/caretaker relative per CFR 435.119(c).
Eligibility	Eligibility Determination	47449	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall evaluate eligibility for MAGI Medi-Cal New Adult Group for a spouse of a parent/caretaker relative in the home of dependent children for the CFR 435.119(c).
Eligibility	Eligibility Determination	47569	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall discontinue MCAP eligibility for an individual during a SAWS disposition run if one of the following aid code is received in SAWS disposition – 03,04,06,07,10,16,20,26,30,31,32,33,35,36,3A, 3C, 3D, 3E, 3F, 3G, 3H, 3L, 3M, 3P, 3R, 3S, 3U, 3W,40,42,43,45,46,49,4A,4F,4G,4H,4K, 4N,4P,4R, 4S,4T,4W,4M,5K,60,66,6A,6C,80,8C,8D,8A
Eligibility	Eligibility Determination	47570	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall discontinue MCAP eligibility for an individual during SAWS disposition run with MAGI Medi-Cal aid code if the MCAP eligibility was established on same day
Eligibility	Eligibility Determination	47571	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall retain MCAP eligibility and not evaluate MAGI Medi-Cal program eligibility if an individual reports a decrease in income which meets the MAGI Medi-Cal program limit during MCAP postpartum period
Eligibility	Eligibility Determination	47576	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall stage the individuals provided by SAWS that are MAGI Medi-Cal Discontinued or Denied in SAWS and shall set the prior MAGI Medi-Cal status to Discontinued status in the Enhanced Look Back Logic.
Eligibility	Eligibility Determination	47577	BR 1.1 - California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall run the eligibility redetermination batch for Active California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) cases that have individuals included in the SAWS case list and those individuals meet any of the following conditions in California Healthcare Eligibility, Enrollment and Retention System (CalHEERS): a) At least 1 member is in MAGI Medi-Cal DS (Awaiting Review) status or b) At least 1 member is MAGI Medi-Cal Soft Pause
Eligibility	Eligibility Determination	47578	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall generate a report of eligibility results post each eligibility redetermination batch runs
Eligibility	Eligibility Determination	47579	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall utilize the staged Discontinuance in the enhanced lookback for MAGI Medi-Cal once via BRE run.
Eligibility	Eligibility Determination	47580	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall not utilize the staged Discontinuance in the enhanced lookback for MAGI Medi-Cal if any of the following occurs: i) Case has been run with the run reason code of Intake ii) SAWS sends a high dated disposition for individual with MAGI Medi-Cal Eligible
Eligibility	Eligibility Determination	47581	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall not utilize the staged Discontinuance in the enhanced lookback for MAGI Medi-Cal and will remain staged for the next BRE run if any of the following occurs: i) Case is run with the run reason code of Retro ii) Case is run via a closed dated disposition for individual with MAGI Medi-Cal Eligible
Eligibility	Eligibility Determination	47760	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) system shall create a new Intelligent Document Processing system for systematically verifying outstanding verification documents using Google Document AI.
Eligibility	Eligibility Determination	47761	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) and IDP system shall utilize the REST API to transmit the data using JSON format.
Eligibility	Eligibility Determination	47762	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) and IDP system shall utilize the REST API to transmit the data using JSON format for IDP verification service.
Eligibility	Eligibility Determination	47763	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) and IDP system shall utilize the REST API to transmit the data using JSON format for IDP Quality Check service.
Eligibility	Eligibility Determination	47764	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) and IDP system shall utilize the REST API to transmit the data using JSON format for IDP Case Match OCR service.
Eligibility	Eligibility Determination	47765	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) and IDP system shall utilize the REST API to transmit the data using JSON format for IDP verification result service.
Eligibility	Eligibility Determination	47766	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) system shall integrate with the Intelligent Document Processing (IDP) system to systematically verify documents submitted for the outstanding verifications.
Eligibility	Eligibility Determination	47767	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) system shall integrate with the Intelligent Document Processing (IDP) system to verify only documents with a category of 'Manual Verifications' that are from the 'Print / Mail' vendor.
Eligibility	Eligibility Determination	47768	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) system shall integrate with the Intelligent Document Processing (IDP) system to systematically verify documents if uploaded from the portal from Upload Eligibility Documents page or Documents and Correspondence Page.
Eligibility	Eligibility Determination	47769	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) system shall integrate with the Intelligent Document Processing (IDP) system to verify multiple outstanding verification documents for multiple individuals for a household when submitted in a single request.
Eligibility	Eligibility Determination	47770	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) system shall define a separate case match rule for each document type based on extracted data from IDP.
Eligibility	Eligibility Determination	47771	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) system shall associate case number and verification information to the document when California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) case match service has a success outcome.
Eligibility	Eligibility Determination	47772	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) system shall limit the IDP systematic verification process to APTC/CSR/CCP/CAPS conditionally eligible individuals on Mixed Household Case
Eligibility	Eligibility Determination	47773	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) system shall NOT trigger BRE and automatically re-determine the eligibility for 'APTC/CSR/CCP/CAPS' conditionally eligible individuals on a Mixed Household case.
Eligibility	Eligibility Determination	47774	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) system shall limit the IDP systematic verification process to conditionally eligible individuals on 'APTC/CSR/CCP/CAPS Only' cases.

Category	Sub Category	Req ID	Requirement
Eligibility	Eligibility Determination	47775	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) system shall automatically redetermine eligibility for conditionally eligible 'APTC/CSR/CCP/CAPS Only' cases when a 'Pass' response is received from the IDP.
Eligibility	Eligibility Determination	47776	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) system shall follow existing Verification Caching rules when the Business Rules Engine (BRE) is triggered due to a 'Pass' response from IDP.
Eligibility	Eligibility Determination	47777	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall not use the IDP Pass for eligibility re-determination for the documents that need to be verified via VLP.
Eligibility	Eligibility Determination	47778	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) system shall provide case and individual information for the IDP to verify the supplied documentation.
Eligibility	Eligibility Determination	47779	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) system shall define the schema request and response elements for IDP Quality Check, IDP Verification, IDP Case Match OCR, CalHERS Case Match Service and IDP Verification Result Service.
Eligibility	Eligibility Determination	47780	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) system shall define the errors tied to schema request and response transactions for IDP Quality Check, IDP Verification, IDP Case Match OCR, CalHERS Case Match Service and IDP Verification Result Service.
Eligibility	Eligibility Determination	47781	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) system shall receive a 'Pass' or 'Cannot Verify' response to a request for verification from the IDP.
Eligibility	Eligibility Determination	47782	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) system shall store a response of 'Cannot Verify' and reason in the database when received from IDP for the outstanding verifications.
Eligibility	Eligibility Determination	47783	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) system shall display the response of 'Cannot Verify' and reason on the Personal Verification page when received from IDP for the outstanding verifications.
Eligibility	Eligibility Determination	47784	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) system shall generate a Salesforce BPM task if the IDP returns a 'Cannot Verify' response.
Eligibility	Eligibility Determination	47785	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) system shall store the 'Pass' received from the IDP in the database for the outstanding verifications.
Eligibility	Eligibility Determination	47786	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) system shall display the response of 'Pass' and reason on the Personal Verification page when received from IDP for the outstanding verifications.
Eligibility	Eligibility Determination	47787	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) system shall generate Salesforce BPM Task when IDP response of Pass is received, but BRE is not triggered to automatically re-determine the eligibility for 'APTC/CSR/CCP/CAPS' individuals.
Eligibility	Eligibility Determination	47788	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall suppress Salesforce BPM Task when IDP response of Pass is received and BRE run happens to automatically re-determine the eligibility.
Eligibility	Eligibility Determination	47789	The IDP system shall define a verification rule for each document type.
Eligibility	Eligibility Determination	47790	The IDP system shall define the extracted fields for each document type to apply data match and verification rule.
Eligibility	Eligibility Determination	47791	IDP System shall define the separate data match criteria for comparison between California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) attested and IDP extracted First Name and Last Name fields
Eligibility	Eligibility Determination	47792	The IDP System shall calculate the cumulative annual household income and apply the acceptable income percentage differentiation criteria for each of the applicable income document group to determine the 'Pass' or 'Cannot Verify' response from IDP for the CCP/APTC/CSR/CAPS conditionally eligible members received in the same IDP transaction with outstanding income verification.
Eligibility	Eligibility Determination	47793	The IDP system shall define the income document groups for the purpose of verifying the income of the CCP/APTC/CSR/CAPS conditionally eligible members received in the same IDP transaction.
Eligibility	Eligibility Determination	47794	The IDP system shall make the income percentage differentiation as a configurable field.
Eligibility	Eligibility Determination	47795	The IDP System shall pass the income verification if any of the income document group meets the acceptable income percentage differentiation criteria.
Eligibility	Eligibility Determination	47796	The IDP System shall provide the response of 'Cannot Verify' for the income verification if none of the income document group meets the acceptable income percentage differentiation criteria
Eligibility	Eligibility Determination	47797	The IDP system shall perform a check for unique Employer names on the income documents within the same income document group to determine the annual Income.
Eligibility	Eligibility Determination	47798	The IDP System shall provide the outcome of 'Pass' for person level verifications for an individual if any one of the required documents has passed the verification rule.
Eligibility	Eligibility Determination	47799	The IDP System shall perform the case and person level verifications to determine the outcome of 'Pass' or Cannot Verify'.
Eligibility	Eligibility Determination	47825	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall grant a child under the age of 19 MAGI Medi-Cal Conditional Eligibility, when they would otherwise be accelerated enrollment for the following run reasons: - Initial Intake/Same day remediation, - Add a person(child under 19) scenario (Report a Change/Renewals), - RAC/Renewal scenario where existing household member (child under 19)becomes a new Applicant.
Eligibility	Eligibility Determination	47826	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall determine a child under the age of 19 Conditionally Eligible for MAGI Medi-Cal when there are outstanding verifications.
Eligibility	Eligibility Determination	47827	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall grant appropriate MAGI Medi-Cal aid code to children under the age of 19 based on their attested FPL within the MAGI Medi-Cal FPL limits.
Eligibility	Eligibility Determination	47828	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall protect a child under the age of 19 for 12 months or until their 19th birthday which ever comes first.
Eligibility	Eligibility Determination	47829	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall not apply soft pause to children under 19 who are currently within the 12-months protection period for Eligibility Status Protection.

Category	Sub Category	Req ID	Requirement
Eligibility	Eligibility Determination	47830	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall discontinue children under 19 that are protected under Eligibility Status Protection when one of the following negative actions occur: Deceased (85) California Residency (IY) Requested Disc. (K4) On Aid Another Case (CN) Deemed Child - Fam ReApp (KI)
Eligibility			California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall discontinue the Eligibility Status Protection for children under 19 when one of the following occurs: •Case is closed as duplicate either from California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) or SAWS access channels •Child is deceased •CancelDER is received from SAWS •The child is not a California Resident •The person is determined Eligible for Non-MAGI Medi-Cal (MEC) with a high dated end date via SAWS disposition. •The person's Eligibility Result is confirmed as Discontinued by SAWS for Medi-Cal with a high-dated end date via a Disposition containing the eligibility status of Discontinued or Ineligible •Outstanding verifications are Admin verified resulting in MAGI Medi-Cal Eligible status.
Eligibility	Eligibility Determination	47832	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall add a case note to a California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) case when the Eligibility Status Protection for children under 19 is granted.
Eligibility	Eligibility Determination	47833	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall have the ability to configure the Eligibility Status Protection for children under 19 with a policy effective date.
Eligibility	Eligibility Determination	47834	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall persist and send a new EERC 'EP' for Eligibility Protection to SAWS when the Eligibility Status Protection for children under 19 is applied.
Eligibility	Eligibility Determination	47835	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall send the 12 month Eligibility Status Protection period end date via MAGIMediCalRenewalDate element on the DER/DER-U to SAWS.
Eligibility	Eligibility Determination	47851	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall update Sacramento County Contact Number from 1-916-874-3100 to 1-800-560-0976 displayed on California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) Portal.
Eligibility	Eligibility Determination	47857	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall update the FPL values for 2024 based on the FPL guidelines received for 2024 from DHCS.
Eligibility	Eligibility Determination	48144	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall allow a user to enter a future QLE date up to 60 days for the following QLEs: - Permanently moved to/within California - Released from jail or prison
Eligibility			California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall apply the eligibility effective dating rules of "Loss of Coverage (MEC)" for the QLE "Permanently moved to/within California" and "Released from jail or prison".
Eligibility	Eligibility Determination	48146	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall display the attested QLE description on the review household information page and the application pdf based on the activated and end-dated QLE selected during the application submission (intake/RAC).
Eligibility	Eligibility Determination	48147	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall display the most advantageous QLE name, attested QLE name, QLE event date, and most advantageous SEP end date on the budget worksheet screen based on the QLE applied during the application submission (intake/RAC).
Eligibility	Eligibility Determination	48148	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall add "REG" to the dropdown list of coverage code category on QLE Configuration Edit page
Eligibility	Eligibility Determination	48149	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall use the first day of the next month rule for discontinuance to exchange financial assistance programs, if the individual retains CCP eligibility and the eligibility to exchange financial assistance programs is discontinued except for ROP run reason.
Eligibility	Eligibility Determination	48150	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall use 15-day rule for discontinuance to all exchange programs, if an individual's eligibility to all exchange programs (including CCP) is discontinued except for case closed as duplicate.
Eligibility	Eligibility Determination	48151	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall update verbiage for number of days to select a plan under important dates section on Account Home page.
Eligibility	Eligibility Determination	48153	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall display a plain language interpretation of Admin Pass/Fail for all verification attributes on the Personal Verification page.
Eligibility	Eligibility Determination	48155	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall continue to display the E-Verification Response and the E-Verification Response Date for the most recent HUB response on the Personal Verification page when a subsequent admin verification is received until the cache is cleared for that data element by an admin or a new electronic call is made.
Eligibility	Eligibility Determination	48157	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall continue to display error codes if applicable on the Personal Verification page when an admin verification is present.
Eligibility	Eligibility Determination	48159	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall update the citizenship and lawful presence attributes on the Personal Verification page based on the consumer's current attestation
Eligibility	Eligibility Determination	48160	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall close an existing DHS case and re-trigger a new DHS case when an user updates the attestation from citizenship to lawful present or vice versa only when a response was received for a current step
Eligibility	Eligibility Determination	48161	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall accept the user update of the Citizenship attestation to Yes, without triggering a new DHS case, when an individual previously attested to being an immigrant that was e-Verified as a Naturalized US Citizen and close any open DHS case.
Eligibility	Eligibility Determination	48162	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall retain the user attestation for Lawful Presence verification attribute, AND duplicate the Citizenship e-verification response fields for Lawful Presence on the Personal Verification screen, if the individual attests to being lawfully present and the hub e-verified the individual as a US Citizen.

Appendix A-4 - SOW Exhibit A - System Requirements Specification
(Extracted from CalHEERS RTM)

Category	Sub Category	Req ID	Requirement
Eligibility	Eligibility Determination	48163	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall mark MAGI Medi-Cal Current Monthly Income and Projected Annual Income verification attributes' status as Not Verified for an individual 19 years or older when SSN is not present or not E-verified
Eligibility	Eligibility Determination	48164	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall mark all the members of the APTC household as e-verified for the verification attributes of "Household Income - Subsidy" and "Household Income - CA Subsidy", if the household income is evaluated to be reasonably compatible following the reasonable compatibility rules for the subsidy programs, regardless of whether one or more members in the household has no SSN or has an SSN that is not e-verified.
Eligibility	Eligibility Determination	48182	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall restrict the display of the default error message ER1000 when there is no hub call made to any electronic source
Eligibility	Eligibility Determination	48183	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall restrict the display of the default error message ER1000 for any of the income verification attributes when at least one of the income data elements (CMI/Household Income Subsidy) is electronically verified (E-Verified/Pending) from any source
Eligibility	Eligibility Determination	48184	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall call the following verification services for Not Applying members in an application: a. SSA (SSN & Deceased) b. Income Services
Eligibility	Eligibility Determination	48185	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall also call the following services for not applying members that are below the age of 19. a. MEC-MEDS b. MEC-Employer Sponsored c. MEC-Non-Employer Spnsored d. Medicare
Eligibility	Eligibility Determination	48186	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall apply the attestation of 'No' to the ESI and Non-ESI attributes on the Personal Verification page, when the individual attests "Yes" to the question 'Does <HHM> expect their current health care program or Medicare coverage to end in the next 60 days, resulting in loss of coverage?'
Eligibility	Eligibility Determination	48194	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall make a call to VLP Service if necessary data elements are present and update the Attestation for Lawful Presence on Manual Verification Page when the Lawful Presence/5YB/QNC category is updated
Eligibility	Eligibility Determination	48263	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall provide the user in both consumer app and Flexi-app mode, an option to state that they do not know if the employer sponsored insurance provided by the employer of any of the household members meet the affordability standards.
Eligibility	Eligibility Determination	48264	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall invoke the CiCi Chatbot ESI affordability calculator when the user attests to not knowing if the employer sponsored insurance provided by the employer of any of the household members meet the affordability standards.
Eligibility	Eligibility Determination	48265	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall have the functionality to accept the affordability calculation result from the CiCi Chatbot ESI affordability calculator, and update the Portal page to answer the question for the ESI plan meeting affordability standards.
Eligibility	Eligibility Determination	48266	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall mark an individual with Pending MCAP eligibility as MCAP Ineligible if, during a SAWS disposition run, one of the following aid codes is received in a SAWS disposition – 03,04,06,07,10,16,20,26,30,31,32,33,35,36,3A, 3C, 3D, 3E, 3F, 3G, 3H, 3L, 3M, 3P, 3R, 3S, 3U, 3W,40,42,43,45,46,49,4A,4F,4G,4H,4K, 4N,4P,4R, 4S,4T,4W,4M,5K,60,66,6A,6C,80,8C,8D,8A
Eligibility	Eligibility Determination	48268	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall enhance the current ROP Batch Configuration in both Production and Simulation to add the following verification attributes: - MEC - SSN - AI/AN
Eligibility	Eligibility Determination	48269	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) ROP batch shall have the ability to take action on APTC/CCP/CSR/CAPS on conditionally eligible and enrolled individuals with expired ROP dates for any of the following verification attributes if the configuration is turned ON: - MEC - SSN - AI/AN
Eligibility	Eligibility Determination	48270	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) ROP Batch shall discontinue consumers from APTC/CAPS/CSR, if the consumer is still found inconsistent for the verification attributes of MEC/SSN.
Eligibility	Eligibility Determination	48271	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) ROP Batch shall discontinue consumers from AI/AN specific CSR, if the consumer is still found inconsistent for the verification attribute of AI/AN.
Eligibility	Eligibility Determination	48272	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall take the appropriate enrollment action by moving the affected member(s) to a separate enrollment group(s) when there is a change in eligibility for an established enrollment group during RAC, ROP, or PDM run reasons.
Eligibility	Eligibility Determination	48273	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall update ROP Batch configuration individuals per day - Maximum from 10,000 to 20,000
Eligibility	Eligibility Determination	48274	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall display corresponding EligFactors on the Eligibility Result Screen, when ROP batch acts on an individual due to the follow outstanding verifications: Income, SSN, AI/AN, MEC
Eligibility	Eligibility Determination	48275	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall have the ability to specify a configurable ROP time period (in number of days) for each verification attribute that impacts Covered CA program eligibility.
Eligibility	Eligibility Determination	48276	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall use the configurable ROP number of days that has been set for each verification attribute, to calculate the Reasonable Opportunity Period date for the verifications during eligibility determination of Covered CA programs across all run reasons.
Eligibility	Eligibility Determination	48277	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall implement a configuration setting for all verification attributes that impact Covered CA programs to decide if the verification result received from the verification hub/services for that attribute will be used in eligibility determination for Covered CA programs across all run reasons except PDM batch.
Eligibility	Eligibility Determination	48278	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall have the functionality to determine eligibility following the existing verification rules for an attribute if the configuration setting is "ON".

Appendix A-4 - SOW Exhibit A - System Requirements Specification
(Extracted from CalHEERS RTM)

Category	Sub Category	Req ID	Requirement
Eligibility	Eligibility Determination	48279	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall have the functionality to not result in Conditional Eligibility for Covered CA programs for the verification attributes that are turned "OFF".
Eligibility	Eligibility Determination	48280	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall ignore the attribute configuration OFF when an attribute is in Admin Fail status or PDM/PVC Batch.
Eligibility	Eligibility Determination	48281	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall create a new page that allows authorized users to configure the ROP Number of Days and an additional setting to bypass verification result from the verification hub/services impacting Covered CA eligibility during eligibility determination for Covered CA programs.
Eligibility	Eligibility Determination	48282	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall display all the verification attributes that impact Covered CA eligibility on this page.
Eligibility	Eligibility Determination	48283	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall use the origination code of "CHA" on DER-U when eligibility is determined through ROP batch
Eligibility	Eligibility Determination	48284	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall use QLE reason of 'None of the Above' for ROP batch process new ROP attributes (AI/AN, MEC, SSN) when determining eligibility for ROP Run Reason.
Eligibility	Eligibility Determination	48285	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall exclude inactive cases from ROP processing
Eligibility	Eligibility Determination	48286	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall initiate a manual trigger of ROP process based on an extract from Covered CA for exchange applicable attributes which will trigger a redetermination of eligibility, the ROP date assigned to that attribute/category, and downstream noticing
Eligibility	Eligibility Determination	48287	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall use the manual trigger for ROP verification status in the eligibility determination that will result in a Conditional Eligible status for the attribute as applicable to the appropriate program(s) that has the manual trigger of ROP as the verification status.
Eligibility	Eligibility Determination	48288	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall create an ROP period for an attribute that has a manual trigger of ROP verification status and Conditional Eligibility as applicable to the appropriate program(s) based on the specified attribute.
Eligibility	Eligibility Determination	48289	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall trigger Eligibility Results page corresponding snippets when an ROP date has been created by a manual trigger of ROP status.
Eligibility	Eligibility Determination	48290	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) ROP Batch process shall pick up expired Manual Trigger of ROP status for attributes/category with a Manual Trigger of ROP status when ROP batch configuration for that attribute/category is turned ON.
Eligibility	Eligibility Determination	48291	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall not call electronic services for any manual trigger of ROP Expired attribute/category status when ROP batch is run.
Eligibility	Eligibility Determination	48292	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall allow Admin users to clear or extend the Manual Trigger of ROP date and status.
Eligibility	Eligibility Determination	48293	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall create a new screen to apply the Manual Trigger of ROP process to an extract provided by Covered CA.
Eligibility	Eligibility Determination	48294	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall display a history showing when Manual Trigger of ROP was: Set for which attribute/category (Conditional Eligibility), Admin cleared, and applied to Eligibility (due to ROP batch run) for the appropriate programs.
Eligibility	Eligibility Determination	48295	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall verify the documents using DIVS and use the DIVS verification response to remove Manual Trigger of ROP and corresponding ROP date when DIVS Pass is reported for the Manual Trigger of ROP attribute
Eligibility	Eligibility Determination	48296	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall perform validation checks on each verification attribute configured ON prior to running ROP batch job BAT31C to confirm that the verification attribute for the staged records have expired ROP date and the case is not in Inactive status.
Eligibility	Eligibility Determination	48297	CalHEERS shall display ROP dates for MEC attributes on the Personal Verification screen when the verification is outstanding.
Eligibility	Eligibility Determination	48318	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall stage the individuals provided by SAWS that do not have an aid code and are MAGI Medi-Cal Discontinued or Denied/Ineligible in SAWS, and shall set the prior MAGI Medi-Cal status to Discontinued status in the Enhanced Look Back Logic.
Eligibility	Eligibility Determination	48319	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall utilize the last known MAGI Medi-Cal aid code in California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) to stage these individuals.
Eligibility	Eligibility Determination	48320	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall provide an extract of individuals who do not have a MAGI Medi-Cal aid code in California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) and were included in the SAWS Discontinued or Denied/Ineligible list.
Eligibility	Eligibility Determination	48321	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall suppress the DER-U from being sent when the BRE is utilizing the staged Discontinuance in the enhanced lookback for MAGI Medi-Cal and all members on the case are Discontinued/Ineligible/Undetermined in California Healthcare Eligibility, Enrollment and Retention System (CalHEERS).
Eligibility	Eligibility Determination	48322	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall release the COR for cases that have an individual who is included in the SAWS Discontinuance list for MAGI Medi-Cal and all members on the case are either included in the Discontinuance list or are Discontinued/Ineligible/Undetermined for MAGI Medi-Cal in California Healthcare Eligibility, Enrollment and Retention System (CalHEERS).
Eligibility	Eligibility Determination	48323	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall add a case note when running the eligibility redetermination batch for Active California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) cases that have individuals included in the SAWS case list.
Eligibility	Eligibility Determination	48324	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall run the eligibility redetermination batch for Active California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) cases that have individuals included in the SAWS case list and those individuals meet any of the following conditions in California Healthcare Eligibility, Enrollment and Retention System (CalHEERS): a) At least 1 member is in MAGI Medi-Cal DS (Awaiting Review) status or b) At least 1 member is MAGI Medi-Cal Soft Pause
Eligibility	Eligibility Determination	48325	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall generate a report of eligibility results post each eligibility redetermination batch runs
Eligibility	Eligibility Determination	48326	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall utilize the staged Discontinuance in the enhanced lookback for MAGI Medi-Cal once via BRE run.
Eligibility	Eligibility Determination	48327	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall not utilize the staged Discontinuance in the enhanced lookback for MAGI Medi-Cal if any of the following occurs: i) Case has been run with the run reason code of Intake ii) SAWS sends a high dated disposition for individual with MAGI Medi-Cal Eligible

Appendix A-4 - SOW Exhibit A - System Requirements Specification
(Extracted from CalHEERS RTM)

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Category	Sub Category	Req ID	Requirement
Eligibility	Eligibility Determination	48328	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall not utilize the staged Discontinuance in the enhanced lookback for MAGI Medi-Cal and will remain staged for the next BRE run if any of the following occurs: i) Case is run with the run reason code of Retro ii) Case is run via a closed dated disposition for individual with MAGI Medi-Cal Eligible
Eligibility	Eligibility Determination	48552	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall update the display logic in Budget Worksheet for when "None of the Above (Continue to review my application for Medi-Cal or MCAP)" QLE is selected.
Eligibility	Eligibility Determination	48623	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall consider an individual as Lawfully Present when LP is returned as N from VLP and Policy Effective Date is set for DACA Configuration when: 1. ESC of 188 is returned in Step 1, or 2. ESC of 387 is returned in Step 1, or 3. ESC of 10 along with EAD of C33 is returned in Step 1, or 4. ESC of 128 along with EAD of C33 is returned in Step 1, or 5. ESC of 10 along with EAD of A14 is returned in Step 1, or 6. ESC of 128 along with EAD of A14 is returned in Step 1, or 7. Major Code of 016 is returned in Step 2/3.
Eligibility	Eligibility Determination	48624	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall consider an individual as Lawfully Present when LP is returned as P from VLP and Policy Effective Date is set for DACA Configuration when: 1. ESC of 370 is returned in Step 1, or 2. ESC of 228 is returned in Step 1, or 3. ESC of 368 is returned in Step 1, or 4. ESC of 10 along with EAD of C35 is returned in Step 1, or 5. ESC of 128 along with EAD of C35 is returned in Step 1, or 6. ESC of 10 along with EAD of C36 is returned in Step 1, or 7. ESC of 128 along with EAD of C36 is returned in Step 1. 8. Major Code of 019 is returned in Step 2/3.
Eligibility	Eligibility Determination	48625	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall consider an individual as not Lawfully Present for when LP is returned as N from VLP and Policy Effective Date is set for DACA Configuration when ESC of 368 is returned in Step 1.
Eligibility	Eligibility Determination	48917	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall place an individual into Awaiting Review Status for MAGI Medi-Cal, beginning the Transition month, when they are placed into Carry Forward Status due to a RAC or MAGI Medi-Cal Renewal and would otherwise be EL/CE for MAGI Medi-Cal.
Eligibility	Eligibility Determination	48918	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall place an individual into Awaiting Review Status for MAGI Medi-Cal, beginning January of the Renewal year, when they are placed into Carry Forward Status due to an Exchange Renewal and would otherwise be EL/CE for MAGI Medi-Cal.
Eligibility	Eligibility Determination	48919	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall output MAGI Medi-Cal eligibility status as "Pending" when an individual is placed in Carry Forward and they have outstanding verifications that would result in "Pending" eligibility status for MAGI Medi-Cal.
Eligibility	Eligibility Determination	48925	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall allow MAGI Medi-Cal to be granted to an individual who is or was in Carry Forward Status for Carry Forward/Transition/Retroactive months regardless of the individual's prospective eligibility determination.
Eligibility	Eligibility Determination	48926	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall allow MAGI Medi-Cal to be granted to an individual who is or was in Carry Forward Status for Carry Forward/Transition/Retroactive months when there has not been a prospective MAGI Medi-Cal determination for the individual.
Eligibility	Eligibility Determination	48927	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall evaluate Exchange eligibility prospectively when an individual's Carry Forward status is ended for a prior benefit month in the Carry Forward Period.
Eligibility	Eligibility Determination	48929	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall deny an individual in Carry Forward Status for MAGI Medi-Cal from Transition month to High Date, and end the individual's Carry Forward Status, when an EDR is received for the Transition month which makes the individual Ineligible for MAGI Medi-Cal (e.g., Negative Action, Non-Compliance, failed Admin Verification, increase in income above MAGI Medi-Cal FPL limits, etc.).
Eligibility	Eligibility Determination	48930	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall deny an individual in Carry Forward Status for MAGI Medi-Cal from the requested benefit month the EDR is received for to High Date, and end the individual's Carry Forward Status, when an EDR is received for a Carry Forward month which makes the individual Ineligible for MAGI Medi-Cal (e.g., Negative Action, Non-Compliance, failed Admin Verification, increase in income above MAGI Medi-Cal FPL limits, etc.).
Eligibility	Eligibility Determination	48931	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall deny and end both Carry Forward periods across two coverage years when an individual is denied for the earlier Transition month.
Eligibility	Eligibility Determination	48932	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall deny and end both Carry Forward periods across two coverage years when an individual is denied for a Carry Forward month in the earlier Carry Forward period.
Eligibility	Eligibility Determination	48936	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall update the Transition End Date logic when the Carry Forward ends in the Transition month, or when it ends prior to the Transition month, to include the first Carry Forward month.
Eligibility	Eligibility Determination	48937	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall allow a consumer to be granted MAGI Medi-Cal for the current month if the consumer is eligible for APTC and/or State Subsidy and enrolled in a plan with a prospective termination date.
Eligibility	Eligibility Determination	48962	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall consume the final MAGI Medi-Cal eligibility status from SAWS on a Disposition, including denials (IE) and discontinuances (DS).
Eligibility	Eligibility Determination	48963	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall consume the MAGI Medi-Cal denial (IE) or discontinuance (DS) reason sent from SAWS on a Disposition.

Appendix A-4 - SOW Exhibit A - System Requirements Specification
(Extracted from CalHEERS RTM)

Category	Sub Category	Req ID	Requirement
Eligibility	Eligibility Determination	48964	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall apply the Medi-Cal DS/IE status sent on the Disposition to the Non-MAGI Medi-Cal Program if the individual is currently eligible for Non-MAGI Medi-Cal Program.
Eligibility	Eligibility Determination	48968	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall place a consumer into Awaiting Review for Discontinuance whenever a consumer is being discontinued for MAGI Medi-Cal (including NA, NC, and RAC regardless of real time/batch).
Eligibility	Eligibility Determination	48970	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall consume a MAGI Medi-Cal 'PE' status on the Disposition.
Eligibility	Eligibility Determination	48971	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall retain an individual's existing eligibility when SAWS sends a PE eligibility status on the Disposition.
Eligibility	Eligibility Determination	48972	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall retain the latest MAGI Medi-Cal status when a member is not included on a Disposition.
Eligibility	Eligibility Determination	48973	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall stale date the Disposition being processed and disregard it based on either the processed Dispositions or the BRE runs
Eligibility	Eligibility Determination	48974	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall trigger a BV if a Disposition is determined to be stale dated.
Eligibility	Eligibility Determination	48975	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall retain an individual's MAGI Medi-Cal “CE” status and consume the aid code on the Disposition if a Medi-Cal status of EL is received on the Disposition with a MAGI Medi-Cal aid code, and the individual is MAGI Medi-Cal CE in California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) with outstanding verifications.
Eligibility	Eligibility Determination	48976	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall process all eligibility segments for all case members on a Disposition.
Eligibility	Eligibility Determination	49419	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) system shall determine Conditional Eligible for MCAP individuals when the individual meets the Medi-Cal Access Program (MCAP) program criteria AND one or more of the following verifications are outstanding: - income is not reasonably compatible; - incarceration status; - deceased indicator; - California state residency; - ESI/Non ESI MEC
Eligibility	Eligibility Determination	49421	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall determine effective eligibility begin date as the 1st of the month of the application date for MCAP conditionally eligible or eligible individuals during Intake or RAC - Add a Person.
Eligibility	Eligibility Determination	49425	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall update the business rules of MCAP portal snippets to populate when consumers are Conditionally Eligible for MCAP rather than when they are Pending Eligible for MCAP.
Eligibility	Eligibility Determination	49426	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall add proof of non-deceased status to the View Actions Needed and Alerts Modal on the Account Home screen, the Eligibility Results Summary and Individual Eligibility Results screens for individuals who are MCAP Conditionally Eligible due to pending Deceased verification.
Eligibility	Eligibility Determination	49427	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall add proof of California residency status to the View Actions Needed and Alerts Modal on the Account Home screen, the Eligibility Results Summary and Individual Eligibility Results screens for individuals who are MCAP Conditionally Eligible due to pending residency verification.
Eligibility	Eligibility Determination	49429	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall update the MCAP Monthly Discontinuance batch to discontinue Conditionally Eligible MCAP individuals when their postpartum coverage is ending.
Eligibility	Eligibility Determination	49430	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall place Conditionally Eligible MCAP individuals in MCAP Pregnancy Hold for when an MCAP individual is redetermined and becomes either Medi-Cal or APTC/CSR/State Subsidy/CCP eligible.
Eligibility	Enrollment		
Eligibility	Enrollment	38748	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall discontinue MCAP on the last day of the month according to the 15 day discontinuance rule when a consumer elects to switch from MCAP to MAGI Medi-Cal.
Eligibility	Enrollment	39864	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall have the functionality to suppress all verifications for conditionally eligible Former Foster Youth (FFY) individuals other than the optional FFY verification.
Eligibility	Enrollment	40318	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall only set the status to “RAC Withdraw” from the Renewals Closure Batch if the case does not have future year eligibility established.
Eligibility	Enrollment	46348	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall turn on the Microsite functionality for Aetna
Eligibility	Enrollment	46360	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall consume a ROP BOT request report from CoveredCA and create a ROP BOT process to stage records for BOT execution
Eligibility	Enrollment	46361	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall run BRE and make the following changes via a BOT process for consumers with Pending/Not Verified SSNs and/or MEC, the system date is past their ROP date and the consumer is enrolled in a subsidized health plan: -discontinue eligibility to APTC/CSR/CAPS -move the CSR enrolled consumers into unsubsidized health plans -move the non-CSR enrolled consumers into the unsubsidized version of their current plans
Eligibility	Enrollment	46362	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall run BRE and make the following changes via a BOT process for consumers with Not Verified AI/AN status, the system date is past their ROP date and the consumer is enrolled in a health plan with CS2 level CSR: -discontinue eligibility to CS2 level CSR -move into Non-AI/AN Silver variant of their current plan with the same carrier and product based on FPL
Eligibility	Enrollment	46363	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall run BRE and make the following changes via a BOT process for consumers with Not Verified AI/AN status, the system date is past their ROP date and the consumer is enrolled in a health plan with CS3 level CSR: -discontinue eligibility to CS3 level CSR -move into Non-AI/AN version of their current plans

Category	Sub Category	Req ID	Requirement
Eligibility	Enrollment	46364	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall insert a case note when the ROP BOT runs for Pending/Not Verified SSNs and/or MEC and/or Not Verified AI/AN.
Eligibility	Enrollment	46365	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall generate a report for the ROP BOT runs for successful and fallout cases/individuals including the case details, individual details, individual eligibility status to all the programs, plans that the consumers are enrolled into, and fallout reasons when the ROP BOT runs for Pending/Not Verified SSN and/or MEC and/or Not Verified AI/AN.
Eligibility	Enrollment	47303	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall reactivate a previously deactivated Health Access Program (HAP) ID if the reapplication is submitted and the client is determined to be eligible for the Family PACT program.
Eligibility	Enrollment	47684	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall build 4 manual APS processes and choose one of the 4 processes to apply to cases identified for manual APS using the following criteria: -MAGI Medi-Cal/MCAP/CCHIP to CCP transition flag is active -Single Member Household -Eligible to Unsubsidized CCP only -"Planning to File Taxes" question set as No or Null.
Eligibility	Enrollment	47685	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall build the following process (Manual APS - Process 1) for a configurable % of cases identified for manual APS using randomization method: - update the planning to file taxes indicator and any required data elements for Report a Change to evaluate APTC/CSR/CAPS/CCP eligibility as per BR 2. - re-run eligibility to see if the individual could be eligible/conditionally eligible to APTC -Trigger a new Eligibility Snippet for this consumer in NOD01 if they have become APTC eligible.
Eligibility	Enrollment	47686	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall build the following process (Manual APS - Process 2) for a configurable % of cases identified for manual APS using randomization method: - update the planning to file taxes indicator and any required data elements for Report a Change to evaluate APTC/CSR/CAPS/CCP eligibility as per BR 2. - re-run eligibility to see if the individual could be eligible/conditionally eligible to APTC - Trigger a new Eligibility Snippet as well as a new flier for this consumer in NOD01 if they have become APTC eligible.
Eligibility	Enrollment	47687	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall build the following process (Manual APS - Process 3) for a configurable % of cases identified for manual APS using randomization method: - update the planning to file taxes indicator and any required data elements for Report a Change to evaluate APTC/CSR/CAPS/CCP eligibility as per BR 2. - re-run eligibility to see if the individual could be eligible/conditionally eligible to APTC - auto select a plan per the SB260 APS hierarchy but do not send the transaction to the carrier until the consumer has Accepted the data element changes that have been made on their behalf and they have elected to Keep the suggested, 'APS-Lite' plan. - Trigger a modified version of NOD01T (NOD01X) with a new Eligibility Snippet for this consumer if they have become APTC eligible.
Eligibility	Enrollment	47688	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall build the following process (Manual APS - Process 4) for a configurable % of cases identified for manual APS using randomization method: - Consumers will only receive the Manual APS indicator for Process 4 - No application changes will be made on this behalf of consumers in this Manual APS process - Eligibility will not be redetermined for consumers outside of existing functionality
Eligibility	Enrollment	47689	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall update the following data elements for all consumers selected in the Manual APS process regardless of prior attestation made via SAWS or California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) Portal: -Primary Tax Filer should be selected as the single household member -Plan to File Taxes should be updated to "Yes" -Claimed as Dependent should be set to "No" -Tax Filing Status should be set as "Single" -QLE selected should be selected as "Lost or will lose health coverage"
Eligibility	Enrollment	47690	The following fields should be defaulted to the value set by Portal/Eligibility when SAWS does not send these values in EDR for Manual APS consumers that do not have an existing attestation for these fields: - Are you an American Indian or Alaska Native? - Are you pregnant? - Has any employer, including a spouse or parent's employer, offered your health insurance? This does not include COBRA and Retiree health plan. - Required to File Taxes Indicator"
Eligibility	Enrollment	47691	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall run the manual APS processes on a daily basis to identify the population of cases which are eligible for Manual APS and use a randomized algorithm to apply one of the 4 processes for the cases that satisfy all of the following criteria: - The case satisfies the basic criteria listed for Manual APS in BR1. - The consumer is transitioning from MAGI Medi-Cal/MCAP/CCP to Unsubsidized CCP only eligibility and that MCT transition was triggered by a BRE run which was submitted between the system date of the previous run of Manual APS Staging Batch and the system date of the current run the Manual APS Staging Batch.

Category	Sub Category	Req ID	Requirement
Eligibility	Enrollment	47692	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall exclude the following cases from the Manual APS process: -Cases where the Case Status is “Inactive” or “Closed” -Cases where transition consumer is already actively enrolled (confirm/pending) in a Health Plan (plan should still update per current functionality) -Cases where transition consumer’s Transition Flag is no longer active -Cases where member on the case is in CFS -Cases where transition consumer’s Shopping Window is expired -Case is no longer a single-member household -Case where plan to file taxes indicator is set to yes -Cases where transition consumer has been negative actioned for “Failed to Complete Determination” or “Failed to Complete Redetermination” or received any non-compliance reason
Eligibility	Enrollment	47693	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall create configurable values to indicate the probability that a consumer will be assigned to each of the 4 Manual APS processes that will be assigned to each of the 4 Manual APS processes.
Eligibility	Enrollment	47696	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall create new indicator(s) to differentiate between each of the 4 Manual APS processes.
Eligibility	Enrollment	47714	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall trigger the Automatic Plan Selection (APS) logic and the downstream processes built in the SB260 CR for consumers who transitioned from Medi-Cal/MCAP/CCHIP to Covered CA and meet all the following criteria: - SAWS EDR transaction was received and transitioning individual was negative actioned for “Failed to Complete Determination” or “Failed to Complete Redetermination” or received any non-compliance reason in BRE run which triggered the MCT Transition Unsubsidized CCP only eligibility after initial transition - In a subsequent redetermination of eligibility, the transition individual becomes Eligible or Conditionally Eligible to APTC - The MCT flag is still active, or the MCT flag is not active but still within "X" number of days from the QLE Event Date, and the new flag for this population is still active.
Eligibility	Enrollment	47715	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall create a new configurable value “X” which will be used to determine the Procedural Discontinuance APS End Date as either "X" number of days after the QLE Event Date or the MCT Transition End Date, whichever is later.
Eligibility	Enrollment	47716	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall assign an indicator for consumers that are transitioning from MAGI Medi-CAL/MCAP/CCHIP to Unsubsidized CCP due to Procedural Denial from receiving “Failed to Complete Determination” or “Failed to Complete Redetermination” or received any non-compliance reason resulting in Unsubsidized CCP only eligibility after initial transition.
Eligibility	Enrollment	47859	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall dynamically display the eligibility results that correspond to the highest record in the run date coverage year when user navigates from: - Eligibility Results link on the Account Home page OR - Eligibility tab on the Case History page OR - Household Summary on the Account Home page OR - "Choose a Plan"/"RAC"/"Apply Now" button on the Account Home page
Eligibility	Enrollment	48348	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall send the enhanced CS level to the enrollment system based on the configuration set for the Household FPL % and the enrollment system should display the correct Silver level plans for selection, if the Enhanced CSR configuration is turned ON for a benefit year.
Eligibility	Enrollment	48354	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall use the locked FPL% in the enhanced CSR computation when all of the following criteria are met: - System has enabled a FPL lock as part of a special functionality - Both Enhanced CSR and the functionality implementing the FPL lock are turned ON for a benefit year - Case has eligibility determinations impacted by both the enhanced CSR and the FPL lock functionality
Eligibility	Enrollment	48355	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall display the following new CS level categories on the Budget Worksheet: - "Baseline CSR without FPL Override" - "Enhanced CSR without FPL Override"
Eligibility	Enrollment	48356	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall provide an additional configuration to enable the Enhanced CS level to be mapped to a more advantageous CS level for SLS-eligible AI/AN populations, per the state’s discretion.
Eligibility	Enrollment	48362	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall display, within the Budget Worksheet on the “Eligible For:” tag, the language “California Premium Subsidy and CSR without AI/AN” if a non-AI/AN individual is eligible to receive CSR and the California Premium Subsidy only.
Eligibility	Enrollment	48683	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall identify and give appropriate Portal messaging to active enrollment subscribers who updated their residential address to move to a region in which their current plan is not available, and they have not updated their enrollment.
Eligibility	Enrollment - SHOP		
Eligibility	Enrollment - SHOP	44821	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall provide the functionality for the consumer to provide known current or future medical usage and disease scenarios to adjust the estimated annual out of pocket costs for each plan selected for comparison.
Eligibility	Enrollment - SHOP	44822	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall highlight any generous provisions for each plan selected for comparison.
Eligibility	General Requirement		
Eligibility	General Requirement	37962	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall redetermine eligibility if the pregnant woman reports a change in the pregnant woman's marital status, i.e. reports they are married.
Eligibility	General Requirement	37964	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall provide the following messaging to the pregnant women under 21 on the eligibility results page when this income disregard has been applied. Good news! You qualify for Medi-Cal for pregnant women because you are single, under 21 years old, and pregnant. Your eligibility for Medi-Cal begins <MONTH DD, YYYY>. Your Medi-Cal coverage will continue unless you are found no longer eligible. This could happen at any time your eligibility is renewed or when your situation changes.

Appendix A-4 - SOW Exhibit A - System Requirements Specification
(Extracted from CalHEERS RTM)

OTSI CalHEERS RFP #73040873 Addendum 1
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Category	Sub Category	Req ID	Requirement
Eligibility	General Requirement	38099	For mixed households, California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall send an eligibility evaluation reason via eHIT when the QHP pregnancy hold applies.
Eligibility	General Requirement	38416	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall assign the County of Responsibility on initial case submission from the California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) Access Channel based the primary applicant's county of residence.
Eligibility	General Requirement	38418	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall identify cases for evaluation based on any of the following triggering conditions: 1. Eligibility is processed successfully from the last successful run of the Batch to the current Batch run. 2. A Disposition is processed successfully from the last successful run of the Batch to the current Batch run. 3. A 90 day Discontinuance cure period for the California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) Case's eligibility evaluation has expired.
Eligibility	General Requirement	38419	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall be allowed to reassign the County of Responsibility after the process has evaluated the case met all of the following conditions: 1. All applying members are Denied, Ineligible, or Discontinued from MAGI Medi-Cal 2. For MAGI Medi-Cal Discontinuance, at least one Disposition corresponding to the MAGI Medi-Cal Discontinuance determination is processed 3. 90 Day cure period of a discontinuance for failure to provide has expired 4. The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) case has no open referrals for Non-MAGI Medi-Cal 5. All California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) Non-MAGI referrals reported per case member have a status of Ineligible or Discontinued The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System process of evaluation shall account the 90 day cure period from the first day of the benefit month of discontinuance for each case member incurring a 'Failure to Provide' reason of discontinuance.
Eligibility	General Requirement	38542	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) system shall use 50% as the threshold for the reasonable compatibility test for income when determining eligibility for APTC/CSR consumers.
Eligibility	General Requirement	38897	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) system shall update existing NOD01 snippets with new triggering conditions reflecting the reason for the action that was taken with the 009 and 010 tax filing codes received from IRS.
Eligibility	General Requirement	38898	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) system shall have new verbiage in the NOD12 for consumers who are enrolled in a plan that is no longer being carried in the Exchange.
Eligibility	General Requirement	38899	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) system shall have new verbiage in the NOD12 for consumers who are enrolled with an issuer that is no longer participating in the Exchange.
Eligibility	General Requirement	38900	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) system shall have new language in the NOD12c for consumers losing their Catastrophic plan eligibility for the following benefit year during renewals.
Eligibility	General Requirement	38901	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall update the NOD01 with a new snippet for consumers currently enrolled in a catastrophic plan but no longer eligible for catastrophic coverage due to age during renewals.
Eligibility	General Requirement	38902	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall modify existing MCAP snippets in NOD01 to include instructions to keep or switch coverage to MAGI Medi-Cal or when a woman is retained in MCAP due to the MCAP pregnancy hold.
Eligibility	General Requirement	38903	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall include language on the NOD01 when: - a pregnant woman elects to transition from MCAP to MAGI Medi-Cal - a pregnant woman has the option to switch to a MAGI Medi-Cal
Eligibility	General Requirement	38904	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall generate new discontinuance snippets on the NOD01 for consumers that have been discontinued during the reasonable opportunity expiration process.
Eligibility	General Requirement	38906	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall suppress notices NOD50, NOD53, NOD56 and NOD59.
Eligibility	General Requirement	38907	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall update snippets 238 to align with the increased reasonable compatibility of 25%.
Eligibility	General Requirement	38908	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall add a field for benefit year in snippet 241 and make this a new snippet 829.
Eligibility	General Requirement	38909	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) system shall map the default auto renewal date of 12/15 12/13 for NOD12s generated for Carry Forward cases.
Eligibility	General Requirement	38910	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) system shall create a new snippet for the ROP reason related to Death and Incarceration on the NOD01ab.
Eligibility	General Requirement	38911	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) system shall create a new snippet for the ROP reason related to Death and Incarceration on the NOD03.
Eligibility	General Requirement	38971	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) system shall map the last day of the renewal period of the current year per the open enrollment calendar for NOD12s generated for Carry Forward cases.
Eligibility	General Requirement	38972	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) system shall create a new snippet for the ROP reason related to Death and Incarceration on the NOD01.
Eligibility	General Requirement	38973	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) system shall create a new snippet for the ROP reason related to Death and Incarceration on the NOD03.
Eligibility	General Requirement	38974	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) system shall create a new snippet for consumers who are ineligible for APTC/CSR due to indicating they do not plan to file taxes.
Eligibility	General Requirement	39021	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall grant eligibility for APTC/CSR/CCP and MCAP and CCHIP to consumers with an SSN that have not attested to having ESI-MEC without requiring a response for ESI-MEC service
Eligibility	General Requirement	39022	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall not use Failure to Reconcile (FTR) codes sent from IRS as part of the Eligibility Determination.
Eligibility	General Requirement	39098	Change the label on the consumer preferences button from “SKIP TO VIEW PLANS” to “SKIP”
Eligibility	General Requirement	39101	Change the label on the consumer preferences button from “SKIP TO VIEW PLANS to SKIP
Eligibility	General Requirement	39102	Change the functionality of the “SKIP” button on the medical usage screen to navigate to provider search page instead of plan selection page
Eligibility	General Requirement	39103	Change the functionality of the “SKIP” button on the prescription usage screen to navigate to provider search page instead of plan selection page.

Appendix A-4 - SOW Exhibit A - System Requirements Specification
(Extracted from CalHEERS RTM)

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Category	Sub Category	Req ID	Requirement
Eligibility	General Requirement	39104	The functionality of the "SKIP" button on the provider search screen will navigate the consumer to the plan selection page.
Eligibility	General Requirement	39189	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall only produce Eligibility Evaluation Reasons for the assigned administrative verifications that resulted in the individual being determined ineligible or discontinued from MAGI Medi-Cal: -SSN -SSN Waiver -Incarceration -Deceased -Residency -Medicare -Projected Annual Income (PAI) -Current Monthly Income (CMI)
Eligibility	General Requirement	39194	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall add and modify outputs in accordance with 42 CFR 435.119(c), which is applied to individuals who are within the Federal poverty limit of the MAGI Medi-Cal New Adult Group and who are parent/caretaker relatives with a child living in the home without Minimum Essential Coverage.
Eligibility	General Requirement	39195	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall add an Eligibility Evaluation Reason for Parent/Caretaker Relative individuals with an FPL greater than 114% up to and including 138% who are discontinued / ineligible for MAGI Medi-Cal because a dependent child who lives in the home does not have minimum essential coverage (MEC).
Eligibility	General Requirement	39223	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall block from sending non-compliant Alien Numbers through the California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) VLP interface to CMS. The blocked Alien Numbers are as follows: "0000000" "00000000" "000000000" "11111111" "111111111" "1111111111" "11111111111" "9999999" "99999999" "999999999" "9999999999"
Eligibility	General Requirement	39228	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall display a naturalized or derived citizenship question.
Eligibility	General Requirement	39229	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall update the portal to allow a consumer to enter document information for their naturalized or derived status.
Eligibility	General Requirement	39256	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall enable the Change Health Plan button regardless of Dental plan selection.
Eligibility	General Requirement	39315	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) system shall limit the DIVS systematic verification process to APTC/CSR/State Subsidy/CCP conditionally eligible individuals.
Eligibility	General Requirement	39316	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) system shall limit the DIVS systematic verification process to conditionally eligible individuals on 'APTC/CSR/State Subsidy/CCP Only' cases.
Eligibility	General Requirement	39317	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) system shall automatically redetermine eligibility for 'APTC/CSR/CCP Only' cases when a 'Pass' response is received from the DIVS.
Eligibility	General Requirement	39349	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall use the Verify Lawful Presence verification of U.S. Citizenship when provided by the Federal Data Services Hub regardless of attestation for eligibility evaluation.
Eligibility	General Requirement	39350	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall display the Verify Lawful Presence U.S. Citizenship indicator on the Personal Verification page.
Eligibility	General Requirement	39351	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall display the Verify Lawful Presence U.S. Citizenship verification when providing consumers more beneficial aid as part of the eligibility.
Eligibility	General Requirement	39353	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall provide the following additional immigration statuses separate from the Immigration Status menu: - Battered non-citizen, or parent or child of battered non-citizen - Filed for a U Visa - Taking Steps to apply for a T Visa or for certification by the office of Refugee Resettlement
Eligibility	General Requirement	39354	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall do data conversion of the following additional three immigration statuses: *Battered non-citizen, or parent or child of battered non-citizen *Filed for a U Visa *Taking Steps to apply for a T Visa or for certification by the office of Refugee Resettlement
Eligibility	General Requirement	39355	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) system shall have the ability to collect and consume additional information regarding their immigration statuses for an individual who attests to the following: *Battered non-citizen, or parent or child of battered non-citizen *Filed for a U Visa *Taking Steps to apply for a T Visa or for certification by the office of Refugee Resettlement

Appendix A-4 - SOW Exhibit A - System Requirements Specification
(Extracted from CalHEERS RTM)

Category	Sub Category	Req ID	Requirement
Eligibility	General Requirement	39356	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall use the Immigration Status and the below additional immigration statuses in the eligibility determination for consumer benefits for Medi-Cal and Exchange programs: - Battered non-citizen, or parent or child of battered non-citizen - Filed for a U Visa - Taking Steps to apply for a T Visa or for certification by the office of Refugee Resettlement
Eligibility	General Requirement	39508	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall have the functionality to capture an 11 character alpha numeric I-94 number where the 10th character can be a letter or a number on the California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) portal.
Eligibility	General Requirement	39509	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall update the error message for the I-94 number on the California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) portal.
Eligibility	General Requirement	39525	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall update the Eligibility Results page with State Subsidy information, including: Household Eligibility Results Summary, Individual Eligibility Details, and eligibility factors.
Eligibility	General Requirement	39548	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall disregard income verification statuses of "Pending", "Not Verified", "E-Verified", or "Pass" for the purpose of determining eligibility to the California Premium (State Subsidy) Program.
Eligibility	General Requirement	39565	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall utilize the income verification status of "Fail" for the purpose of determining eligibility to the California Premium (State Subsidy) Program.
Eligibility	General Requirement	39566	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall grant eligibility to CA premium subsidy for individuals who are otherwise eligible or conditionally eligible to APTC and whose income falls under < 100 % FPL who are denied full scope MAGI Medi-cal only for the reason of immigration status.
Eligibility	General Requirement	39567	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall grant eligibility to CA premium subsidy for individuals who are otherwise eligible or conditionally eligible to APTC and whose income is >= 100% and up to 138 % FPL who are denied full scope MAGI Medi-cal
Eligibility	General Requirement	39572	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall collect and/or modify the divorce or separation instrument order/ execution/ modification date for individuals that report alimony income in Insurance Affordability Programs (IAPs) applications.
Eligibility	General Requirement	39573	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall collect and/or modify the divorce or separation instrument order/ execution/ modification date for individuals that report alimony paid deduction in IAPs applications.
Eligibility	General Requirement	39581	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall only count divorce or separation instrument alimony as income when the order/execution/modification date is on or before 12/31/2018 in IAPs.
Eligibility	General Requirement	39582	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall only count alimony paid as a deduction when the divorce or separation instrument order/execution/modification date is on or before 12/31/2018 in IAPs.
Eligibility	General Requirement	39613	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall make the use of IRS data for State Subsidy income verification configurable.
Eligibility	General Requirement	39614	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall apply Pass or Fail to both Household Income - Subsidy and Household Income- CA Subsidy when Pass or Fail is manually selected for one of these verifications.
Eligibility	General Requirement	39615	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall clear the cache for both Household Income - Subsidy and Household Income- CA Subsidy when the cache is cleared for either of these verifications.
Eligibility	General Requirement	41007	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall trigger the Business Rules Engine run for the two highest benefit years when an override or confirmation is received via Disposition and crosses multiple coverage years that exist in California Healthcare Eligibility, Enrollment and Retention System (CalHEERS).
Eligibility	General Requirement	41595	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall capture UserRole as admin on Google Analytics Data Layer on HBX for the following roles if granted access to HBX pages: AssisterEnrollmentEntityAdmin Assister_Admin BROKER_Admin Broker
Eligibility	General Requirement	41596	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall remove populating UserRole as admin on Google Analytics Data Layer on HBX for following roles: Supervisor_announcement Admin_announcement Admin_Notices Supervisor_Notices
Eligibility	General Requirement	41598	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall capture UserDetailedRole as on Google Analytics Data Layer on HBX for the following roles if granted access to HBX pages: AssisterEnrollmentEntityAdmin Assister_Admin BROKER_Admin Broker

Category	Sub Category	Req ID	Requirement
Eligibility	General Requirement	41599	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall remove populating UserDetailedRole on Google Analytics Data Layer on HBX for following roles: Supervisor_announcement Admin_announcement Admin_Notices Supervisor_Notices DHCS_Softpause_Lift DHCS_Staff
Eligibility			California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall only calculate APTC/CSR/CAPS/CCP changes for the benefit year the RAC/Renewal is submitted for
Eligibility	General Requirement	42144	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall carry the following values over from the previous eligibility determination run for the current year during RRE (Re-run Eligibility at Intake): -Benchmark plan monthly premium -Maximum Annual Premium Amount (APTC) -Maximum Monthly Premium Amount (APTC) -Annual Federal APTC Amount -Maximum Monthly Federal APTC Amount -Total Maximum Monthly Premium Assistance Amount -Maximum Annual Premium Amount (CAPS) -Maximum Monthly Premium Amount (CAPS) -Annual CAPS Amount -Monthly CAPS Amount -Baseline CSR -Enhanced CSR
Eligibility			California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall add a new flag on the Budget Worksheet to indicate that the current year eligibility was triggered due to RRE (Re-run Eligibility at Intake).
Eligibility	General Requirement	42150	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall set a consumer's Consent to 5 years when they are identified as being APS eligible as the result of a Medi-Cal/MCAP/CCHIP to APTC transition.
Eligibility	General Requirement	42151	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall insert a case note for APS consumers who had their consent updated due to being APS Eligible.
Eligibility	General Requirement	42152	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall apply Carry Forward status to the latest eligibility determination for the enrollment benefit year, regardless if the eligibility start date has been reached.
Eligibility	General Requirement	42154	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall only display the current year for MAGI Medi-Cal only cases during Open Enrollment on the Account Home page.
Eligibility	General Requirement	42155	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall send HX20 ESAC-1 during RRE (Re-Run Eligibility at intake) for the current benefit year eligibility for MAGI Medi-Cal/MCAP/CCHIP when two years of eligibility is triggered.
Eligibility	General Requirement	42878	The Vendor must update the 'How Did You Hear About Covered California?' question drop-down with the following options and they must display in this order: · TV advertisement · Certified Enrollment Counselor · Certified Insurance Agent · County Eligibility Worker · Outdoor Advertisement (Billboard, Transit, Bus/Bus Shelters) · Family / Friend (Word of Mouth) · News Program or Story · Radio Advertisement · Social Media (Facebook, Twitter, YouTube) · Mail · Web / Internet Search · Online Advertisement · Magazine or Newspaper Advertisement · Email Message · Provider / Hospital · Other NOTE: The "Other" selection will NOT include a textbox for Consumer entry. NOTE: This list will replace the Extisting list.
Eligibility			If California Healthcare Eligiblity, Enrollment and Retention System (CalHEERS) gets an eligibility determination request from the SAWS and an individual household member requires a Lawful Presence verification and an existing Lawful Presence verification is already cached for the member then California Healthcare Eligiblity, Enrollment and Retention System (CalHEERS) will not call the hub for that household member.

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(Extracted from CalHEERS RTM)

Category	Sub Category	Req ID	Requirement
Eligibility	General Requirement	45353	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall mark all DER-U's, generated in the same day remediation period, as "processed" after 8:00 PM when the last eligibility determination for all individuals resulted in any of the following programs and no MAGI Medi-Cal eligibility: • APTC/CSR/CCP, or • MCAP/CCHIP
Eligibility	General Requirement	45912	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall prevent the consumer or admin user from entering an income/deduction start date which is later than the end date for a previously ended income/deduction, when user changes income/deduction amount or frequency on "How is your income/deduction changing?" modal in Consumer View.
Eligibility	General Requirement	45913	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall prevent an admin user from entering an income/deduction start date which is later than the end date for a previously ended income/deduction, when admin edits errors in an income/deduction record on "How is your income/deduction changing?" modal in Consumer View
Eligibility	General Requirement	45914	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall prevent an admin user from entering an income start date which is later than the end date for a previously ended income, when admin edits income on "Edit Income" modal in Flexi App View
Eligibility	General Requirement	45915	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall capture the Start Date and/or End Date of the Income/Deduction records based on consumer or admin user's input to the questions on "Edit Income/Deduction" modal (for Intake)
Eligibility	General Requirement	45916	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall capture the Start Date and/or End Date of the Income/Deduction records based on admin user's input to the questions on "Edit an Error in This Income/Deduction Record" modal (for RAC/Renewal) in Consumer View
Eligibility	General Requirement	45917	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall capture the Start Date and/or End Date of the Income/Deduction records based on admin user's input to the questions on "Edit Income/Deduction" modal (for Intake) in Flexi App View
Eligibility	General Requirement	45918	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall capture the Start Date and/or End Date of the Income/Deduction records based on admin user's input to the questions on "Edit Income/Deduction" modal (for RAC/Renewal) in Flexi App View
Eligibility	General Requirement	46184	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall have the functionality for the Admin (SCR/CEW) to search for a case from the Admin Home page
Eligibility	General Requirement	46185	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall allow Admin the functionality to search on the following: Consumer Information: a. First Name b. Last Name c. DOB d. SSN e. Account Email f. Client Index Number g. Pseudo ID Unique Identifier: h. California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) Case ID i. Username j. Application ID
Eligibility	General Requirement	46186	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall require the Admin to include an input in at least one other search field when searching by First Name or by Date of Birth
Eligibility	General Requirement	46187	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall allow Admin the functionality to apply the following on search: a. Phonetic Name Search b. Name "like" search c. DOB Range
Eligibility	General Requirement	46188	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall allow the Admins to clear all search inputs
Eligibility	General Requirement	46189	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall retain and display the last selected Admin search type
Eligibility	General Requirement	46190	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall have the functionality for the Admin to view the search results
Eligibility	General Requirement	46191	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall display a message when there are no search results or when query returns over 200 results
Eligibility	General Requirement	46192	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall allow Admin to view the following tier 1 information on the Search Results page- a. California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) Case ID b. Name (First Name, Middle Initial, Last Name, Suffix) c. Date of Birth d. SSN e. Case Status f. Application ID g. Application Status

Category	Sub Category	Req ID	Requirement
Eligibility	General Requirement	46193	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall allow Admin to view the following tier 2 information for more details in the Search Results: a. Household Member b. Household Size c. Primary Contact d. CIN e. Pseudo ID f. Program Eligibility g. Account Email h. Username (Do not display for MCIEP Cases)
Eligibility	General Requirement	46194	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall allow Admin to view the following tier 2 information for more details in the Search Results for pending applications: a. Primary Contact b. CIN c. Pseudo ID d. Account Email e. Username (Do not display for MCIEP Cases)
Eligibility	General Requirement	46195	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall display PseudoID according to the State MCIEP user role
Eligibility	General Requirement	46196	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall display pagination and maximum number of results in Search results
Eligibility	General Requirement	46197	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall allow Admin to sort the search results
Eligibility	General Requirement	46198	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall allow Admin to filter the search result on Application status and Case status
Eligibility	General Requirement	46199	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall allow Admin to navigate to the following California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) portal pages: a. Case History b. Account Home c. Case Overview d. Manual Eligibility d. Manual Verifications e. View Access Code f. COR/Case Linkage g. Flexible App View
Eligibility	General Requirement	46200	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall visually indicate when tier 2 information has been viewed.
Eligibility	General Requirement	46201	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall allow Admin to navigate to the following California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) portal pages: a. Case History b. Account Home c. Enrollment Dashboard d. Manual Verifications e. View Access Code f. COR/Case Linkage g. Flexible App View
Eligibility	General Requirement	46202	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall allow Admin the ability to select and manually deselect records from the search results and revisit the selected records on subsequent logins
Eligibility	General Requirement	46203	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall display a message to the Admin once the maximum number of records selected for revisit has been reached
Eligibility	General Requirement	46204	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall implement a configuration to enable/disable the Admin Search Functional pages designed in CR 147420
Eligibility	General Requirement	46542	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall grant Accelerated Enrollment Medi-Cal Eligibility for all Modified Adjusted Gross Income (MAGI) Medi-Cal eligible adults regardless of category (Adult, Parent/Caretaker, pregnancy, Etc.) and who are Pending/Not Verified for any verifications except Pending MEC MEDS or Not Verified MEC MEDS without a CIN from both California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) and SAWS access channels for intake run reasons. - Initial Intake/Same day remediation, - Add a person scenario (Report a Change/Renewals), - RAC/Renewal scenario where existing household member becomes a new Applicant.
Eligibility	General Requirement	46543	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall not place individuals into Eligibility Review during intake if they are granted Accelerated Enrollment Medi-Cal Eligibility from the SAWS Access Channel.
Eligibility	General Requirement	46544	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall maintain eligibility to Accelerated Enrollment in subsequent transactions from SAWS if they were granted Accelerated Enrollment in their intake application and continue to meet the Accelerated Enrollment eligibility criteria.
Eligibility	General Requirement	46545	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall apply aid code '8E' to all eligible Accelerated Enrollment individuals.

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Category	Sub Category	Req ID	Requirement
Eligibility	General Requirement	46546	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall determine an individual Conditionally Eligible for MAGI Medi-Cal when the individual is granted Accelerated Enrollment.
Eligibility	General Requirement	46547	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall send the '8E' Aid Code to MEDS via the HX20 ESAC-1 transaction when an Individual is granted Accelerated Enrollment from California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) or SAWS access channel.
Eligibility	General Requirement	46548	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall not send HX18 transactions for Accelerated Enrollment aid code 8E granted from SAWS Access Channel.
Eligibility	General Requirement	46549	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall grant Accelerated Enrollment Medi-Cal eligibility for all Modified Adjusted Gross Income (MAGI) Medi-Cal eligible Children who are under 19 years of age and who are Pending/Not Verified for any verifications except Pending MEC MEDS or Not Verified MEC MEDS without a CIN from both California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) and SAWS access channels for intake run reasons. - Initial Intake/Same day remediation, - Add a person scenario (Report a Change/Renewals), - RAC/Renewal scenario where existing household member becomes a new Applicant.
Eligibility	General Requirement	46550	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall validate that an individual has a CIN prior to granting eligibility for Accelerated Enrollment.
Eligibility	General Requirement	46551	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall add the ability for Accelerated Enrollment granted from SAWS Access Channel for adults and children to be enabled or disabled based on a configuration.
Eligibility	General Requirement	46552	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall grant Accelerated Enrollment based on the configuration if the system date/run date is greater than or equal to the configuration effective date.
Eligibility	General Requirement	46553	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall not grant Accelerated Enrollment for retro months of eligibility from the SAWS Access Channel.
Eligibility	General Requirement	46830	During CalSAWS Renewals RE EDR batch, California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall verify the attributes for Medicare, Deceased and Incarceration using the following rules: -Use the MAGI Medi-Cal RRV bulk verification data, if available. -If MAGI Medi-Cal RRV data is not available, then call the source.
Eligibility	General Requirement	46835	During CalSAWS Renewals EDR batch, California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall verify the attributes for Income: - Use the MAGI Medi-Cal RRV/FTB bulk verification data, if available. - If MAGI Medi-Cal RRV/FTB bulk verification data is not present, then call the source.
Eligibility	General Requirement	46836	During CalSAWS Renewal RE EDR batch, California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall continue to call the EDD online service for all the MAGI Medi-Cal households.
Eligibility	General Requirement	46838	During CalSAWS Renewals RE EDR Batch, California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall invoke the real-time API for Income (SSA Income, VCI, IRS), Medicare, Deceased and Incarceration attribute if there is an change to an impacted data element.
Eligibility	General Requirement	46839	During CalSAWS Renewals RE EDR Batch, California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall restrict the calls to CMS for Income, Medicare, Deceased, Incarceration verification attribute if there is a change to a non-impacted Data element.
Eligibility	General Requirement	46958	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall update the Eligibility Snippets-EligStatus 26 and 28 text word "members" to "member(s)" in English and "miembros" to "miembro(s)" for the Spanish translation.
Eligibility	General Requirement	46959	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall update Eligibility Snippet-EligStatus 006 for individuals that are not eligible for Covered California Benefits
Eligibility	General Requirement	46962	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall make text updates Eligibility Snippets-EligStatus 009
Eligibility	General Requirement	47694	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall consider cases that have transitioned from MAGI Medi-Cal to Unsubsidized CCP coverage due to a BRE run triggered on or after 1/1/2024 and prior to the System Date at the time of the first run of Manual APS staging batches after CR 213355 go-live for inclusion in the Manual APS process.
Eligibility	General Requirement	47695	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall assign cases staged for Manual APS to one of the 4 Manual APS processes based on the following randomization process: - The probability of a case being assigned to Manual APS Process 1, 2, 3, or 4 will be defined by the value of the configurable value provided by Covered CA - A random value between 0 and 1 will be generated for the case following a uniform distribution - The value of the random value will be used to assigned the case to Process 1, 2, 3, or 4
Eligibility	General Requirement	47697	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall assign a Manual APS Treatment Indicator to cases which are staged for Manual APS to indicate which Process the consumer is assigned to.
Eligibility	General Requirement	47698	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall assign an Active Manual APS Indicator at an individual level to determine whether a consumer meets the criteria for Manual APS Process 1, 2, or 3 functionality to be triggered.
Eligibility	General Requirement	47699	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall update the Active Manual APS Indicator to “N” when a consumer is no longer eligible to take action related to Manual APS functionality for Manual APS Process 1, 2, or 3.
Eligibility	General Requirement	47713	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall generate new case notes for the following cases that were impacted by the Manual APS process: - Application updates were made and the consumer was assigned to Manual APS Process 1 - Application updates were made, and the case was assigned to Manual APS Process 2 - Application updates were made, and the case was assigned to Manual APS Process 3
Eligibility	General Requirement	47726	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) business rules engine will re-evaluate Medicare during every run of eligibility using the latest cached Insurance effective start and end dates for Medicare.
Eligibility	General Requirement	47727	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall utilize admin verifications for Medicare for an individual during every run of eligibility until the individual's Medicare cache is cleared.
Eligibility	General Requirement	47728	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall use the Insurance Effective Start and End Dates to determine whether a person has Medicare.

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Category	Sub Category	Req ID	Requirement
Eligibility	General Requirement	47729	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall determine an individual's estimated eligibility effective start date for health coverage programs that will be compared to the insurance effective start and end dates to determine whether a person has Medicare.
Eligibility	General Requirement	47730	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall determine an individual's estimated eligibility effective start date for Exchange programs during the open enrollment period to be either the first of January of the following year if the application date is in November or December of the current year or first of February if the application date is January.
Eligibility	General Requirement	47731	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall determine an individual's estimated eligibility effective start date for Exchange programs during special enrollment period to be the first of the month following the application date or QLE date, whichever is later, if the consumer's Eligibility Effective Date Category is "Loss of Coverage (MEC)".
Eligibility	General Requirement	47732	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall determine an individual's estimated eligibility effective start date for CCP during special enrollment period to be the QLE date when the Eligibility Effective Date Category is "Birth/Adoption/Appeals Mid-Month".
Eligibility	General Requirement	47733	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall determine an individual's estimated eligibility effective start date for APTC/CSR/CAPS during special enrollment period to be either the QLE date if the QLE date is the first day of the month or the first of the month following the QLE date when the Eligibility Effective Date Category is "Birth/Adoption/Appeals Mid-Month".
Eligibility	General Requirement	47734	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall determine an individual's estimated eligibility effective start date for Exchange programs during special enrollment period to be the first of the month following the application date for all reported Qualifying Life Events in the "First of the following month" eligibility effective category.
Eligibility	General Requirement	47735	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall determine an individual's estimated eligibility effective start date for Exchange programs to be the first of the month following the application date when no QLE is reported and a QLE is detected.
Eligibility	General Requirement	47736	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall determine an individual's estimated eligibility effective start date for Exchange programs to be the first of the requested benefit month if the requested benefit month is a future month compared to the run date.
Eligibility	General Requirement	47737	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall determine an individual's estimated eligibility effective start date for MAGI Medi-Cal/MCAP/CCHIP to be the first of the application submission month.
Eligibility	General Requirement	47738	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall determine an individual's estimated eligibility effective start date to be the first of January of the following year as part of the Exchange Renewals.
Eligibility	General Requirement	47739	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall determine an individual's estimated eligibility effective start date for PVC to be the PVC verification batch run date.
Eligibility	General Requirement	47740	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall interpret the following response received from Non-ESI Real time API, RRV and PVC service: - If Insurance effective start and end date is not returned in the response from Non-ESI or RRV or PVC for Medicare Coverage, then it is considered as no Medicare Coverage irrespective of MEC Verification Code. - If MEC Verification Code is received as P or Y and Insurance Start Date is present & End Date is not returned or is NULL in the response from Non-ESI or RRV or PVC for Medicare Coverage, then it is considered as ongoing Medicare Coverage.
Eligibility	General Requirement	47741	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall request Medicare eligibility for a 12 month time span from January 1st to December 31st of the requested benefit year when a Medicare verification call is made.
Eligibility	General Requirement	47742	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall add a new verification caching rule for Medicare to call verification for a 12 month time span from January 1st to December 31st if Medicare coverage dates have not previously been requested for that requested benefit year.
Eligibility	General Requirement	47743	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall reset the maximum call counter for Medicare verifications and invoke a new verification call if Medicare coverage dates are not stored in the California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) DB for the requested benefit year.
Eligibility	General Requirement	47744	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall consider an individual as having Medicare coverage if the Insurance Effective Start Date from the latest Medicare Response is prior or equal to the estimated eligibility effective start date, and the Insurance Effective End Date is later than the estimated eligibility effective start date.
Eligibility	General Requirement	47745	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall consider an individual as not having Medicare coverage if the Insurance Effective Start Date from the latest Medicare Response is a date that is later than the estimated eligibility effective start date and there are no other records from the latest Medicare Response indicating coverage during the estimated eligibility effective start date.
Eligibility	General Requirement	47746	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall consider an individual as not having Medicare coverage if the Insurance Effective Start Date and End Date from the latest Medicare Response are prior or equal to the estimated eligibility effective start date, and there are no other records from the latest Medicare Response indicating coverage during the estimated eligibility effective start date.
Eligibility	General Requirement	47747	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall display up to the two latest Medicare coverage date range slices on the Personal Verification page.
Eligibility	General Requirement	47800	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall enhance the Upload Eligibility Documents page and Documents & Correspondence page to provide near real time document quality feedback.
Eligibility	General Requirement	47801	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) system shall display a message to the Consumer on the California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) portal for the document quality issues in the event when the uploaded document quality is below the configurable document quality threshold and allow them to either upload new file or continue for the submission of document.
Eligibility	General Requirement	47802	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) system shall display a message to the Consumer on the California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) portal when the document quality looks good in the event when the uploaded document quality is above the configurable document quality threshold and allow them to either upload new file or continue for the submission of document.
Eligibility	General Requirement	47804	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) system shall enhance the reason(s) to be displayed on Personal Verification page following a Cannot Verify result from IDP.
Eligibility	General Requirement	47805	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall reset and clear the reason(s) tied to IDP 'Cannot Verify' only for the specific verification which are administratively (Admin pass/fail) or electronically verified (e-verified).
Eligibility	General Requirement	47806	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall reset and clear all the reason(s) tied to IDP 'Cannot Verify' when the individual is no longer qualified for the Covered California Programs (APTC/CSR/CCP/CAPS).

Appendix A-4 - SOW Exhibit A - System Requirements Specification
(Extracted from CalHEERS RTM)

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Category	Sub Category	Req ID	Requirement
Eligibility	General Requirement	47807	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) system shall display a message to the consumer that the documents have been submitted and are being verified.
Eligibility	General Requirement	47808	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) system shall display a message to the consumer that their document(s) verification is under review if IDP response is "Cannot Verify".
Eligibility	General Requirement	47809	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall add a new transaction 'Eligibility Determination - IDP' on Transaction History page when IDP response of "Pass" triggers BRE to re-determine the eligibility.
Eligibility	General Requirement	47860	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall retain the current year eligibility when a prior year benefit intake application is submitted during the current benefit year to maintain continuity of eligibility already established in current year.
Eligibility	General Requirement	47861	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall update Spanish Translations for the following eligibility snippets: - EligStatus_026 - EligStatus_028 - EligFactor_006
Eligibility	General Requirement	47889	During the MAGI Medi-Cal RRV and Exchange RRV process, California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall ensure an Equifax-destined transmission file does not exceed 100 MB of uncompressed XML.
Eligibility	General Requirement	47908	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall implement a functionality to determine Strike Lockout (SLS) Benefit Eligibility for consumers who have attested to Loss of MEC and attested to the fact that the loss is due to labor disputes caused by a Strike Lockout
Eligibility	General Requirement	47909	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall only display the new Strike Lockout question "Did you lose health coverage due to a Strike or Lockout" in intake applications during OSEP/SEP if the user selects the QLE "Lost or will lose health Coverage"
Eligibility	General Requirement	47910	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall create and display a confirmation question to users asking if they are still part of an active Strike Lockout instance if the system detects that the previously attested Strike Lockout reason is still active when the user is entering a Renewals/RAC and the tax household was previously eligible for Strike Lockout benefit
Eligibility	General Requirement	47911	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall display an informational note when the consumer selects "NO" to the confirmation question that is asking if the household is still part of the previously attested Strike Lockout.
Eligibility	General Requirement	47912	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall evaluate all applying members of the primary tax filing household eligible/conditionally eligible for Strike Lockout benefits if at least one member in the tax filing household attests to a loss of MEC and is impacted by a Strike Lockout and the applying members meet all other eligibility criteria
Eligibility	General Requirement	47913	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall require that consumers meet the APTC eligibility requirements to be eligible to the Strike Lockout benefit with the exception of FPL levels in order to be eligible for the new Strike Lockout benefit
Eligibility	General Requirement	47914	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall continue to utilize existing rules for effective dating and qualifying life events effective dating rules will be applicable to the Strike Lockout program
Eligibility	General Requirement	47915	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall disregard income verifications for the Strike Lockout benefit program.
Eligibility	General Requirement	47916	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall continue to follow the existing ROP rules while determining eligibility for SLS program
Eligibility	General Requirement	47917	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall continue to follow the existing PDM while determining eligibility for SLS program
Eligibility	General Requirement	47918	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall cap the FPL% at 138.1% for the determination of the Strike Lockout benefit, if the consumer is found eligible to Strike Lockout benefit.
Eligibility	General Requirement	47919	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall utilize the actual FPL for the determination of the Strike Lockout benefit, if the consumer is found eligible for Strike Lockout, and the calculated FPL range is between 100% and up or equal to 138%
Eligibility	General Requirement	47920	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall lock the FPL at 100% for the determination of the Strike Lockout benefit if the consumer is found eligible for Strike Lockout benefit and the calculated FPL falls below 100%
Eligibility	General Requirement	47921	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall use the Fairshare Percentage table that is used for the APTC eligibility determination to determine the Strike Lockout benefit amount.
Eligibility	General Requirement	47922	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall continue to use the appropriate FPL% for the respective programs in the determination of APTC/CAPS Subsidy, if the consumer is found eligible to Strike Lockout benefit.
Eligibility	General Requirement	47923	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall continue to determine a consumer's CovCA program aid code (including SLS) based off the attested budget calculation even when SLS FPL % is overridden
Eligibility	General Requirement	47924	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall override the CSR FPL at 138.1% for consumers eligible to SLS to grant the most beneficial Baseline CSR plan
Eligibility	General Requirement	47925	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall override the CS level for non-AI/AN consumers irrespective of the attested income to CS6 if determined eligible for the Strike Lockout benefit
Eligibility	General Requirement	47926	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall override the CS level for AI/AN consumers with attested income over 300% FPL from CS3 to CS6 if determined eligible for the Strike Lockout benefit
Eligibility	General Requirement	47927	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall retain the CS level for AI/AN consumers with attested income equal to or below 300% FPL at CS2 if determined eligible for the Strike Lockout benefit
Eligibility	General Requirement	47928	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall implement a configuration which will enable/disable the functionality for the determination of the Strike Lockout Eligibility for a benefit year.
Eligibility	General Requirement	47929	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall continue to grant Strike Lockout benefits during renewals to a consumer in the next benefit year if the Strike Lockout configuration is turned "ON" for the next year, the previously attested Strike Lockout instance is still active, and the consumer meets Strike Lockout eligibility requirements
Eligibility	General Requirement	47930	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall discontinue a consumer from Strike Lockout benefits during renewals in the next benefit year if the Strike Lockout configuration is turned "ON" for the next benefit year, the previously attested Strike Lockout instance is still active, but the consumer fails to meet Strike Lockout eligibility requirements

Appendix A-4 - SOW Exhibit A - System Requirements Specification
(Extracted from CalHEERS RTM)

Category	Sub Category	Req ID	Requirement
Eligibility	General Requirement	47931	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall discontinue a consumer from Strike Lockout benefits during renewals in the next benefit year if the Strike Lockout configuration is turned "ON" for the next benefit year, and the previously attested Strike Lockout instance has or is ending in the current enrollment year
Eligibility	General Requirement	47932	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall discontinue a consumer from Strike Lockout benefits during renewals in the next benefit year if the Strike Lockout configuration is turned "OFF" for the upcoming benefit year.
Eligibility	General Requirement	47933	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall have the functionality to display the Strike Lockout benefit as a State Subsidy for consumers.
Eligibility	General Requirement	47934	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall display the Eligibility for Strike Lockout program at a case level in the Household Eligibility Results Summary, grouped under the Financial Help section
Eligibility	General Requirement	47935	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall disregard the unemployment income type while counting income towards the computation of Strike Lockout benefit
Eligibility	General Requirement	47936	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall treat any income not countable for APTC as also not countable for Strike Lockout benefit
Eligibility	General Requirement	47937	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall update the Eligibility Results page with Strike Lockout information, including: Household Eligibility Results Summary, Individual Eligibility Details, and Eligibility factors.
Eligibility	General Requirement	47938	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall display "Strike Lockout Benefit" in the "Program Eligibility by Person" section as its own line item/eligibility to denote status, start and end dates.
Eligibility	General Requirement	47939	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall group "Strike Lockout Benefit" in the Household Eligibility Results Summary page under Financial Help category
Eligibility	General Requirement	47940	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall display the "Strike Lockout Benefit" as its own new blurb (Official name TBD) with it's own "additional details" paragraph section in the individual financial eligibility details under the "Financial Information "section
Eligibility	General Requirement	47941	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall only display Strike Lockout eligibility snippets under Eligibility Results Financial Help section when the SLS configuration is turned ON and the household is eligible for the Strike Lockout program or being discontinued from it.
Eligibility	General Requirement	47942	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall make updates to the Budget page to show calculations for Strike Lockout benefit amount.
Eligibility	General Requirement	47943	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall add and display "Strike Lockout Benefit" as a program in the "Eligible For" Section of the Budget Worksheet when a consumer is found eligible for the program
Eligibility	General Requirement	47944	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall add the "Strike Lockout Benefit" line items for annual, maximum monthly and then including that additional subsidy amount in the Total Maximum Monthly Premium Assistance Amount (last line which post-implementation would be sum of APTC+CAPS+SLS).
Eligibility	General Requirement	47945	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall add Strike Lockout detail to the top introduction paragraph under "Budget Worksheet" screen.
Eligibility	General Requirement	47946	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall utilize the self-attested APTC FPL for consumers currently receiving SLS who go into CFS or QHP Pregnancy Hold and continue to cap the FPL at 138.1% for the Strike Lockout benefit and CSR evaluations
Eligibility	General Requirement	47947	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall discontinue a consumer from an ongoing Strike Lockout program after CCA renewals for the next benefit year if the SLS configuration is turned "OFF" for the next benefit year and the consumer was placed on CFS or QHP Pregnancy Hold
Eligibility	General Requirement	47948	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall continue granting Strike Lockout benefits to a consumer after CCA renewals for the next benefit year if the configuration is turned "ON" for the next benefit year and the consumer is placed on CFS or QHP Pregnancy Hold
Eligibility	General Requirement	47949	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall develop a batch process to discontinue consumers from eligibility to all exchange programs (excludes eligibility to Medi-Cal programs) when: - a strike/lockout instance is deactivated, OR - cases attesting to ""Not Listed"" or ""Labor Dispute"" are identified
Eligibility	General Requirement	47950	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall add a new sub reason code for the eligibility determination from the batch that is run when a Strike Lockout instance is de-activated.
Eligibility	General Requirement	47951	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall add the following case note when the Strike/Lockout discontinuance batch is run and enrollment and eligibility are successfully updated: The strike or lockout reported on this case has ended and the household is no longer eligible for Strike Lockout Benefits for [YYYY]. The household eligibility for exchange programs has been discontinued and enrollment has been terminated. See Manual Work - Strike Eligibility Enrollment Task Guide SC.104
Eligibility	General Requirement	47952	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall add the following case note when the Strike/Lockout discontinuance batch is run and enrollment and eligibility are not successfully updated: Manual Work Needed: The strike or lockout reported on this case has ended and the household is no longer eligible for Strike Lockout Benefits for [YYYY]. The household eligibility and enrollment could not be updated automatically and requires manual work. See Manual Work - Strike Eligibility Enrollment Task Guide SC.104
Eligibility	General Requirement	47953	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall utilize the 15 day rule when discontinuing a consumer from all Exchange programs including CCP when running the Strike Lockout Discontinuance Batch
Eligibility	General Requirement	47954	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall design the Strike Lockout Discontinuance batch to take in either the official Strike Record as a parameter, or a case list to discontinue at a case level
Eligibility	General Requirement	47955	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall design the Strike Lockout Discontinuance batch to run eligibility twice in the scenario where the consumer has already been renewed for the upcoming benefit year and must be discontinued for both years.

Appendix A-4 - SOW Exhibit A - System Requirements Specification
(Extracted from CalHEERS RTM)

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Category	Sub Category	Req ID	Requirement
Eligibility	General Requirement	47956	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall design the Strike Lockout Discontinuance Batch to have the follow exclusion criteria 1. Cases where case status is "Inactive", "Closed" , or "Closed as Duplicate" are excluded 2. Cases where the "Strike Attestation Flag" is set as "N" 3. Cases where the consumer is not actively enrolled in a plan should be excluded 4. Cases in CFS or QHP Pregnancy Hold are excluded
Eligibility	General Requirement	47957	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall discontinue a consumer from the Strike Lockout program if the consumer manually updates that they are no longer part of the active Strike Lockout or if they re-gained MEC
Eligibility	General Requirement	47977	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall disregard the Strike Lockout benefit amounts while communicating with FTB and generating the 3895 form.
Eligibility	General Requirement	47982	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall add messaging/alert to the Account Home page to display to all Strike Lockout eligible consumers that they are currently receiving Strike Lockout benefits and to update the application if they are no longer a part of the Strike Lockout
Eligibility	General Requirement	47983	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall add messaging/alerts to Account home page notifying a consumer that their Strike Lockout has ended and that they will no longer receive Strike Lockout benefits.
Eligibility	General Requirement	47987	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall continue granting eligibility to the Strike Lockout program to an existing SLS consumer if any type of EDR is received and the system detects that the previously attested Strike Lockout instance is still active (no end -date) and the consumer meets all other eligibility criteria
Eligibility	General Requirement	47988	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall discontinue an existing SLS consumer from the Strike Lockout program if any type of EDR is received and the system detects that the previously attested Strike Lockout is no longer active (has an end-date) or if they no longer meet other exchange eligibility criteria.
Eligibility	General Requirement	47989	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall use the first of the following month effective dating rules for SLS when SLS is ended and consumer remains eligible for CCP
Eligibility	General Requirement	47990	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall remove the following messaging from the application flow when a consumer attests to being impacted by a strike: "The Strike Lockout Benefit will not show in your eligibility. Do not pick a plan once you submit your information. Please call our service center at (800) 793-6385 so we can enroll you in a plan that saves you the most on your premium (monthly cost)."
Eligibility	General Requirement	47991	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall restrict the user input to the text box of the "Not Listed" or "Labor Dispute" to only allow alphabet characters , numbers, spaces, hyphens & periods.
Eligibility	General Requirement	47992	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall make the field for the name of the strike/lockout or the labor dispute as a mandatory required data item, if the consumer selects an active strike record as "Not Listed" or "Labor Dispute"
Eligibility	General Requirement	47993	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall update the "Enrollments " Page in the Admin Portal to display Strike Lockout Benefit in the "Savings Breakdown" under the Health Plans Details.
Eligibility	General Requirement	47996	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall add Strike Lockout as a display criteria under the "Covered CA" grouping for the Program Eligibility column with the Enhanced Admin Search Bar
Eligibility	General Requirement	47999	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall update the language in the Review Screens & App.PDF to display the full Strike Lockout Questions
Eligibility	General Requirement	48000	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall update the Strike Lockout Admin Config Page "Add/Edit Strike" to allow self service admin OFF/ON for "Not Listed" and "Labor Dispute"
Eligibility	General Requirement	48001	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall queue up the "Strike Lockout Attestation Page" during Open Enrollment Intake Applications for users who were using the Flexi-App channel and were navigated to the consumer Portal to complete the application.
Eligibility	General Requirement	48002	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall update the Final Household Review Screen (for RAC) to capture the QLE and Strike Lockout Information that was selected during the current RAC.
Eligibility	General Requirement	48104	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall discontinue the consumer from APTC/Income Based CSR when any of the tax filing codes are received from IRS and the configuration is turned ON for the benefit year.
Eligibility	General Requirement	48105	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall display the following snippet on the Eligibility Results page for individuals ineligible to APTC/CSR/CAPS/SLS due to married filing separately, FTR, and not planning to file reasons - You are not eligible to receive premium assistance for one or more of the following reasons: •The primary tax filer does not plan to file federal income taxes. •The primary tax filer has a spouse but does not plan to file taxes as "Married Filing Jointly." •The primary tax filer plans to file taxes as "Married Filing Separately." •Someone in your tax household did not file a federal income tax return with IRS Form 8962 for 2 years in a row when they got premium tax credits.
Eligibility	General Requirement	48106	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall update the following Business rules conditions for the EligFactor_060: Display if consumer is ineligible/discontinued for APTC/CSR/CAPS/SLS for one or more of the following reasons: 1a. Not Planning to File Reasons 1b. Married Filing Separately 1c. Primary Tax Filer has a spouse and is not filing taxes as "Married Filing Jointly" 1d. FTR codes (007, 009, 010, 011)
Eligibility	General Requirement	48397	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall allow users with Covered CA or Mixed Household cases, involving Covered CA benefits to apply application changes on California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) Portal to both benefit years until end of the current benefit year (12/31) when one of the following is reported - 1. Case is staged for Covered CA renewals and user initiates a RAC for current benefit year or renewal for upcoming benefit year 2. Covered CA renewal is complete for the next benefit year and user initiates a RAC (for any of the benefit year)

Appendix A-4 - SOW Exhibit A - System Requirements Specification
(Extracted from CalHEERS RTM)

Category	Sub Category	Req ID	Requirement
Eligibility	General Requirement	48398	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall introduce a new data element which allows the user to indicate whether the changes reported should be applied across both current and future benefit years.
Eligibility	General Requirement	48399	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall display a QLE selection screen if user attests to apply application data changes across both current and future benefit years.
Eligibility	General Requirement	48400	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall determine eligibility for the current year followed by the future year when user attests to apply same changes across both current and future benefit years
Eligibility	General Requirement	48401	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall grant new Strike Lockout eligibility for both current and future benefit year if the user attests to a new strike lockout during Renewals or RAC (any benefit year) and they opt to apply application data changes across both current and future benefit years
Eligibility	General Requirement	48402	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall evaluate Strike Lockout eligibility for both current and future benefit year if the user attests that the household is still impacted by an ongoing strike during Renewals or RAC (any benefit year) and they opt to apply application data changes across both current and future benefit years
Eligibility	General Requirement	48403	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall discontinue the user from the Strike Lockout program for both current and future benefit year if the user attests that the household is no longer part of the Strike Lockout during Renewals or RAC (any benefit year) and opts to apply application data changes across both current and future benefit years.
Eligibility	General Requirement	48408	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall update the fair share adjustment percentage amount for APTC for the benefit year 2025.
Eligibility	General Requirement	48420	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall make updates to the Header Paragraph on the Race/Ethnicity section in the application flow for SSA during intake and Flexi-App during Intake, RAC, Renewals.
Eligibility	General Requirement	48421	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) Renewals Batch (BAT10A) shall pick up cases for passive renewal if the case has at least one exchange member eligible for renewal for an upcoming enrollment year and was not renewed along with other member(s) in the household already having coverage in the future enrollment year with MAGI Medi-Cal/MCAP/CCHIP eligibility
Eligibility	General Requirement	48422	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall update the Spanish translation for the dropdown value of "Closed -Duplicate Case" when the user navigates to the Case Status page to update the case status.
Eligibility	General Requirement	48425	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall update the Procedural Discontinuance APS Flag from "Y" to "E" for cases/individuals that were identified as candidates for Procedural Discontinuance APS, as soon as plan selection occurs, which can be either manual plan section or auto-plan selection for any benefit year
Eligibility	General Requirement	48426	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall use Admin verifications/E-verification, if received for verification attributes, during California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) Renewal Mode when processed after the initial run of renewal eligibility.
Eligibility	General Requirement	48430	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall update the existing Deferred Renewal Operational Process (DROP) batch logic while renewing Automatic Plan Selection (APS) enrollments to include the case only if the opt-in is received or the enrollment status is confirmed.
Eligibility	General Requirement	48449	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall update the Strike Lockout Discontinuance Batch to evaluate for Strike Lockout Eligibility in current and future benefit years and stage the case for discontinuance regardless if it is a renewed case or not.
Eligibility	General Requirement	48451	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall modify document list on portal to match up to date document list on Covered California Website
Eligibility	General Requirement	48452	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) system shall notify the user of the discrepancy between the user classified document and the IDP-detected document type if IDP's classification do not align with user's classification.
Eligibility	General Requirement	48486	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall retain MAGI Medi-Cal conditional eligibility when SAWS sends a Disposition during the same day remediation timeframe that is confirming conditional eligibility.
Eligibility	General Requirement	48488	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall interpret any of the following responses from income Sources as a zero-dollar income for Reasonable compatible evaluation: - o SSA Title II Monthly/Annual Income Verification Request Indicator as “False”/ “N” - o IRS response is "Return Information is unavailable" (HE020004 or 004), or - o FTB response is "Not Found" (404), or - o EDD response is "SSN Unknown" (9991), or - o VCI response is “Applicant Not Found” (HE000001) or "Record Not Found" (17004)
Eligibility	General Requirement	48489	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall evaluate reasonable compatibility when the dollar amount returned from SSA and one of the other income sources (IRS, EDD, FTB, VCI) is available.
Eligibility	General Requirement	48490	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall apply a hierarchy for reasonable compatibility check for Household Income Subsidy verification as follows: 1. If the income returned from IRS + SSA is reasonably compatible for Household Income Subsidy then only use IRS for reasonable compatibility check and do not check for reasonable compatibility with other income sources (FTB,EDD,VCI) for Household Income Subsidy. 2. If the income returned from IRS is not reasonably compatible then continue to check with other income sources for reasonable compatibility. 3. If individual attests to \$0 of income, the existing hierarchy and reasonable compatibility rules shall be followed.
Eligibility	General Requirement	48491	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall not include previous year end-dated income in the calculation of current year total income for the income verification process of MAGI Medi-Cal Cases as part of SIR 263660.
Eligibility	General Requirement	48492	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall update the mock services to enable testing of EDD Response Codes 9990, 9991, 9998.
Eligibility	General Requirement	48856	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall create a process called "Reasonable Explanation" where consumers who have submitted an application and are determined to have pending income verifications can select a "Reasonable Explanation" via the Portal to be applied to themselves
Eligibility	General Requirement	48857	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall allow "Reasonable Explanation" to be received in the initial intake EDR and will consume the "Reasonable Explanation" regardless of the response from the hub call
Eligibility	General Requirement	48858	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall trigger a Business Rule Engine (BRE) Run when a consumer submits a selection of a Reasonable Explanation value from the Portal or when an EDR is received for the consumer with Reasonable Explanation

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(Extracted from CalHEERS RTM)

Category	Sub Category	Req ID	Requirement
Eligibility	General Requirement	48859	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall create an "ON/OFF" configuration for "Exchange - Reasonable Explanation"
Eligibility	General Requirement	48860	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall always allow a consumer that is Pending/Conditionally Eligible to MAGI Medi-Cal, MCAP, or CCHIP to select a 'Reasonable Explanation' from a dropdown menu via the Portal to apply to themselves, if they meet the following criteria: -Consumer's MAGI Medi-Cal Current Monthly Income and/or MAGI Medi-Cal Projected Annual Income is "Pending" and, - Attesting to Income greater than \$0 and, - MAGI Medi-Cal Household Composition does not include an individual that is “Not Verified” for both MAGI Medi-Cal Current Monthly Income and MAGI Medi-Cal Projected Annual Income
Eligibility	General Requirement	48861	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall always allow a consumer who is Exchange Subsidy Conditionally Eligible/Eligible to select a “Reasonable Explanation” from a drop-down menu via the Portal when they meet the following criteria: -Consumer's MAGI Medi-Cal Current Monthly Income and/or MAGI Medi-Cal Projected Annual Income is "Pending" and, - Attesting to income greater than \$0 and, - There is at least one person on the case that is Pending or Conditionally Eligible to MAGI Medi-Cal, MCAP, or CCHIP due to Pending Income Verifications and, - MAGI Medi-Cal Household Composition does not include an individual that is “Not Verified” for both MAGI Medi-Cal Current Monthly Income and MAGI Medi-Cal Projected Annual Income
Eligibility	General Requirement	48862	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall allow Exchange conditionally eligible consumers in an Exchange only household to select a "Reasonable Explanation" from a drop down menu via the Portal when the "Reasonable Explanation - Exchange configuration is "ON" and if they meet the following criteria: -Attesting to income greater than \$0 and, -Consumer's MAGI Medi-Cal Current Monthly Income and/or MAGI Medi-Cal Projected Annual Income is "Pending" and, -Consumer's Household Income - Subsidy and/or Household Income – CA Subsidy is "Pending" and, - Household Composition does not include an individual that is “Not Verified” for MAGI Medi-Cal Current Monthly Income, MAGI Medi-Cal Projected Annual Income, Household Income - Subsidy , and Household Income - CA Subsidy
Eligibility	General Requirement	48863	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall not display the Reasonable Explanation menu for the entire household via the Portal when there is a child that is reporting income greater than \$0 with an exception for the following scenario: - "Reasonable Explanation - Exchange configuration" is "ON" and, - the case is an Exchange Only household
Eligibility	General Requirement	48864	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall display a non-applying member on the Reasonable Explanation menu page if they have attested to greater than \$0 in income and have income which counts in the budget for an individual that is Conditionally Eligible/Pending to MAGI Medi-Cal/MCAP/CCHIP/Exchange due to Pending Income Verifications
Eligibility	General Requirement	48865	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall display a non-eligible member on the Reasonable Explanation menu page if they have attested to greater than \$0 in income and have income which counts in the budget for an individual that is Conditionally Eligible/Pending to MAGI Medi-Cal/MCAP/CCHIP/Exchange due to Pending Income Verifications
Eligibility	General Requirement	48866	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall determine an individuals' verification status for MAGI Medi-Cal Current Monthly Income and/or MAGI Medi-Cal Overridden Projected Annual Income as “Reasonably Explained” when 'Reasonable Explanation' is selected for the individual from the Portal and submitted and "Reasonable Explanation - Exchange" configuration is OFF
Eligibility	General Requirement	48867	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall determine an individual's verification status for MAGI Medi-Cal Current Monthly Income and/or MAGI Medi-Cal Overridden Projected Annual Income, Household Income - Subsidy , and Household Income - CA Subsidy as “Reasonably Explained” when a valid 'Reasonable Explanation' (not "other") is selected for the individual from the Portal and submitted and Reasonable Explanation - Exchange" configuration is ON
Eligibility	General Requirement	48868	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall protect a cached "E-Verified" or "Pass" verification status if the individual selects a "Reasonable Explanation" from the Portal.
Eligibility	General Requirement	48869	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall determine an individual's verification source as "REX" when a Reasonable Explanation is selected and submitted from the Portal
Eligibility	General Requirement	48870	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall maintain a consumer’s MAGI Medi-Cal Current Monthly Income and/or MAGI Medi-Cal Projected Annual Income verification status as “Pending” when “Other” is selected from “Reasonable Explanation” drop-down regardless if "Reasonable Explanation - Exchange" configuration is OFF or ON
Eligibility	General Requirement	48871	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall determine an individual's verification source as "REX-OTH" when Reasonable Explanation - Other is selected from the Portal and submitted
Eligibility	General Requirement	48872	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall create a BPM task for a CCA Admin to review the case when an individual in an Exchange Only Case selects "Other" from the Reasonable Explanation Drop-Down when the "Reasonable Explanation - Exchange" configuration is ON.
Eligibility	General Requirement	48873	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall maintain a consumer’s Household Income – Subsidy and Household Income – CA Subsidy verification status as “Pending” when “Other” is selected from “Reasonable Explanation” drop-down if "Reasonable Explanation - Exchange" configuration is ON
Eligibility	General Requirement	48874	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall create and display a new eligibility factor to notify a consumer that an Admin (CEW/CCA admin) is performing a review of the “Other” Selection from Reasonable Explanation.
Eligibility	General Requirement	48875	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall send or receive the Reasonable Explanation verification status in the EDR/DER/DER-U when 'Reasonable Explanation' is selected and submitted for a pending MAGI Medi-Cal income verification
Eligibility	General Requirement	48876	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall send or receive the actual “Reasonable Explanation” value in the EDR/DER/DER-U
Eligibility	General Requirement	48877	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall receive reasonable explanation details at a member level via SAWS EDR.
Eligibility	General Requirement	48878	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall create the following new EDR tags: rexOtherReason, rexVerifReason, rexVerifInd, rexVerificationResponseInterpretation, rexVerifTypes, and rexVerifType.
Eligibility	General Requirement	48879	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall create the following new DER tags: rexOtherReason, rexVerifReason, rexVerifInd, rexVerificationResponseInterpretation, rexVerifTypes, and rexVerifType.

Appendix A-4 - SOW Exhibit A - System Requirements Specification
(Extracted from CalHEERS RTM)

OTSI CalHEERS RFP #73040873 Addendum 1
October 31, 2025

Category	Sub Category	Req ID	Requirement
Eligibility	General Requirement	48880	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall determine eligibility based on the 'Reasonable Explanation' received in an EDR from SAWS access channel
Eligibility	General Requirement	48881	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall prioritize Admin Pass in an EDR if there is also Reasonable Explanation contained
Eligibility	General Requirement	48882	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall update the verification status for Household Income – Subsidy and Household Income – CA Subsidy as 'Reasonably Explained' when 'Reasonable Explanation' is received in an EDR for a "Pending" or "Not Verified" MAGI Medi-Cal CMI and/ or MAGI Medi-Cal PAI and Reasonable Explanation - Exchange configuration is ON.
Eligibility	General Requirement	48883	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall update the verification status for MAGI Medi-Cal Current Monthly Income and/or MAGI Medi-Cal Overridden Projected Annual Income as 'REX- Confirm' when the "REX-Confirm" that documents a CEW has reviewed and confirmed a prior selection of "Other" from Reasonable Explanation is received.
Eligibility	General Requirement	48884	CalHEERS shall maintain the verification status for MAGI Medi-Cal Current Monthly Income and/or MAGI Medi-Cal Overridden Projected Annual Income as "Pending" and update the verification source as "REX-Deny" when the "REX-Deny" that documents a CEW has reviewed and Denied a prior selection of "Other" from Reasonable Explanation is received via EDR.
Eligibility	General Requirement	48885	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall update the verification status for each applicable income attribute as 'REX- Confirm' when a SCR (CCA Admin)/admin user confirms reviews an "Other" selection from the Reasonable Explanation Menu via the Manual Verification Page for an Exchange Only Case.
Eligibility	General Requirement	48886	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall maintain the verification status of "Pending" with "REX-Deny" as the source for the applicable income attributes when a SCR (CCA Admin) reviews and denies the "Other" Selection from the Reasonable Explanation Menu via the Manual Verification Page by selecting "Deny REX"
Eligibility	General Requirement	48887	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall set the individual's verification source as "Admin" when an admin user accesses the manual verification page to either Confirm or Deny a consumer's "REX-Other" Selection.
Eligibility	General Requirement	48888	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall set the individual's verification source as "SAWS" when Reasonable Explanation is received and consumed from an EDR
Eligibility	General Requirement	48889	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall set the individual's verification source as "REX-OTH" when Reasonable Explanation - Other is received and consumed from an EDR
Eligibility	General Requirement	48890	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall always protect a cached "E-Verified" or "Admin Pass" response when an incoming EDR is received with Reasonable Explanation contained and discard the Reasonable Explanation
Eligibility	General Requirement	48891	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall always discard an existing "Admin Fail" and consume any Reasonable Explanation verification (Reasonably Explained, REX-Confirm, or Pending with REX-Other or REX-Deny as the source) when received in an incoming EDR.
Eligibility	General Requirement	48892	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall consume an "E-Verified" Hub response when a subsequent RAC is submitted and the individual was prior "Pending" verification status with "REX-Other" or "REX-Deny" verification source and a hub call is triggered which returns an "E-Verified" response
Eligibility	General Requirement	48893	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall "pull forward" or "lock in" a REX-Other when a subsequent RAC without an income change or SSN change is made and a hub call is triggered which returns a "Pending" response
Eligibility	General Requirement	48894	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall flush the REX-Other or REX Deny from the verification source when a subsequent RAC with an income change or SSN change is made and a hub call is triggered which returns a "Pending Response"
Eligibility	General Requirement	48895	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall flush the REX-Other or REX Deny from the verification source when a subsequent RAC with or without an income change or SSN Change is made and a hub call is made resulting in "Not Verified"
Eligibility	General Requirement	48896	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall have "Reasonable Explanation" as a verification status follow the same verification caching rules as "Admin Pass"
Eligibility	General Requirement	48897	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall create and display an alert/message/link on the consumer's Account Home Page, Eligibility Results Summary Page, and the Household Summary Page to direct them to the Reasonable Explanation Drop Down Menu if it is applicable to the consumers.
Eligibility	General Requirement	48898	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall align an individual's income verification status to Admin Pass, Reasonably Explained, or REX-Confirm when all other members in their household composition who have income have their pending income verified and the individual is determined eligible for MAGI Medi-Cal or Exchange Subsidy.
Eligibility	General Requirement	48899	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall capture the selection and submission of "Reasonable Explanation" via portal or receipt via EDR and the following BRE run that is triggered in the Change Log Table and the Case Transaction History
Eligibility	General Requirement	48900	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall capture the usage of a Reasonable Explanation in the Verification History Page
Eligibility	General Requirement	48901	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall continue to display the E-Verification Response and the E-Verification Response Date for the most recent HUB Response on the Personal Verification page when a subsequent admin verification or a Reasonable Explanation is received until the cache is cleared for that data element by an admin or a new electronic call is made
Eligibility	General Requirement	48902	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall create a new "Reasonable Explanation" Section on the Verification Response Module and populate Interpretation Text when a Reasonable Explanation verification is applied
Eligibility	General Requirement	48903	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall update the MCAP and CCHIP daily Extract report to include Reasonable Explanation "other" reason when available.
Eligibility	General Requirement	48904	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall trigger two Business Rules Engine (BRE) runs-- one for the current year and one for the future year-- when a consumer is accessing the Reasonable Explanation module menu during the renewals timeframe.
Eligibility	General Requirement	48905	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall ensure all Reasonable Explanation submissions are submitted for the current year when a consumer selects the future year Reasonable Explanation call-to-actions.
Eligibility	General Requirement	48906	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall use the same existing Admin verification hierarchy logic during California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) Renewals, RRC, and SAWS Renewals for the "Reasonable Explanation" and "REX-Confirm" statuses.
Eligibility	General Requirement	48907	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall create a new portal page/module to capture Reasonable Explanation attestations.
Eligibility	General Requirement	48908	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall group members on a given case by household composition on the new Reasonable Explanation page.

Category	Sub Category	Req ID	Requirement
Eligibility	General Requirement	48909	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall add a due date element in the Reasonable Explanation page.
Eligibility	General Requirement	48910	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall display the following dropdown values as possible Reasonable Explanation attestations: [Loss of job] [Decrease in job hours] [Fluctuating income] [Commission-based work] [Seasonal income] [Self-employment related reasons] [Change in marital status] [Household member moving in or out of house] [Homelessness] [Victim of identity theft] [Victim of natural disaster] [Intimate partner violence] [Other]
Eligibility	General Requirement	48911	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall allow users to enter a reason in a freeform textbox upon selection of "other" from the dropdown.
Eligibility	General Requirement	48912	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall continue to display the Reasonable Explanation module and call-to-actions after the due date has expired.
Eligibility	General Requirement	48913	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall no longer display the Reasonable Explanation menu for an individual if the individual is has already selected a Reasonable Explanation and is Reasonably Explained or Pending with REX-Oth for any of the income verification attributes (MAGI Medi-Cal CMI, MAGI Medi-Cal PAI, Household Income - CA Subsidy, Household Income - Subsidy).
Eligibility	General Requirement	48914	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) should display the Reasonable Explanation menu again if a consumer becomes Pending with REX-Deny for any of the income verification attributes (MAGI Medi-Cal CMI, MAGI Medi-Cal PAI, Household Income - CA Subsidy, Household Income - Subsidy).
Eligibility	General Requirement	48915	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall prioritize Admin Pass in an EDR if there is also Reasonable Explanation contained
Eligibility	Interfaces		
Eligibility	Interfaces	40578	During California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) Renewals (Passive and Active), California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall verify the attributes for Income using the following rules: -Use the RRV/FTB bulk verification data, if available. (RRV for IRS/SSA/VCI and FTB Bulk verification for FTB) -If RRV data is not available then call IRS/SSA/VCI (for the source where data is not available from RRV) - If FTB Bulk verification is not available then call the FTB real time API - If no responses are received from the income sources ("Not Verified") response, then use the admin verification if available
Eligibility	Interfaces	41414	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall update VIED to incorporate the Verify Current income request and response as part of RRV.
Eligibility	Interfaces	41415	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall enforce schema validations as provided in the XSD as provided by CMS for the H79 - Renewal and Redetermination Verification (RRV) Composite (bulk).
Eligibility	Interfaces	41416	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall ensure a transmission does not exceed 500 MB of uncompressed XML.
Eligibility	Interfaces	41417	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall use Escape Characters for the following XML characters within the request file: & (ampersand) as & < (less than) as < > (greater than) as > ' (Apostrophe) as ' " (quotation mark) as "
Eligibility	Interfaces	41418	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) to remove the leading and trailing spaces from the Name Fields (FN, LN, MN) applicable for VCI, SSA, IRS, and Non-ESI MEC services called as part of RRV.
Eligibility	Interfaces	41419	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall replace the First, Middle, Last Name containing only the special characters (`~!@#\$\$%^*()_+ -=[]{}<&\' ";:./?>.,) with "Unknown" so the record does not error out applicable for VCI, SSA, IRS, and Non-ESI MEC services called as part of RRV.
Eligibility	Interfaces	41420	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall not send any other special characters to CMS for all the Name Fields (FN, MN, LN) applicable for VCI, SSA, IRS, and Non-ESI MEC services called as part of RRV.
Eligibility	Interfaces	41421	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall persist the request and response made to the VCI-RRV Service in California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) DB.
Eligibility	Interfaces	41422	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall normalize VCI-RRV response received from CMS at Individual Level.
Eligibility	Interfaces	41423	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall ensure that RRV batch job should update INDV_ID and status details in RRV Tables
Eligibility	Interfaces	41424	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall update the Batch and Transmission Metadata to include VCI Manifest Data Elements in the Manifest File.
Eligibility	Interfaces	41425	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall consider record level response code of 2000 as not verified as the call is failed at the CMS Gateway for VCI-RRV service.
Eligibility	Interfaces	41426	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall consider record level response codes of 17004 as not having income from this source for VCI-RRV service.

Appendix A-4 - SOW Exhibit A - System Requirements Specification
(Extracted from CalHEERS RTM)

Category	Sub Category	Req ID	Requirement
Eligibility	Interfaces	41427	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall implement a re-try mechanism to re-generate the Request and Manifest files if error codes are received at File, Batch or Manifest Level.
Eligibility	Interfaces	41428	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall update Mock Services to simulate responses from the “Verify Current Income” RRV service in order to support testing.
Eligibility	Interfaces	41429	During California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) Renewals (Passive and Active, with consent on file), California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall populate the VCI response in DER-U when an updated VCI-RRV response is received for each individual if there is any change to case data elements/eligibility results/aid codes.
Eligibility	Interfaces	41430	During California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) Renewals (Passive and Active, with consent on file), California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall send DER-U with updated VCI-RRV response and set Exchange Informational Update Flag as “Yes” for cases where an updated VCI response is received and there is no change to case data elements/eligibility results/aid codes.
Eligibility	Interfaces	41431	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall send up to 12 months of Pay Period Information to SAWS in a DER-U via eHIT when an updated VCI-RRV response is received for each individual.
Eligibility	Interfaces	49420	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall trigger MEDS transactions for individuals determined Conditional Eligible for MCAP.
Eligibility	Notices		
Eligibility	Notices	38005	"The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System must have the functionality to send notices of action at intake, renewal, and RAC."
Eligibility	Notices	38994	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall generate and send a new Notices of Action (NOAs) to the beneficiaries (via the authorized representative's address provided by CDCR) who have applied for the MAGI State Inmate or MAGI State Medical Parole Programs.
Eligibility	Notices	38995	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall allow for single-month noticing for retroactive months of eligibility for the MAGI MCIEP State Inmate or MAGI MCIEP State Medical Parole Programs.
Eligibility	Notices	39003	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) system shall update the Eligibility Results page to include information for the consumer when they are ineligible to APTC/CSR due to indicating they are not planning to file their taxes.
Eligibility	Notices	39212	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall send Section 1557 non-discrimination verbiage with every outbound notice.
Eligibility	Notices	39213	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall generate the CalNOD11 when the consent for verification is equal to or less than 0 years.
Eligibility	Notices	39475	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall generate Failure to Reconcile (FTR) Action Notices for FTR Codes 007, 009, and 010 in the 12 Threshold languages.
Eligibility	Notices	39741	Text Updates for NOD01 per template version 01
Eligibility	Notices	39742	Text Updates for NOD38 per template version 01
Eligibility	Notices	39743	Text Updates for NOD63 per template version 03
Eligibility	Notices	39888	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall create new snippet for NOD01 to address the gap for cases/individuals found ineligible due to negative action received from SAWS.
Eligibility	Notices	39889	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall create a new snippet for NOD01 for cases denied for the current year when the consumer applied for the next year with a QLE during open enrollment.
Eligibility	Notices	39890	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall separate the notice from the 1095-A Form in NOD62A.
Eligibility	Notices	39891	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall dynamically populate the tax year in the notice for tax year 2020 and beyond.
Eligibility	Notices	39892	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall merge the NOD62A notice with the applicable 1095-A Form before uploading to the consumer's Documents & Correspondence page, mailing or e-mailing (uploading to Secure Mailbox).
Eligibility	Notices	39893	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall separate the notice from the 1095-A Form in NOD62B.
Eligibility	Notices	39894	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall dynamically populate the tax year in the notice for tax year 2020 and beyond.
Eligibility	Notices	39895	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall merge the NOD62B notice with the applicable 1095-A Form before uploading to the consumer's Documents & Correspondence page, mailing or e-mailing (uploading to Secure Mailbox).
Eligibility	Notices	39923	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall make language updates to snippet 883 for consumers who need to update consent.
Eligibility	Notices	39924	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall update the existing combined snippet 154 so that it triggers when the consumer is not in carry forward status and is ineligible to either APTC, CSR, California Premium Subsidy or QHP due to MEC determination received via attestation, admin fail, or hub response.
Eligibility	Notices	39925	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall create a new snippet for NOD01 to address the gap for cases/individuals found ineligible due to Soft Pause.
Eligibility	Notices	39926	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall trigger the NOD01c, irrespective of whether the Individual's information is successfully or unsuccessfully verified by the Hub.
Eligibility	Notices	40145	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall generate a single NOD01 when a transaction received from SAWS results in discontinuance for QHP/MCAP/CCHIP, even if there are subsequent 'continuing discontinuance' eligibility transactions that are received on the same day.
Eligibility	Notices	40146	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall ensure snippet 321 is generated when a QLE is not received from SAWS for consumers transitioning from MAGI Medi-Cal to Covered CA.
Eligibility	Notices	40147	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall trigger NOD69 for the newly added member in batch, if there is no subsequent denial or discontinuance for that member on the same day.
Eligibility	Notices	40148	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall make language updates to the NOD69 and the associated appeals page.
Eligibility	Notices	40149	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall suppress the snippets 911, 912, and 913 when the consumer is in CFS.

Appendix A-4 - SOW Exhibit A - System Requirements Specification
(Extracted from CalHEERS RTM)

Category	Sub Category	Req ID	Requirement
Eligibility	Notices	40150	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall ensure the snippet 910 is suppressed when the consumer is in CFS.
Eligibility	Notices	40151	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall make language updates to NOD11.
Eligibility	Notices	40198	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall consolidate the annual batch for NOD11 to remove the separation of effectuated vs non-effectuated.
Eligibility	Notices	40199	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall make language updates to NOD61 A,B, & C
Eligibility	Notices	40200	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall update the NOD61 A, B & C to include the mini babel page and discontinue using the separate specific babel document.
Eligibility	Notices	40201	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall make language update to snippet 881.
Eligibility	Notices	40202	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall ensure the language updates made to snippet 881 populate on the NOD03.
Eligibility	Notices	40487	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall create and generate a new snippet for Covered CA eligibility section in the NOD01 for members who are Eligible/Conditionally eligible for California Premium Subsidy and ther California Premium Subsidy (Monthly) is \$0. "You meet the program eligibility requirements for California Premium Subsidy. Your household qualifies for \$0.00 per month. We based our decision on the household size and income you reported."
Eligibility	Notices	40488	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall suppress this snippet if snippet 775 is triggered.
Eligibility	Notices	40489	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall suppress snippet 910 and 910, if this new snippet is triggered.
Eligibility	Notices	40490	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall create and generate a new snippet for Covered CA eligibility section in the NOD01 for members who are Eligible/Conditionally eligible for APTC and ther APTC (Monthly) is \$0 AND/OR Eligible/Conditionally Eligible for State Subsidy and State Subsidy (Monthly) is \$0. "If your household financial help amount is \$0.00, it is because the cost of the standard plan in your area is less than the maximum monthly amount you are expected to pay for a health plan. It could also be because you have received all the financial help your household qualifies for this year."
Eligibility	Notices	40491	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall suppress this snippet if snippet 775 is triggered.
Eligibility	Notices	40492	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall update the language for snippet 359 "You are eligible for health and dental plans through Covered California with up to \${TAX_CREDIT_AMOUNT} per month in premium assistance (a federal tax credit). This can be used to lower your household's health plan premium (monthly cost). We based this decision on the household size and income you reported (\${CCA_ANNUAL_INCOME} for the year. However, you do not qualify for cost-sharing reductions (lower co-payments and deductibles) because your household income is over the limit for this program. "
Eligibility	Notices	40493	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall update the trigger conditions for snippet 359 to generate when the consumer is eligible to APTC/CCP and not eligible to CSR.
Eligibility	Notices	40494	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall suppress/remove snippet 360.
Eligibility	Notices	40495	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall update the language for snippet 376 "You do not qualify for cost-sharing reductions (lower co-payments and deductibles) because your household income is over the limit for this program. "
Eligibility	Notices	40496	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall update the trigger conditions for snippet 372 to generate when the consumer is part of Primary tax filer's household, eligible/conditionally eligible for CCP and not eligible to APTC due to income limit.
Eligibility	Notices	40497	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall update the trigger conditions for snippet 910 to generate when a consumer is eligible for State Subsidy and State Subsidy (monthly) amount is greater then \$0.
Eligibility	Notices	40498	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall update the trigger conditions for snippet 911 to generate when a consumer is conditionally eligible for State Subsidy and State Subsidy (monthly) amount is greater then \$0.
Eligibility	Notices	40500	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall generate a new notice when a consumer is flagged by Periodic Data Matching for the following: - PDM Verification returns the consumer is eligible to Medicare Part A. - PDM Verification returns the consumer is 'Deceased'.
Eligibility	Notices	40501	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall generate NOD01c when source is "California Healthcare Eligibility, Enrollment and Retention System (CalHEERS)" and run reason is "Periodic Reverification."
Eligibility	Notices	40502	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall trigger snippet 169 in NOD01 when the run reason is Periodic Reverification.
Eligibility	Notices	40503	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall make language updates to NOD69.
Eligibility	Notices	40504	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall trigger NOD69, when enrollment changes are detected in a case, if there was no eligibility run that would trigger NOD01.
Eligibility	Notices	40505	CalHEERs shall trigger the most recent enrollment information in NOD69.
Eligibility	Notices	40506	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall update the language for ROP snippets
Eligibility	Notices	40507	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall update the trigger condition for snippets 910, 911, 912, and 913 so that it continues to trigger when the run reason is ROP batch.
Eligibility	Notices	40508	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall generate the correct County Contact Phone Number on the NOD01 and NOD64.
Eligibility	Notices	40509	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall generate snippet 917 for consumers with a non compliance reason.
Eligibility	Notices	40510	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall generate a new snippet for NOD01 for individuals who are denied or discontinued for CCHIP who are over the 322% FPL.
Eligibility	Notices	40511	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall suppress snippets 443, 718, 702 when snippet 480 generates.

Appendix A-4 - SOW Exhibit A - System Requirements Specification
(Extracted from CalHEERS RTM)

OTSI CalHEERS RFP #73040873 Addendum 1
October 31, 2025

Category	Sub Category	Req ID	Requirement
Eligibility	Notices	40512	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall generate a delegation notice to the Consumer's secure mailbox when an Accelerated Consumer Delegation Consent request is triggered with a successful OTP code.
Eligibility	Notices	40513	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall generate a delegation notice when Successful Delegation occurred through Accelerated Consumer Delegation Consent request.
Eligibility	Notices	40517	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall generate a delegation notice when Unsuccessful Delegation occurred through Accelerated Consumer Delegation Consent request.
Eligibility	Notices	40518	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall attach a copy of the delegation notice to the Consumer's documents & correspondence.
Eligibility	Notices	40519	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall generate a delegation notice to Enroller's secure mailbox when an Accelerated Consumer Delegation Consent request is submitted for a OTP code and DPL check found multiple cases within California Healthcare Eligibility, Enrollment and Retention System (CalHEERS).
Eligibility	Notices	40520	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall populate a snippet in the NOD01 for consumers who do not have an online account linked to their case.
Eligibility	Notices	40521	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall create and generate new snippet for Medi-Cal eligibility section in the NOD01 for members whose determinations are subject to "Eligibility Review", the potential eligibility status for MAGI Medi-Cal is "Discontinued" and there is any change to Covered CA eligibility for other members in the case: "You may qualify or continue to be eligible for Medi-Cal. The Medi-Cal office in your county will contact you if they need more information. You will get a separate notice about your eligibility for Medi-Cal. If you have already received a notice about your Medi-Cal eligibility, please disregard this message."
Eligibility	Notices	40522	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall create and generate a new snippet for Covered CA eligibility section in the NOD01 for members whose MAGI MC determinations are subject to "Eligibility Review", the potential eligibility status for MAGI Medi-Cal is "Discontinued" and current Covered CA eligibility status is IE/DS.
Eligibility	Notices	40523	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall add snippets for enrollment information, which if available will be printed on CalNOD01, when generated. - Plan/Carrier Name - Enrollment Effective Start Date - Enrollment Effective End Date - Plan/Enrollment Status - Premium Amount
Eligibility	Notices	40524	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall make the determination to generate the NOD01 (abc) 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 change to Covered CA eligibility for other members in the case.
Eligibility	Notices	40525	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall make the determination to skip the NOD01 (abc) when all members in the case are subject to "Eligibility Review" and the potential eligibility status for MAGI Medi-Cal is "Discontinued".
Eligibility	Notices	40560	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall create and generate a new snippet under the introduction section of NOD01 for all cases that have their eligibility redetermined by the the 2021 Stimulus Batch. "The American Rescue Plan (2021 federal stimulus package) expanded financial help and lowered the cost of health insurance through Covered California. We checked your eligibility to see if you qualify for more or new financial help beginning {Eligibility_Start_Date}. If you are enrolled in a health plan, we applied the maximum amount of financial help you may qualify for. We have sent this information to your health insurance company to make updates to your bill, if needed."
Eligibility	Notices	40675	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall update language and notice formatting on the NOD12A and D.
Eligibility	Notices	40676	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall adjust the placement of the 'Changes you may need to report' table.
Eligibility	Notices	40677	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall trigger a renewal notice for consumers who are eligible in the current year and not enrolled.
Eligibility	Notices	40764	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall update triggering conditions for NOD38.
Eligibility	Notices	40765	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall update the name variable information to include suffix for members in Carry Forward Status on the NOD64.
Eligibility	Notices	40766	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall update language on the NOD64.
Eligibility	Notices	40767	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall generate 3895 notices & tax forms based on the newly identified notice/form/instruction order. Example, CalNOD62 for 1095 & 3895 should appear as follows: 1. Cover letter 2. Form for Jan-March 2021 enrollment 3. Form for June-July 2021 enrollment 4. Form for Oct-Dec 2021 enrollment 5. Instruction's page 6. FAQ 7. Section 1557 8. Babel Page
Eligibility	Notices	40768	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall generate the 1095 & 3895 forms chronologically for each benefit year.
Eligibility	Notices	40769	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall generate CalNOD64 only once for a case at the initial determination of Carry Forward status.
Eligibility	Notices	40770	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall update snippet 897 language and placement in the NOD01.
Eligibility	Notices	40771	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall update trigger conditions and language on the NOD01 for snippets 900, 354, 882, 330 and 261.
Eligibility	Notices	40772	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall create a new snippet for the 'Questions?' content to populate when the triggering conditions of snippet 900 are not met.
Eligibility	Notices	40773	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall update the trigger conditions for snippet 786 so it is populated in the notice all year including during SEP.

Appendix A-4 - SOW Exhibit A - System Requirements Specification
(Extracted from CalHEERS RTM)

Category	Sub Category	Req ID	Requirement
Eligibility	Notices	40774	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall add the additional 4 digits to the zip code (zip code + 4 digits) to California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) notices.
Eligibility	Notices	40775	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall add the suffix to the consumer name on the NOD70A/B notices.
Eligibility	Notices	40776	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall update the NOD01 (Snippet 923) and NOD69 notices to display the CA subsidy payment for the CA premium credit amount.
Eligibility	Notices	40802	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall update language on the NOD01 for snippet 923.
Eligibility	Notices	40803	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall remove the 'Date_Generated' variable from snippet 923 for the NOD01.
Eligibility	Notices	40907	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall update all identified snippet translations to the correct language format.
Eligibility	Notices	40908	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall update snippet 881 for the Hmong threshold language to correct the word "Dam" to 'Daim' in the snippet.
Eligibility	Notices	40909	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall update translated text for NOD01 threshold languages for the following snippets: 829, 885, 899, 238, 359 and 878.
Eligibility	Notices	40910	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall update NOD01 snippet 775, 829, 912, 918, 917 translations for the Hmong language to correct language errors.
Eligibility	Notices	40911	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall update NOD70b for the Hmong language to correct language errors.
Eligibility	Notices	40912	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall update NOD01 snippet 434 translations for the Vietnamese language to correct language errors.
Eligibility	Notices	40913	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall ensure the State is populated on the NOD61 notices.
Eligibility	Notices	40914	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall ensure all snippets containing monetary variables accurately display two decimal places in the cents position when the second decimal is a zero.
Eligibility	Notices	40915	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall update NOD62a/b/c/d, NOD01ab/c, NOD69, NOD61a/b/c, NOD64, NOD63 and related documentation with the corrected babel page reflecting the updated language for the Punjabi, Chinese, Korean, Tagalog, Hmong, and Thai threshold languages.
Eligibility	Notices	40916	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall update snippet 885 (proof chart) to ensure table does not split in threshold languages.
Eligibility	Notices	40917	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall update text for all threshold languages on the NOD62C original notice.
Eligibility	Notices	40918	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall update text for all threshold languages on the NOD62A original notices.
Eligibility	Notices	40919	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall update text for all threshold languages on the NOD62B correction/void notices.
Eligibility	Notices	40920	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall update text for all threshold languages on the NOD62D correction/void notices.
Eligibility	Notices	41028	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall update the triggering logic for snippet 786. Snippet 786 should trigger when a consumer is CE for QHP and either - the consumer is not eligible for APTC/CSR OR -the consumer is conditionally eligible for CSR, and -the consumer is not eligible for APTC
Eligibility	Notices	41029	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall update the snippet order for snippet 369 to appear below the denial reasons.
Eligibility	Notices	41078	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall generate CalNOD62A/C along with the 2021 IRS and FTB Forms so they can be sent to the print vendor for print and mailing.
Eligibility	Notices	41079	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall generate CalNOD62B/D along with the 2021 IRS and FTB Forms so they can be sent to the print vendor for print and mailing.
Eligibility	Notices	41080	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall generate 1095 & 3895 notices & tax forms in tandem for a household.
Eligibility	Notices	41081	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall list benefit coverage dates chronologically for the same plan on the IRS/FTB Forms.
Eligibility	Notices	41082	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall update language and trigger conditions on the NOD69. NOD69 must generate only when there is a change in the following trigger conditions: - Carrier Name - Plan Name/Plan Type - APTC Amount/CAPS Amount - Gross Premium - Net Premium - When a new enrollee is added
Eligibility	Notices	41083	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall remove the 'Date_Generated' variable from the NOD69.
Eligibility	Notices	41270	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall update NOD01 with a new snippet to comply with consumer disclosure requirements of the Fair Credit Reporting Act.

Category	Sub Category	Req ID	Requirement
Eligibility	Notices	41271	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall make the determination to generate the NOD01 (ab)/c if an eHIT EDR is received from the SAWS access channel, irrespective of the run reason, AND one of the following conditions apply: * Households with 1 or more members who are eligible/conditionally eligible/discontinued for CCP, APTC, California Premium Subsidy, CSR, MCAP, CCHIP programs * At least one applying member in a household is ineligible for all of the following: CCP, APTC, California Premium Subsidy, CSR, MCAP, CCHIP and MAGI Medi-Cal AND The eligibility benefit month is greater than or equal to the eligibility run month * Results in a change of eligibility to CCP, APTC, California Premium Subsidy, CSR for at least 1 member of the household from the previously sent or queued to be sent NOD01. * 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” and there is a change to Covered CA eligibility for other members in the case
Eligibility	Notices	41272	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall first print Address line 2 followed by Address line 1 in all the notices so that bulk readers can read them correctly.
Eligibility	Notices	41273	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall generate NOD01, NOD03 and NOD69 in Punjabi and Hindi languages when selected for written language preferences.
Eligibility	Notices	41274	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall update Appeals language in the notices.
Eligibility	Notices	41275	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall create a new CCA denial snippet in NOD01 for MCAP eligible consumers when consumers are eligible for MCAP and above MAGI income limits.
Eligibility	Notices	41276	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall update snippet 917 for negative action when they are denied only financial help and are still eligible for CCA unsub.
Eligibility	Notices	41277	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall update NOD03, NOD11a, NOD12a/d/e, NOD70a/b, NOD72a/b and NOD73 and related documentation with the corrected babel page reflecting the updated language for the Chinese, Korean, Tagalog, Hmong, Thai, and Punjabi threshold languages.
Eligibility	Notices	41278	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall update the NOD11 page numbers to display only the page number.
Eligibility	Notices	41279	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall generate a new snippet for consumers that do not have an SEP end date.
Eligibility	Notices	41280	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall update trigger for snippet 900.
Eligibility	Notices	41515	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall deprecate all Notice snippet language referencing premiums for MCAP, CCHIP and OTLICP.
Eligibility	Notices	41516	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall make the deprecation of Notice snippet language configurable.
Eligibility	Notices	41520	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall update NOD01 snippet table variable "{MCAP DUE DATE}" to change the number of days required to submit documentation from 23 to 17 days.
Eligibility	Notices	42952	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall generate a NOD02 if there is a change in MAGI Medi-Cal eligibility between the month prior to the benefit month of evaluation and the benefit month evaluated. A change in MAGI Medi-Cal eligibility for NOD02 is defined if one of the following combinations of conditions are met: - condition A OR - condition B and C or D OR - condition C OR - condition D Conditions: A) The run reason is 'RE' or 'RM' with a disposition and no notice for renewals has previously been generated. B) The run reason is 'RE' or 'RM' with a disposition and a notice for renewals has previously been generated. C) A change in Eligibility Status for Medi-Cal: Pending to Eligible or Conditionally Eligible or Ineligible Eligible or Conditionally Eligible to Ineligible Eligible or Conditionally Eligible to Discontinued Ineligible to Eligible or Conditionally Eligible Discontinued to Eligible or Conditionally Eligible D) Any change in Eligibility Scope for Medi-Cal.
Eligibility	Notices	42953	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall send only one NOD02 notice per new or change in eligibility determination when: a) An initial eligibility determination is made, OR b) an eligibility redetermination is made, AND c) there are one or more changes in eligibility for any member within the household since the previous eligibility determination.
Eligibility	Notices	42978	When a disposition is received for a MAGI or mixed household with multiples months of eligibility, California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) must determine if there is any change in MAGI eligibility for any MAGI member for any of the months received.
Eligibility	Notices	42987	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) NOD02 shall only display the earliest effective date for the eligibility determination when the benefit month determined is equal to or following the month of application.
Eligibility	Notices	42988	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall generate a notice (NOD02) when the benefit month determined is on or after the month of application and there is a change in eligibility for any member in a household, following an eligibility redetermination, after a disposition is received from SAWS.
Eligibility	Notices	43037	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall generate a notice for the benefit month of the eligibility determination (NOD02) when the benefit month for determination is prior to the month of application.

Category	Sub Category	Req ID	Requirement
Eligibility	Notices	43038	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall generate a NOD01c for each eligibility determination made from the SAWS Channel for the current benefit month by case.
Eligibility	Notices	43319	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall generate NOD02 notices (under the NOD02 California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) NOA framework requirements implemented prior to 16.2 release) from dispositions received from SAWS for eligibility determinations made prior to the deployment of Phase 1 (16.2 release) until < three months after the deployment of 16.2 release>).
Eligibility	Notices	43320	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall track NOD02 Notice transactions (NOD02 NOAs received from SAWS as well as NOD02 NOAs generated by California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) up to three months after the last NOD02 notice is generated by California Healthcare Eligibility, Enrollment and Retention System (CalHEERS)) through California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) production system-monitoring operational reports.
Eligibility	Notices	45947	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall update the Triggering Conditions for Snippet Id- 436.
Eligibility	Notices	46252	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall create a process to generate a supplemental notice insert (content previously known as buck slip), that can be run on demand for an active notice with configuration ON/OFF.
Eligibility	Notices	46255	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) will allow specific admin users to upload notice insert across each category (NOD01ab/ NOD01c/NOD01T)within a Notice type
Eligibility	Notices	46256	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall have the capability to generate the supplemental notice insert such that the insert could be in full color/gray scale as part of image upload feature.
Eligibility	Notices	46257	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall have the capability to generate the supplemental notice insert in all the languages supported by California Healthcare Eligibility, Enrollment and Retention System (CalHEERS).
Eligibility	Notices	46259	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall have the option of positioning the supplemental notice insert to the front or back of a notice.
Eligibility	Notices	46260	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall only allow the supplemental notice insert to be printed on a single or double page on a full size sheet of paper.
Eligibility	Notices	46261	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall allow the supplemental notice insert to be in the package of more than one notice.
Eligibility	Notices	46262	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall add system functionality to be able to upload a supplemental notice insert along with the original notice to the consumers account under Documents and Correspondence page and/or Secure mailbox.
Eligibility	Notices	46264	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall expand the functionality of an Admin Notice (NOD00) to be generated in all the supported languages.
Eligibility	Notices	46268	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall include the short version of the babel page and the non-discrimination 1557 language in the Admin Notice.
Eligibility	Notices	46269	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall enhance the Admin Notice functionality to add full color/gray scale as part of image upload feature.
Eligibility	Notices	46274	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall require that the admin user actively select whether the Admin Notice should be printed in Color or Grayscale.
Eligibility	Notices	46279	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall save the previously entered information in the Admin Notice screen until the Admin Notice is sent.
Eligibility	Notices	46282	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall add system flexibility to the process of holding and releasing notices independently of each other for all applicable notices.
Eligibility	Notices	46283	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall allow admin users to Hold Release Notices across each category (NOD01AB or NOD01c) within a Notice type
Eligibility	Notices	46284	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall display all generated notice(s) for a particular category (E.g.: NOD01 AB) under Docs Correspondence for a case configured under HOLD list for that particular category (E.g.: NOD01 AB) until admin releases the notices
Eligibility	Notices	46285	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall not mail or email any generated notice(s) for a particular category (E.g.: NOD01 AB) to the consumer for a case configured under HOLD list for that particular category (E.g.: NOD01 AB) until admin releases the notices
Eligibility	Notices	46456	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall develop a process to suppress NOD01 for the following population criteria: SAWS EDR transaction has been received for a case AND At least one member is currently transitioning from Medi-Cal to CCA (MCT) AND All applying members are MCTs AND All applying members have received negative action for "Failed to Complete Determination," "Failed to Complete Redetermination," or any non-compliance reason AND All members are now eligible for only unsubsidized CCP
Eligibility	Notices	46587	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall continue to generate Supplement Insert across a particular category (E.g.: NOD01 AB) for a case configured under that particular category (E.g.: NOD01 AB) until admin updates the Insert configuration to OFF
Eligibility	Notices	46596	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall allow admin users to Suppress Notices across each category within a Notice type
Eligibility	Notices	46598	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall create a new screen that will be accessible by specific admin users for following business processes - 1. Add Supplement Notice Insert for all active categories 2. HOLD/Release Suppress Notices for all active categories 3. Add content for Admin Notice 4. Add content for Box Snippet
Eligibility	Notices	46599	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) Admin Users shall navigate to the new Notices page through the Management dropdown on the Admin home page.
Eligibility	Notices	46600	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall allow the admin user to select a Clear All button which will return selections to the default state and clear any uploaded images or case lists.
Eligibility	Notices	46903	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall update the renewal due date in NOD12ad from 30 days to 15 days and the renewal due date will be calculated as NOD12 generation date + 15 days.
Eligibility	Notices	46904	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall update the renewal due date from 30 days to 15 days for the NOD12, Annual Open Enrollment Notice, batch job.

Category	Sub Category	Req ID	Requirement
Eligibility	Notices	46905	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall populate the Renewal due date on the consumer home page with the Renewal Mode Start Date + 15 days when: - the case is moved into Renewal Mode, AND - the system date is still within Renewal Mode Start Date + 15 days, AND - NOD12 has not yet been generated
Eligibility	Notices	46906	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall populate the Renewal due date on the consumer home page with the Renewal End Date - 2 days when - the case is moved into Renewal Mode, AND - the system date is past the Renewal Mode Start Date + 15 days, AND - the NOD12 has not yet been generated.
Eligibility	Notices	49428	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall update the NOD01 and NOD03 snippets to populate for individuals who are Conditionally Eligible to MCAP rather than when they are Pending Eligible for MCAP.
Eligibility	Provider Directory - SHOP		
Eligibility	Provider Directory - SHOP	44353	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall provide provider directories for each plan selected for comparison and to search for a specific doctor or facility.
Eligibility	Provider Directory - SHOP	44354	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall show provider quality information within the provider directory as well as for the selected provider.
Eligibility	Reports		
Eligibility	Reports	42838	CalHEERS shall Suspend all NOD01c that would otherwise be generated when an EDR is received from SAWS for a Mixed Household
Eligibility	Reports	42839	CalHEERS must continue to generate the NOD01a when the IAPs application is initiated in SAWS and an EDR is received for a Mixed Household.
Eligibility	Reports	47038	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall develop a summary level monthly report to include data from the previous month. The report should only include the following three data points: -The count of all enrollments from the previous month. -The total count of enrollments in the previous month that have a financial difference in the amount of APTC between carriers and California Healthcare Eligibility, Enrollment and Retention System (CalHEERS). -The % of enrollments in the previous month that have a financial difference in the amount of APTC between carriers and California Healthcare Eligibility, Enrollment and Retention System (CalHEERS). -The date of the report
Eligibility	Shop & Compare		
Eligibility	Shop & Compare	48357	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall update the Shop and Compare tool to determine either the existing Permanent (Baseline) CSRs or the Temporary (Enhanced) CSRs for a benefit year based on the configuration setting for CSR program in the main application.
Eligibility	Verify Application Information		
Eligibility	Verify Application Information	39781	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall set no expiration dates for cached verifications for both administrative and electronic verifications for the following attributes when verification is required: Deceased, Incarceration, ESI-MEC, Non-ESI MEC, Income, Medicare.
Eligibility	Verify Application Information	39782	During California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) Renewals (Passive and Active), California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall verify the attributes for Deceased, Income, Medicare using the following rules: - Use the Renewal and Redetermination Verification (RRV) verification data, if available. - If RRV data is not available then use the Admin verification value - If Admin verification value is not available then call the hub
Eligibility	Verify Application Information	39785	During California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) Renewals (Passive and Active), California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall verify the attribute for Incarceration using the following rules: - Use the verification data from Incarceration Batch, if available. - If data from Incarceration Batch is not available then use the Admin verification value - If Admin verification value is not available then call the hub
Eligibility	Verify Application Information	39786	During reapplication, California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall use the cached verification for SSN if it has been e-verified and there is no change to impacted data elements.
Eligibility	Verify Application Information	39787	During reapplication, California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall use the cached verification for Citizenship, and Lawful Presence and not call VLP if they have been e-verified or admin verified and there is no change to impacted data elements.
Eligibility	Verify Application Information	39788	During reapplication, California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall use the cached verification (E-Verified or Admin Verified) for Deceased, Incarceration, ESI-MEC, Non-ESI MEC, Income, and Medicare and not call the service if there is a cached verification within the refresh cycle and there is no change to the impacted data elements.
Eligibility	Verify Application Information	39789	During reapplication, California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall call hub for Deceased, Incarceration, ESI-MEC, Non-ESI MEC, Income, and Medicare outside of the refresh cycle.
Eligibility	Verify Application Information	39790	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall always display all the verification attributes on the Personal Verification page.
Eligibility	Verify Application Information	39791	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall always display all the verification attributes in a static order on the Personal Verification page.

Appendix A-4 - SOW Exhibit A - System Requirements Specification
(Extracted from CalHEERS RTM)

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Category	Sub Category	Req ID	Requirement
Eligibility	Verify Application Information	40926	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall incorporate the VCI real-time service call into existing income verification functionality.
Eligibility	Verify Application Information	40928	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall follow the existing income verification caching rules (IRS, FTB, EDD, VCI,SSA) in VIED.
Eligibility	Verify Application Information	40929	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall apply existing reasonable compatibility rules to income values received from the real-time VCI service.
Eligibility	Verify Application Information	40930	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall update income verification caching rules to account for Maximum Call Counter and Refresh Cycle for the real-time VCI API.
Eligibility	Verify Application Information	40931	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall display VCI as a source in the Source column on the Personal Verification page when it is reasonably compatible.
Eligibility	Verify Application Information	40951	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall set the refresh cycle for the MEDS MEC Verification to 1 day.
Eligibility	Verify Application Information	40952	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall update the DVF01.16 to correctly state the conditions for resetting service counters to zero in the following text: "Note: Service Counters are reset to zero under the following conditions: A Cancel DER is sent to SAWS, Short Term Negative Action (STNA) is done, Case is closed in Portal".
Eligibility	Verify Application Information	40953	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall update the DHS verifications of Lawful Presence, QNC and 5YB as Not applicable and disable these fields on the Manual Verification page if the Citizenship verification from the DHS is equal to "Y" on the VLP response.
Eligibility	Verify Application Information	40954	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall not make a call to VLP when Lawful Presence, QNC and 5YB values are updated as Not applicable and disabled on the Manual Verifications page.
Eligibility	Verify Application Information	40955	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall apply a hierarchy for reasonable compatibility check for Household Income Subsidy verification as follows: 1. If the income returned from IRS + SSA is reasonably compatible for Household Income Subsidy then only use IRS for reasonable compatibility check and do not check for reasonable compatibility with other income sources (FTB,EDD,VCI) for Household Income Subsidy. 2. If the income returned from IRS is not reasonably compatible then continue to check with other income sources for reasonable compatibility. 3. If individual attests to \$0 of income, all income verification sources will be checked for reasonable compatibility and the hierarchy will not be followed.
Eligibility	Verify Application Information	40956	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall update the display of income sources verification codes to include SSA in the list of sources when SSA is used for checking reasonable compatibility.
Eligibility	Verify Application Information	40957	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall update the display of income sources verification codes to include SSA in the list of sources when SSA is used by other income sources in checking reasonable compatibility.
Eligibility	Verify Application Information	40958	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall add/update verification source codes that can be sent to SAWS in the eVerificationSource data element in DER/DER-U transactions to indicate the following additional income verification sources that include SSA: 1. FDSH : IRS to IRS : SSA 2. FDSH : FTB to IRS : FTB : SSA 3. FDSH : EDD to IRS : EDD : SSA 4. FDSH : FTB : EDD to IRS : FTB : EDD : SSA 5. EDD to EDD : SSA 6. FTB : EDD to FTB : EDD : SSA 7. FTB : SSA (added)
Eligibility	Verify Application Information	40959	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall add a new column "e-Verification Response Date" to the Personal Verification screen to display the verification response received date from the hub/services on the Personal Verification screen for all the run reasons.
Eligibility	Verify Application Information	40960	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall add a new data element to send the verification response received date from the hub/services on DER/DER-U transactions.
Eligibility	Verify Application Information	40961	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall update the run reason call logic in design document, DVF01.16, specific to Subsidized and Unsubsidized outcomes.
Eligibility	Verify Application Information	40962	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall add a new column "e-Verification Response" to the Personal Verification screen to display an interpretation of the verification response received from all the verification hub/services to clarify the verification status
Eligibility	Verify Application Information	40963	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall add a new column Error Code(s) under the Personal Verification screen to display the error code(s) along with the corresponding error code description received from the verification hub/services for each verification attribute
Eligibility	Verify Application Information	40964	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall send to SAWS a new eVerificationErrorCode data element for each error code received from the verification hub/services in a new eVerificationErrorCodes node on DER-U/DER transactions.
Eligibility	Verify Application Information	40965	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall send the interpretation of the verification response received from all the verification hub/services on DER/DER-U transactions
Eligibility	Verify Application Information	40966	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall send to SAWS a new eVerificationErrorCodeDescription data element for each error code received from the verification hub/services in a new eVerificationErrorCodes node on DER-U/DER transactions.
Eligibility	Verify Application Information	40967	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall maintain all self-attested values on the Personal Verification screen.
Eligibility	Verify Application Information	40968	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall display the 'Date of Death' on the Personal Verification screen when received from SSA during Periodic ReVerification.

Appendix A-4 - SOW Exhibit A - System Requirements Specification
(Extracted from CalHEERS RTM)

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Category	Sub Category	Req ID	Requirement
Eligibility	Verify Application Information	40969	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall display the "Date of Death" as read-only value on the Personal Verification screen page.
Eligibility	Verify Application Information	40970	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall send the "Date of Death" to SAWS via eHIT in the DER/DER-U as part of the eVerification node in the response interpretation element when this date is received from SSA during Periodic ReVerification..
Eligibility	Verify Application Information	40971	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall send the "Date of Death" to SAWS via eHIT in the DER/DER-U as part of the ManualVerification node when this date is received from SSA during Periodic ReVerification and the deceased verification is passed/failed.
Eligibility	Verify Application Information	40973	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall set a new EERC code "DD" on e-HIT transaction to SAWS when Date of Death is received from SSA from Periodic ReVerification.
Eligibility	Verify Application Information	40974	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall add clarification in DVF01.16 to call out when each verification service is invoked for each verification attribute.
Eligibility	Verify Application Information	40975	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall update a VLP Case to 'Closed' status if the error code HE001121 is being received during the retry batch.
Eligibility	Verify Application Information	40976	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall update Mock Service to mock VLP error code HE001121.
Eligibility	Verify Application Information	40977	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall consider an applying or non-applying dependent child, living with a Parent/Caretaker Relative as receiving MEC when SAWS sends an Admin Fail verification for MEC MEDS with a Negative action for the dependent child when evaluating the Parent/Caretaker Relative for the MAGI Medi-Cal New Adult Group.
Eligibility	Verify Application Information	40978	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall remove the 'Valid Until' column from the Personal Verification screen
Eligibility	Verify Application Information	40979	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall update the 'Verification end date' data element to not be sent on DER/DER-U transactions.
Eligibility	Verify Application Information	40980	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall evaluate document only update SIR 186019 to clearly call out admin pass/fail functionality for each verification attribute in IDD - Electronic Health Transfer and BRF 01.16 - Electronic Verification.
Eligibility	Verify Application Information	40981	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall update the headers of columns on the Personal Verification screen
Eligibility	Verify Application Information	40982	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall update the header "Attribute Description" to "Attribute" on the Personal Verification screen
Eligibility	Verify Application Information	40983	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall update the header "Verification Date" to "Verification Cached Date" on the Personal Verification screen
Eligibility	Verify Application Information	41026	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall update the header "Value" to "Attestation" on the Personal Verification screen
Eligibility	Verify Application Information	41287	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall not call identify member if the individual already has a CIN number.
Eligibility	Verify Application Information	41511	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall allow the Reasonable Compatibility threshold to be configured to be turned on or off for existing income verifications for MAGI Medi-Cal, MCAP, and CCHIP programs.
Eligibility	Verify Application Information	41512	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall allow the Reasonable Compatibility threshold amount for MAGI Medi-Cal, MCAP, and CCHIP programs to be modified for existing income verifications.
Eligibility	Verify Application Information	45650	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall enable clear verification checkbox on the Personal Verification page for consumers with immigration status of Lawful presence if their verification status is E-verified/Pass/Fail
Eligibility	Verify Application Information	45651	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall enable Clear Verification checkbox on the Personal Verification page for Lawful Presence when the existing DHS Case is closed or no DHS case is found (Admin verification) and when their verification status is E-verified/Pass/Fail
Eligibility	Verify Application Information	45652	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall disable the clear verification checkbox for Qualified Non Citizen and Five Year Bar Exempt/Five Year Bar Met
Eligibility	Verify Application Information	45653	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall enable Clear Verification checkbox on the Personal Verification page for Citizenship when the existing DHS Case is closed or no DHS case is found (Admin verification) and when their verification status is E-verified/Pass/Fail
Eligibility	Verify Application Information	45654	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall display 4-digit zipcode extension on the portal when the zipcode extension in an address begins with a "0"
Eligibility	Verify Application Information	45655	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall print the 4-digit zipcode extension on Notices when the zipcode extension of an address begins with a "0"
Eligibility	Verify Application Information	45656	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall fix the existing data in database to store all 4 digits of the zipcode extension
Eligibility	Verify Application Information	45657	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall assign M3 aid code to a parent or a primary caretaker if their household income is less than or equal to 109% FPL and the individual assumes primary responsibility for a dependent child under the age of 18 years, or in the case of a full-time student, under age 19 years and resides in the same residence as the primary caretaker.
Eligibility	Verify Application Information	45658	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall assign M4 aid code to a parent or a primary caretaker if their household income is less than or equal to 109% FPL and the individual assumes primary responsibility for a dependent child under the age of 18 years, or in the case of a full-time student, under age 19 years and resides in the same residence as the primary caretaker but does not meet citizenship or immigration Status requirements

Category	Sub Category	Req ID	Requirement
Eligibility	Verify Application Information	45659	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall display the MCAP snippet: "You must provide the following documents to begin or continue to receive coverage. [Required Document to Submit]" when an individual is pending for MCAP.
Eligibility	Verify Application Information	45660	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall display the "Upload documents" button for an individual pending for MCAP.
Eligibility	Verify Application Information	45661	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall return PregnancyInfo tag in the generated DER, when pregnancy end date is less than or equal to system date
Eligibility and Enrollment			
Eligibility and Enrollment	Appeal		
Eligibility and Enrollment	Appeal	38564	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall provide the functionality to adjust eligibility determination resulting from appeal.
Eligibility and Enrollment	Appeal	38582	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall provide the functionality to notify the applicant of adjusted eligibility based on a final adjudicated appeal decision.
Eligibility and Enrollment	Application Submission and Update		
Eligibility and Enrollment	Application Submission and Update	37865	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall provide the functionality to allow Assisters to submit an application on behalf of the consumer and the consumer's attestation of information provided.
Eligibility and Enrollment	Application Submission and Update	37905	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) system shall remove or modify the signature declaration page to capture updated self-attestation language.
Eligibility and Enrollment	Application Submission and Update	37927	"The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) systems shall apply the following new effective dates when an Eligible or Conditionally Eligible CCHIP consumer moves from one CCHIP county to another and continues to be Eligible or Conditionally Eligible to CCHIP: - Effective Start Date is the first of the month following the reported change in address; - Renewal Date is the last day of the month, 12 months from the Start Date "
Eligibility and Enrollment	Application Submission and Update	38067	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall provide the functionality to validate field level entry data based on field specified criteria (e.g. dates, address matches, completeness, etc.).
Eligibility and Enrollment	Application Submission and Update	38138	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) system shall direct consumers changing an income record or Projected Annual Income to the income summary page and require the consumer to confirm the change is correct, or require further edits to income entries.
Eligibility and Enrollment	Application Submission and Update	38189	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall provide the functionality to track the source of the application (e.g. California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) WEB Portal, SAWS, Service Center mail or phone, efax, email, in-person), including the geographic location of the in-person contact.
Eligibility and Enrollment	Application Submission and Update	38353	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall provide the functionality to notify an individual / consumer if an account already exist in real-time.
Eligibility and Enrollment	Application Submission and Update	38494	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall provide the functionality to communicate to consumer / applicant the ability to or need to correct or complete their online application via online portal.
Eligibility and Enrollment	Application Submission and Update	38529	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall have the ability to count shared income between Registered Domestic Partners and apply it when determining eligibility.
Eligibility and Enrollment	Application Submission and Update	38530	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall require a consumer who applies on their own and indicates they are a Registered Domestic Partner to add the other RDP before continuing the application.
Eligibility and Enrollment	Application Submission and Update	39110	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall enable users to view the consumer's latest submitted application information.
Eligibility and Enrollment	Application Submission and Update	39161	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall provide the functionality for consumers to select and update their account preferences for outbound communication methods (mail, email, phone).
Eligibility and Enrollment	Application Submission and Update	39163	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall provide the functionality for consumers to select and update their account preferences for plan selection criteria (providers, costs, medical usage and quality ratings.) which are currently part of the preferences page.
Eligibility and Enrollment	Application Submission and Update	39275	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall restore review (inquiry) navigation functionality to all pages within the application in the California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) Portal for all users.
Eligibility and Enrollment	Application Submission and Update	39276	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall restore a navigation menu to allow all users to navigate to sections or pages in the portal.
Eligibility and Enrollment	Application Submission and Update	39336	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall provide the functionality to track review status of individual documents that have been provided by the consumer as verification (e.g. verified, not verified, pending, etc.)
Eligibility and Enrollment	Application Submission and Update	39467	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall only accept current and future dates when the answer is "No" to the question "Has ____ already received this payment?" once the One-Time Lump Sum is entered.
Eligibility and Enrollment	Application Submission and Update	39468	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall only accept current and past dates when the answer is "Yes" to the question "Has ____ already received this payment?" once the One-Time Lump Sum is entered.

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Category	Sub Category	Req ID	Requirement
Eligibility and Enrollment	Application Submission and Update	39489	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall provide the functionality for consumers to bypass the application for subsidized health coverage and direct the consumer to Exchange QHP and / or qualified stand-alone dental plan screening questions only for anonymous shopping. California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall provide notice of availability and cost that will depend on program eligibility determination.
Eligibility and Enrollment	Application Submission and Update	39490	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall provide the functionality for an applicant to self-attest application data.
Eligibility and Enrollment	Application Submission and Update	39606	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall provide the functionality for an applicant to provide an online signature that complies with State and federal requirement standards and shall require an acknowledgement, under penalty of perjury, by the applicant or authorized person completing the application that the rights and responsibility related to the application process have been read and are understood.
Eligibility and Enrollment	Application Submission and Update	39632	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall have the functionality to invoke a duplicate user validation check based upon consumer's DOB and SSN when an intake application is being created by Sales Agents.
Eligibility and Enrollment	Application Submission and Update	39633	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall have the functionality, if the SSN is not available, or the combination of DOB and SSN match is not found, to invoke a secondary duplicate user validation check based upon consumer's name (First and Last), DOB, and one of the following: Residential Address (Line 1 and Zip Code) or a cell phone number, or an email address.
Eligibility and Enrollment	Application Submission and Update	39634	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall have the functionality for the duplicate user validation check to only include cases in active or inactive status, and exclude Medi-Cal Inmate Eligibility Program (MCIEP) cases.
Eligibility and Enrollment	Application Submission and Update	39635	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall have the functionality to display a message recommending Sales Agents to contact the Service Center if a duplicate individual is found in the system.
Eligibility and Enrollment	Application Submission and Update	39636	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall have the functionality to allow Sales Agents to continue with the application even if the duplicate individual is found.
Eligibility and Enrollment	Application Submission and Update	39637	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall have the functionality to invoke a duplicate user validation check based upon the consumer's DOB and SSN when an intake application is being created by consumers and authorized representatives.
Eligibility and Enrollment	Application Submission and Update	39638	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall have the functionality, if the SSN is not available, or the combination of DOB and SSN match is not found, to invoke a secondary duplicate user validation check based upon consumer's name (First and Last), DOB, and one of the following: Residential Address (Line 1 and Zip Code) or a cell phone number or an email address.
Eligibility and Enrollment	Application Submission and Update	39639	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall have the functionality for the duplicate user validation check to only include cases in active or inactive status, and exclude Medi-Cal Inmate Eligibility Program (MCIEP) cases.
Eligibility and Enrollment	Application Submission and Update	39640	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall have the functionality to display a message indicating that the consumer may be known to California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) if a duplicate individual is found.
Eligibility and Enrollment	Application Submission and Update	39641	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall have the functionality to allow consumers and authorized representatives to continue with the application even if the duplicate individual is found.
Eligibility and Enrollment	Application Submission and Update	39748	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall collect and store the COVID-19 Unemployment Insurance Benefit Stimulus Payments.
Eligibility and Enrollment	Application Submission and Update	39861	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall provide the functionality for a family to apply for different Health Insurance Affordability Programs for different family members.
Eligibility and Enrollment	Application Submission and Update	40009	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall provide the functionality to download and print an application with pre-populated information if consent is provided (or blank if consent is not provided) for an applicant to apply for full health care coverage or other non-health services.
Eligibility and Enrollment	Application Submission and Update	40010	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall provide the functionality to download and print an application, with pre-populated information if consent is provided, for an applicant to apply for Health Insurance Affordability Programs and Non Subsidized Coverage.
Eligibility and Enrollment	Application Submission and Update	40011	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall provide the functionality to download and print a blank application, for Health Insurance Affordability Programs and Non Subsidized Coverage.
Eligibility and Enrollment	Application Submission and Update	40012	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall provide the functionality to link consumer to additional information for an applicant to apply for other non-health services.
Eligibility and Enrollment	Application Submission and Update	40116	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall provide the functionality to track the progress / status of the receipt of documentation received with the initial application or after the initial application date.
Eligibility and Enrollment	Application Submission and Update	40118	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall provide the functionality to track the progress / status of receipt of alternate documentation from the initial application date and notify the consumer, and Assister or Eligibility Administrator of pending deadlines.
Eligibility and Enrollment	Application Submission and Update	40119	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall provide the functionality to notify the consumer and Assister or Eligibility Administrator of pending deadlines.
Eligibility and Enrollment	Application Submission and Update	40256	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall provide the functionality to process cases with application exceptions and/or discrepancies where manual review or intervention is required.
Eligibility and Enrollment	Application Submission and Update	40353	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall provide the functionality to update manually individual citizenship or lawful presence and document the substantiation.
Eligibility and Enrollment	Application Submission and Update	40470	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall provide the functionality to electronically store all documents submitted (viewable image) with an application or for verification of application data with the consumers account/application.
Eligibility and Enrollment	Application Submission and Update	40698	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall provide the functionality for a consumer to securely log into the Web Portal to access and view their personal information and received notices.

Appendix A-4 - SOW Exhibit A - System Requirements Specification
(Extracted from CalHEERS RTM)

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Category	Sub Category	Req ID	Requirement
Eligibility and Enrollment	Application Submission and Update	41077	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall not allow user to submit an application/case with duplicate SSN from HBX screens when the user enters or updates the SSN from “Flexible Admin View” and after clicking the “Save and Exit” button, the user submits the application/case from “Consumer View.”
Eligibility and Enrollment	Application Submission and Update	41084	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall provide the functionality to allow applicants and Assisters to view the status of their application via the Web Portal when additional verification is necessary.
Eligibility and Enrollment	Application Submission and Update	41260	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall withdraw any Initial unsubmitted Open Enrollment application the day after Open Enrollment Period ends or application date + 31 days, whichever is later, when a user accesses the Account Home page.
Eligibility and Enrollment	Application Submission and Update	41261	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall display the application expiration date for in-progress/intake applications initiated during Open Enrollment period as the application start date + 30 days or Open Enrollment end date, whichever is later.
Eligibility and Enrollment	Application Submission and Update	41263	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall update the in-progress/intake application expiration date for the Continue or Exit Application modal during the Open Enrollment Period to be the last date of Open Enrollment or application start date + 30 days, whichever is later.
Eligibility and Enrollment	Application Submission and Update	41264	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall not withdraw any initial unsubmitted application during Special Enrollment Period after 30 days from the application start date (Application Start Date + 31 Days) when a user accesses the Account Home page.
Eligibility and Enrollment	Application Submission and Update	41265	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall display the in-progress/intake application expiration date during the Special Enrollment Period as last day of the current benefit year if the expiration date is in the future benefit year and the user accesses Account Home Page in the current year.
Eligibility and Enrollment	Application Submission and Update	41266	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall display the in-progress/intake application expiration date during the Special Enrollment Period as application start date + 30 days if the expiration date is in the future benefit year and an Admin user accesses the Account Home Page in the next benefit year.
Eligibility and Enrollment	Application Submission and Update	41293	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall display admin fields on the Special Enrollments page to Agents initiating or modifying consumer applications if the system date is greater than the Open Enrollment End Date and less than or equal to the Over the Finish Line date.
Eligibility and Enrollment	Application Submission and Update	41365	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall provide the functionality to track and record the timeframes for the receipt of application, request for verification, and receipt of data/document verification per program based upon the business rules for those programs
Eligibility and Enrollment	Application Submission and Update	41488	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall provide the functionality to record individual preferences for desired language for written and spoken communication and communication methods such as mail, email, telephone, and text.
Eligibility and Enrollment	Application Submission and Update	41585	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall provide the functionality to collect optional voluntary demographic data categories such as ethnicity, primary language, disability status, and other categories recognized by Secretary of Health and Human Services and as determined by the Exchange or program policies.
Eligibility and Enrollment	Application Submission and Update	41741	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall provide a statement that the optional voluntary demographic and any health status information are collected to improve the quality of care.
Eligibility and Enrollment	Application Submission and Update	41830	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall provide the functionality to allow an applicant to consent to have their form prepopulated with available data which can be revised or deleted.
Eligibility and Enrollment	Application Submission and Update	41928	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall provide the functionality for an applicant to withdraw their application at any time prior to Program Eligibility.
Eligibility and Enrollment	Application Submission and Update	41929	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall provide the functionality to inform an applicant of the penalty for failure to have minimum essential health coverage.
Eligibility and Enrollment	Application Submission and Update	42084	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall provide the functionality for an applicant to attach / upload required documentation with their application when completing on the Web Portal.
Eligibility and Enrollment	Application Submission and Update	42163	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall provide the functionality to download and print individual pages or a complete application from the Web Portal.
Eligibility and Enrollment	Application Submission and Update	42164	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall provide the functionality to download and/or print a complete application from the Web Portal.
Eligibility and Enrollment	Application Submission and Update	42165	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall provide the functionality to print individual pages from the Web Portal.
Eligibility and Enrollment	Application Submission and Update	42258	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall withdraw any Initial unsubmitted Open Enrollment application the day after Open Enrollment Period ends or application date + 31 days, whichever is later, via a nightly batch process
Eligibility and Enrollment	Application Submission and Update	42259	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall not withdraw any initial unsubmitted application during Special Enrollment Period after 30 days from the application start date (Application Start Date + 31 Days) when a user accesses the Account Home page.
Eligibility and Enrollment	Application Submission and Update	42522	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall automatically save data entered into the application.
Eligibility and Enrollment	Application Submission and Update	42632	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall provide the functionality via the Web Portal to present and receive applicant data per the single streamlined application for non-subsidized or subsidized health coverage.

Category	Sub Category	Req ID	Requirement
Eligibility and Enrollment		42664	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall capture the following income types for program eligibility determination: Work Self-Employment Social Security Benefits Unemployment Retirement/pension Capital gains Rental or royalty income farming or fishing income Alimony Received Cancelled Debts Court Awards Jury Duty Pay Miscellaneous Interest income (taxable and non-taxable), 1099-INT Ordinary/qualified dividends, 1099-DIV Taxable refunds, credits, or offsets of state/local income taxes Other gains (or losses), Form 4797 Railroad retirement benefits (taxable and non-taxable), RRB-1099 Foreign Earned Income (taxable and non-taxable), Form 2555 Income from American Indian or Alaska Native Sources AmeriCorps State/National Stipend and Education Award AmeriCorps National Civilian Community Corps Stipend and Education Award AmeriCorps Vista Stipend and Educational Award Education scholarships, awards, and fellowship grants used for living expenses Education scholarships, awards, and fellowship grants not used for living expenses
Eligibility and Enrollment	Application Submission and Update	42853	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall provide the functionality to scan any mailed applications or verification documents, and link, track and route for processing any scanned, faxed, or emailed applications or verification documents. In order to properly link, track and route documents for processing, California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) will have the functionality to categorize each document into different 'media types.' Examples of different 'media types' include Application, Annual Eligibility Redeterminations, Open Enrollment, Special Enrollment, Appeals, etc.
Eligibility and Enrollment	Application Submission and Update	43056	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall provide the functionality to obtain a unique Client Identification Number (CIN) from the Statewide Client Index (SCI) in real-time for each family member listed on the application (using required application data such as SSN, date of birth, address, and complete name).
Eligibility and Enrollment	Application Submission and Update	43229	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall provide the functionality to identify Assisters if they are completing applications on behalf of an individual.
Eligibility and Enrollment	Application Submission and Update	43257	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall message consumers in the Eligibility Results page who are determined eligible for APTC/CSR who also meet the MCAP eligibility criteria
Eligibility and Enrollment	Application Submission and Update	43263	"The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) application shall be updated with all the MCAP program information where needed on the following pages: - Program Eligibility by Person - Enrollment Introduction (Initial, Report a Change, Renewal) - Enrollment Summary (Initial, Report a Change, Renewal) - Get Help With Costs - Eligibility Results - Application Signature (Initial, Report a Change, Renewal) - Terminate Participation - Budget Worksheet - Preview Plans "
Eligibility and Enrollment	Application Submission and Update	43265	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall update the Preview Plans tool to remove references to AIM and replace them with MCAP as a California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) program
Eligibility and Enrollment	Application Submission and Update	43266	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall update the fact sheet link on the Preview Plans page to direct the consumer to the following URL: <URL TBD>.
Eligibility and Enrollment	Application Submission and Update	43268	"The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall not display MCAP program ineligibility status to consumers who are found Eligible, Conditionally Eligible, or Pending Eligible for full-scope MAGI Medi-Cal AND do not meet the following criteria: - Female and pregnant"
Eligibility and Enrollment	Application Submission and Update	43278	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall allow MAXIMUS staff to access case information, manage verifications and report changes via California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) portal for MCAP consumers

Appendix A-4 - SOW Exhibit A - System Requirements Specification
(Extracted from CalHEERS RTM)

Category	Sub Category	Req ID	Requirement
Eligibility and Enrollment	Application Submission and Update	43327	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall allow consumers and administrative users to request discontinuance from the CCHIP program from California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) portal.
Eligibility and Enrollment	Application Submission and Update	43331	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall have the ability for administrative users to discontinue CCHIP consumers for non-payment of premium via the California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) portal.
Eligibility and Enrollment	Application Submission and Update	43332	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall have the ability for administrative users to certify that a first payment was received by a CCHIP consumer.
Eligibility and Enrollment	Application Submission and Update	43343	"The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall not display CCHIP program ineligibility status to consumers who do not meet the following criteria: - Children from 0 to 19 years old, AND/OR - Children who are residing in one of the CCHIP counties "
Eligibility and Enrollment	Application Submission and Update	43378	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall allow CCHIP staff to manually update renewal date, enrollment date and add the CCHIP case number into the California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) portal.
Eligibility and Enrollment	Application Submission and Update	43380	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall host the CCHIP Fact sheet in the ECM and link to it from the Anonymous Screening page.
Eligibility and Enrollment	Application Submission and Update	43381	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall update the California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) portal pages where there is existing information of the programs that are currently offered within the system.
Eligibility and Enrollment	Application Submission and Update	43382	"The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall include the CCHIP program eligibility on the Eligibility Results page that includes: - Eligibility status - Outstanding verifications (Direct to SCRs or upload - no to the County Health Plan) - Reasons for Eligibility/Ineligibility - Contact the County Health Plan for enrollment"
Eligibility and Enrollment	Application Submission and Update	43383	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall update the Anonymous Screening tool to include CCHIP as a California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) program.
Eligibility and Enrollment	Application Submission and Update	43384	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall include the CCHIP program information screen on the Anonymous Screening tool.
Eligibility and Enrollment	Application Submission and Update	43385	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System must provide the functionality to require the Consumer to enter their email address twice to confirm the email entered is correct.
Eligibility and Enrollment	Application Submission and Update	43386	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System must provide the functionality to default the Preferred Method of Communication back to Mail when an email notification returns due to an invalid email address.
Eligibility and Enrollment	Application Submission and Update	43391	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System must provide the functionality to default the Preferred Method of Communication back to Mail when the Consumer has not created a California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) account.
Eligibility and Enrollment	Application Submission and Update	44593	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall provide the functionality to record and track for statistical analysis and reporting the timeframe for applying and receiving eligibility determination.
Eligibility and Enrollment	Case Management		
Eligibility and Enrollment	Case Management	38241	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall provide the ability for designated administrative workers to manage the reasonable opportunity period for consumers to provide evidence in response to inconsistent verifications.
Eligibility and Enrollment	Case Management	38243	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall allow authorized administrative users to make updates to reasonable opportunity expiration dates captured in the California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) application.
Eligibility and Enrollment	Case Management	38244	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) will restrict user updates to the reasonable opportunity expiration date based on the following criteria: - At the time of update, the new date must not be in the past - At the time of update, the new date must not be more than 60 days in the future - Updates to reasonable opportunity dates may only be made for conditionally eligible consumers
Eligibility and Enrollment	Case Management	38245	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall allow authorized administrative users to view verification response codes for the following Federal Data Service Hub interfaces: - Social Security Administration Composite Service - Verify Lawful Presence Step 1 Services
Eligibility and Enrollment	Case Management	38583	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall provide the functionality to scan any received correspondence, link to a case, and route for subsequent case management processing.
Eligibility and Enrollment	Case Management	38599	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall provide the functionality for account/case management functions for the management of the consumer's application/case information and processing.
Eligibility and Enrollment	Case Management	38620	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall provide the functionality to transfer any new received document images to the SAWS upon receipt for referred applications.
Eligibility and Enrollment	Case Management	38636	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall provide the functionality for authorized users to update accounts / cases with updated information.

Category	Sub Category	Req ID	Requirement
Eligibility and Enrollment	Case Management	38637	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall expand the functionality for authorized users to update accounts/cases with updated information for all user account types as defined in the California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) Security Roles Matrix
Eligibility and Enrollment	Case Management	38660	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall provide flexible workflows to support frequently changing business models.
Eligibility and Enrollment	Case Management	38661	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall provide workflow functionality to support multiple service delivery models. (e.g., case management model vs. task oriented model).
Eligibility and Enrollment	Case Management	38673	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall provide a customizable workflows capability. (e.g., automatic sequencing, smart scripting, guided trip, etc.)
Eligibility and Enrollment	Case Management	38691	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall provide event triggers that will be sent to appropriate staff or appropriate online/batch process on prioritized basis. (e.g., age of task, pregnant woman, etc.)
Eligibility and Enrollment	Case Management	38692	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall provide functionality to define workflow events that may be based on user-defined criteria [e.g., Transaction Code, Agency, Data values (for example date of application, type of application), other user-defined values or parameters.]
Eligibility and Enrollment	Case Management	38729	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall provide functionality to initiate event triggers that will send notification to workflow System user (e.g., documentation has been received on a pending case or specific tasks that must be performed). Notifications should be configurable to be used anywhere in the workflow to notify the participant.
Eligibility and Enrollment	Case Management	38759	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall provide functionality to alert assigned staff when new data has been received for a case, if eligibility is affected or if follow-up action is required.
Eligibility and Enrollment	Case Management	38760	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall provide functionality to alert assigned staff or specified work queue when conflicting data has been received for a case (Ex. the birth date for an applicant has changed).
Eligibility and Enrollment	Case Management	38767	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall provide functionality to assign work using flexible criteria (e.g., type, caseload, task, queue, etc.).
Eligibility and Enrollment	Case Management	38804	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall provide the functionality for authorized users to view an applicant or enrollee account information including the household members and their respective health coverage and eligibility status. This will include household members that are / may be eligible for non-MAGI Medi-Cal.
Eligibility and Enrollment	Case Management	38807	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall provide the functionality for multi-level (drill down) searching and filtering searches to locate needed account/case information.
Eligibility and Enrollment	Case Management	38834	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall provide functionality to create caseload reports and statistics.
Eligibility and Enrollment	Case Management	38861	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall provide functionality to retain consumer health coverage history by type of health coverage (APTC, CSR, MAGI Medi-Cal which includes C-CHIP, MCAP, and non-subsidized), enrollment effective dates, for online retrieval and reporting for a period of 60 months.
Eligibility and Enrollment	Case Management	38862	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall provide the functionality for authorized users to search and view a specific consumer's information according to role-based security controls and California policy, for online retrieval for 60 months of historical data.
Eligibility and Enrollment	Case Management	38914	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall provide the functionality to uniquely record and track individuals and have the ability to associate individuals with one or more cases in a manner that facilitates case management yet allow for both duplicated and unduplicated caseload counts.
Eligibility and Enrollment	Case Management	38915	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall provide the functionality to automatically generate comments, viewable with the case file, whenever authorized users make case change changes including but not limited to: a description of the change which includes the prior value(s), the date and time of the change, the source of the change (User, California Healthcare Eligibility, Enrollment and Retention System (CalHEERS)-generated, etc.) and, if User-generated, the name and User ID of the User making the change.
Eligibility and Enrollment	Case Management	38916	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall provide functionality to retain history and viewing capability of all received and sent applications and documentation. This includes the ability to designate documents and notices which are kept indefinitely as a permanent part of the case record and will not be purged (e.g. - notices related to claims).
Eligibility and Enrollment	Case Management	38932	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall provide the functionality to electronically receive and route for processing exception files from MEDS (i.e. MEDS Alerts).
Eligibility and Enrollment	Case Management	42859	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall determine plan prospective effective dates for a consumer who is in a renewal case and a Change Plan action has been completed.
Eligibility and Enrollment	Case Management	42860	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall reset the application date to the actual date of the re-application and not the previous application date when an individual/case has been withdrawn or terminated and then they re-apply / re-submit a subsequent application
Eligibility and Enrollment	Case Management	42861	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall remove the 6 month application date limitation when processing paper applications
Eligibility and Enrollment	Case Management	42862	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall not have a timeframe limitation when entering the application date for paper applications.
Eligibility and Enrollment	Case Management	42863	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall provide functionality to retroactively terminate coverage as required to support business policy and consumer need.
Eligibility and Enrollment	Case Management	42864	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall not allow the plan termination date be later than 12/31/20XX whenever termination takes place through Report a Change or Terminate Participation.
Eligibility and Enrollment	Case Management	42981	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System must provide the functionality for the User to view ALL Eligibility Transactions with sufficient detail to support the eligibility determined by the Business Rules Engine.
Eligibility and Enrollment	Case Management	42982	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System must be updated to display all Eligibility Transaction types to the User as well as the Eligibility Determination detail for each transaction for a case.

Category	Sub Category	Req ID	Requirement
Eligibility and Enrollment	Case Management	42983	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System must provide the functionality for the User to view a PDF of the Application associated with the Eligibility Details.
Eligibility and Enrollment	Case Management	42984	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System must clearly identify the User who completed each transaction.
Eligibility and Enrollment	Case Management	42985	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System must provide the functionality to search for specific Transaction Types by date or date range.
Eligibility and Enrollment	Case Management	43237	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) system shall provide the functionality to allow the Production Support Supervisor and Production Support Team Members (L1/L2/L3) to search for a case and update the enrollment for a member from a California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) Internal Portal. The Search page will be in English only.
Eligibility and Enrollment	Case Management	43238	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall provide the functionality for the Production Support Supervisor and Production Support Team Member (L1/L2/L3) to update the Enrollment Effective Dates, Member Effective Dates and/or Enrollment Status for a case/member from a California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) Internal Portal. The update page will be in English only.
Eligibility and Enrollment	Case Management	43239	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System must send the manually updated enrollment and member Effective dates and/or Enrollment Status to ABE for individual PMPM billing adjustments.
Eligibility and Enrollment	Case Management	43240	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System must save the updated information to the Audit Tables.
Eligibility and Enrollment	Case Management	43241	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall only allow access to the Internal Portal page to L2 and L3 with a specific Security Role.
Eligibility and Enrollment	Case Management	43242	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) system shall allow internal L2 or L3 team members to bypass soft pause evaluation for a MAGI beneficiary from the California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) internal portal.
Eligibility and Enrollment	Case Management	43326	SCRs (Service Center Representatives) will be responsible for managing the verifications of cases who include CCHIP consumers except for cases with at least one consumer is determined Eligible, Conditionally Eligible and Pending for MAGI Medi-Cal.
Eligibility and Enrollment	Case Management	44494	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall provide functionality to monitor caseload size per assigned staff.
Eligibility and Enrollment	Disenrollment		
Eligibility and Enrollment	Disenrollment	38154	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall discontinue APTC/CSR/CCP eligibility and terminate enrollment when Carry Forward is lifted and eligibility is determined for another IAP based on the 15-day rule.
Eligibility and Enrollment	Disenrollment	38156	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall allow auto-disenrollment when SAWS initiates a change that results in discontinuance from APTC/CSR/CCP.
Eligibility and Enrollment	Disenrollment	38157	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall use the existing auto-disenrollment rules and generate an 834 to the carriers, if applicable, when Carry Forward has ended and the individual is discontinued from APTC/CSR/CCP.
Eligibility and Enrollment	Disenrollment	38263	At the end of the Reasonable Opportunity Period, the California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall update the eligibility and enrollment for Family Dental plans based on the results of the redetermined eligibility for health plans.
Eligibility and Enrollment	Disenrollment	38264	A consumer should be terminated from his/her QDP in conjunction with termination from his/her QHP only when the consumer fails the ROP for lawful presence/citizenship, incarceration, and/or death.
Eligibility and Enrollment	Disenrollment	38953	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall provide the functionality to allow an individual to disenroll from a QHP and / or stand-alone dental plan at any time.
Eligibility and Enrollment	Disenrollment	38954	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall provide the functionality to notify individual of insurance requirements and penalties upon disenrollment.
Eligibility and Enrollment	Disenrollment	38968	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall provide the functionality to notify CMS Federal Data Hub of an individual's disenrollment.
Eligibility and Enrollment	Disenrollment	38975	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall provide the functionality to notify a QHP and / or stand-alone dental plan of an individual's disenrollment.
Eligibility and Enrollment	Disenrollment	39010	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall provide the functionality to notify an individual that is disenrolled from a QHP and / or stand-alone dental plan of their current healthcare options.
Eligibility and Enrollment	Disenrollment	39091	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall provide the functionality to notify an enrollee of effective dates of disenrollment due to nonpayment of premium
Eligibility and Enrollment	Disenrollment	39092	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall provide the functionality to disenroll an individual for non-payment of premium.
Eligibility and Enrollment	Disenrollment	39143	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall provide the functionality to accept disenrollment from the Carriers for any reason as determined by the Exchange and State and federal regulations.
Eligibility and Enrollment	Disenrollment	39165	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall provide for Continued Enrollment (CE) if the applicant/enrollee submits a complete CE form to dispute the disenrollment decision by a certain deadline.
Eligibility and Enrollment	Disenrollment	44479	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall provide the functionality for authorized users to reinstate enrollment without going through the appeal process in accordance with established State policies.

Category	Sub Category	Req ID	Requirement
Eligibility and Enrollment	Disenrollment	44480	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall provide the functionality to track for audit purposes all manual enrollment reinstatements.
Eligibility and Enrollment	Eligibility Determination		
Eligibility and Enrollment	Eligibility Determination	37879	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall update the FPL limit for aid code P5 0% up to and including 133% of the federal poverty level as referenced in 42 CFR 435.118(c)(2)(i)
Eligibility and Enrollment	Eligibility Determination	37880	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall update the FPL limit for aid code P6 0% up to and including 133% of the federal poverty level as referenced in 42 CFR 435.118(c)(2)(i)
Eligibility and Enrollment	Eligibility Determination	37881	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall determine eligibility for children ages 6 - 19 (follow current age rules in California Healthcare Eligibility, Enrollment and Retention System (CalHEERS)) with income greater than 108% up to and including 133% FPL based on self-attestation of having Other Health Coverage, by answering "yes" or "no" to the Other Health Insurance Information on the Personal Data Demographics page of the application.
Eligibility and Enrollment	Eligibility Determination	37882	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall determine eligibility for children ages 6-19 (follow current age rules in California Healthcare Eligibility, Enrollment and Retention System (CalHEERS)) with an income greater than 108% up to and including 133% FPL, who self-attested to having Other Health Coverage by answering "yes" to the Other Health Insurance Information on the Personal Data Demographics page of the application, shall be determined eligible to Medi-Cal aid codes P5/ P6.
Eligibility and Enrollment	Eligibility Determination	37883	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall determine eligibility for children ages 6 - 19 (follow current age rules in California Healthcare Eligibility, Enrollment and Retention System (CalHEERS)) with income greater than 108% and up to and including 133% FPL, that are uninsured, and answered "no" to having Other Health Coverage on the Personal Data Demographics page of the application, shall be determined eligible to Medi-Cal aid codes M5/M6.
Eligibility and Enrollment	Eligibility Determination	37884	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall determine whether to apply the results of the MEDS MEC check when determining Insurance Affordability Program eligibility.
Eligibility and Enrollment	Eligibility Determination	37885	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall enable an admin user at the portal, to bypass the MEDS MEC check as determined by the admin user.
Eligibility and Enrollment	Eligibility Determination	37886	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) will determine whether MEDS is available and grant eligibility accordingly.
Eligibility and Enrollment	Eligibility Determination	37887	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) will display messaging to the Consumer on the Eligibility Results page when they are ineligible to MAGI Medi-Cal due to the MEDS MEC check or if they are pending due to no CIN or MEDS being unavailable.
Eligibility and Enrollment	Eligibility Determination	37888	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) will return an eligibility evaluation reason on DERs indicating that a Consumer was ineligible or discontinued from MAGI Medi-Cal due to the MEDS MEC check or if they are pending due to no CIN or MEDS being unavailable.
Eligibility and Enrollment	Eligibility Determination	37889	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall deny MAGI Medi-Cal to all intake applicants who have an active health aid code based on the MEDS MEC check.
Eligibility and Enrollment	Eligibility Determination	37890	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) will have the ability to independently send to SAWS the verification status for each MEC type - ESI, non-ESI, and MEDS.
Eligibility and Enrollment	Eligibility Determination	37892	"The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) system shall apply soft pause to all MAGI Medi-Cal beneficiaries receiving an adverse action (as defined in BR 2) from any MAGI groups who meet the following conditions: • Aged 65+; or • Attesting to Blindness; or • Attesting to being Disabled; or • A parent of a child under 21; or • A caretaker relative of a child under 21; or • A child under 21; • Pregnant woman up to the end of the 60-Day Post Partum Period"
Eligibility and Enrollment	Eligibility Determination	37893	"The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) system shall define a pending adverse action as an eligibility determination that results in placing the individual in soft pause. Adverse action is defined as any action that results in: • A discontinuance from MAGI Medi-Cal; or • A shift from a MAGI Medi-Cal non-premium aid code to a MAGI Medi-Cal premium aid code "
Eligibility and Enrollment	Eligibility Determination	37894	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) system shall never apply soft pause to beneficiaries in Accelerated Eligibility.
Eligibility and Enrollment	Eligibility Determination	37895	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) system shall maintain the current beneficiary aid code, when the beneficiary is determined eligible for soft pause protection.
Eligibility and Enrollment	Eligibility Determination	37896	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) system shall display the status of soft pause protection.
Eligibility and Enrollment	Eligibility Determination	37897	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) system shall allow SAWS Systems to lift soft pause protection and re-determine eligibility from SAWS

Appendix A-4 - SOW Exhibit A - System Requirements Specification
(Extracted from CalHEERS RTM)

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Category	Sub Category	Req ID	Requirement
Eligibility and Enrollment	Eligibility Determination	37898	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) system shall allow DHCS users with admin security profiles to lift Soft Pause.
Eligibility and Enrollment	Eligibility Determination	37899	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) system shall notify SAWS when a consumer/case is in Soft Pause protection mode as well as when it has been lifted via eHIT.
Eligibility and Enrollment	Eligibility Determination	37900	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) system shall update the eligibility results page messaging consumers who are placed in a "Soft Pause" hold that describes the intent of "Soft Pause" and next steps.
Eligibility and Enrollment	Eligibility Determination	37901	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) system allow the consumer to enter a pregnancy end date into the California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) Portal, when reporting a change.
Eligibility and Enrollment	Eligibility Determination	37902	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) SAWS eHIT Interface shall send pregnancy end date element at the person level.
Eligibility and Enrollment	Eligibility Determination	37904	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall determine only MAGI Medi-Cal and/or unsubsidized eligibility for households whose primary tax filer and /or spouse fail to file their federal tax return in a year in which they previously received APTC.
Eligibility and Enrollment	Eligibility Determination	37908	"The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall have the functionality for an admin user to override the failed to file federal tax return/reconcile indicator. "
Eligibility and Enrollment	Eligibility Determination	37963	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) will no longer apply the pregnant women under 21 income disregard, and shall not apply soft pause to, individuals who reports a marriage.
Eligibility and Enrollment	Eligibility Determination	37966	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall indicate on the Budget Worksheet page that the Unmarried Pregnant Woman under 21 income disregard applies.
Eligibility and Enrollment	Eligibility Determination	37970	"California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall distribute APTC amount per plan based on the following calculation: Maximum APTC Amount allowed per APTC-eligible individual = [Total APTC Amount awarded to the tax household/(Rate band adjustment for the enrollee)]* (Sum of rate band adjustments for the tax household) The adjustment calculation is based on the rate band table. "
Eligibility and Enrollment	Eligibility Determination	37971	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall determine and apply surplus APTC equally to any other member level groups within the same APTC tax filing household that have not selected/enrolled in a plan.
Eligibility and Enrollment	Eligibility Determination	37973	"California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall modify relationship values to provide the following consolidation: - Husband/Wife ----> Spouse"
Eligibility and Enrollment	Eligibility Determination	38010	The CalHEERS system shall determine eligibility for an individual who is eligible for the Affordability and Benefit Program for New Qualified Immigrants (NQI) and APTC for NQI. An individual is eligible for this program if they are: a. 21 years of age or older and less than 65 years of age, b. not pregnant, c. with no minor child(ren) who is determined eligible for Medi-Cal, d. have income at or below 138% of the Federal Poverty Level (FPL), e. A qualified alien who is subject to the 5 year bar f. A qualified alien that hasn't met the 5 year bar.
Eligibility and Enrollment	Eligibility Determination	38011	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) system shall assign aid code M1 to Qualified Aliens, who are otherwise eligible for the Affordability and Benefit Program for New Qualified Immigrants (NQI), at open enrollment or at a qualifying life event if they meet the following conditions: a. Individual is within six months of their 65th birthday, or b. Individual is within six months of meeting the five-year bar.
Eligibility and Enrollment	Eligibility Determination	38012	The CalHEERS System shall have the functionality to allow consumers who are Newly Qualified Immigrants (NQI) and meet APTC NQI criteria to opt into the Affordability and Benefit Program for NQIs during open enrollment and/or during a special enrollment period (SEP), qualifying life event (QLE).
Eligibility and Enrollment	Eligibility Determination	38013	The CalHEERS System shall have the ability to identify NQI individuals who have been assigned the L9 aid code but have not selected a plan and assign them to the appropriate restricted scope aid code when: - the special enrollment period for the qualified life event expires - open enrollment ends
Eligibility and Enrollment	Eligibility Determination	38014	"The CalHEERS System shall assign the appropriate full scope aid code to the NQI individual when their application is submitted and a. It is not open enrollment and/or b. The consumer does not meet a qualifying life event. "
Eligibility and Enrollment	Eligibility Determination	38015	The CalHEERS system shall provide the functionality to terminate the L9 aid code and reevaluate the Medi-Cal eligibilty if the NQI is no longer eligible for the Affordability and Benefit Program. A NQI is no longer eligible for the program if: a. He or she has met the five-year bar b. She reports a pregnancy subsequent to application. c. He or she has a minor child who is determined eligible for Medi-Cal. d. He or she obtains age 65. e. Income goes above 138% of the FPL.

Category	Sub Category	Req ID	Requirement
Eligibility and Enrollment	Eligibility Determination	38018	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall grant APTC/CSR/CCP when a consumer is moved to restricted scope MAGI Medi-Cal from the NQI Wrap due to not choosing an NQI plan, or discontinuance from their NQI plan due to Soft Pause.
Eligibility and Enrollment	Eligibility Determination	38019	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall send the Exchange Aid Code always to MEDS when granting NQI Eligibility with both L9 and X2.
Eligibility and Enrollment	Eligibility Determination	38020	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall begin granting eligibility to the L9 Aid Code on eligibility determinations effective on or after 1/1/2017.
Eligibility and Enrollment	Eligibility Determination	38041	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall determine eligibility for Medi-Cal based on lawfully present and qualified noncitizen information that was added in CR 6197.
Eligibility and Enrollment	Eligibility Determination	38042	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall utilize the FDSH VLP electronic verifications added as part of the VLP interface update, the manual administrative verifications, and the applicant attestation information, pertaining to statuses of lawfully present and qualified noncitizen status, to determine eligibility for Medi-Cal.
Eligibility and Enrollment	Eligibility Determination	38043	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall grant full scope Medi-Cal eligibility for lawfully present immigrants who are eligible for federally funded full scope Medi-Cal because they are under 21 or pregnant. A lawfully present immigrant includes all current immigration statuses eligible for coverage through Covered California and others as defined for Medi-Cal eligibility purposes.
Eligibility and Enrollment	Eligibility Determination	38044	"California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall grant full scope Medi-Cal eligibility for Qualified Aliens who are eligible for Medi-Cal regardless of their five-year bar status if they are under 21 or pregnant. Qualified Aliens include: • Lawful Permanent Residents • Asylees under INA section 208 • Refugees under INA section 207 • Immigrants paroled for at least one year under INA section 212(d)(5) • Immigrants whose deportation is withheld under INA section 243 (h) • Immigrants granted conditional entry under INA section 203(a)(7) • Cuban/Haitian immigrants • Battered immigrants"
Eligibility and Enrollment	Eligibility Determination	38045	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall use the additional immigration status information obtained through the federal hub as a result of the latest update to the “Verify Lawful Presence” (VLP) interface to properly determine the level of Medi-Cal benefits an immigrant is entitled to receive and whether or not eligibility is conditional. The new data elements provide additional information on qualified alien status, five-year bar status and other variables related to Medi-Cal eligibility that need to be incorporated into the eligibility determination process.
Eligibility and Enrollment	Eligibility Determination	38046	"California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall grant restricted scope Medi-Cal benefits for a lawfully present immigrant as defined for Medi-Cal eligibility purposes, *An individual who is not a qualified alien or a PRUCOL immigrant and who is 21 or older, or is not pregnant. "
Eligibility and Enrollment	Eligibility Determination	38047	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall grant conditional full scope Medi-Cal eligibility to otherwise eligible immigrants who claim to be in a satisfactory immigration status (for full scope Medi-Cal) during the 90-day reasonable opportunity period.
Eligibility and Enrollment	Eligibility Determination	38048	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall add a value to the existing documents type drop down menu "Document or status not listed." The "Document or status not listed" value will grant conditional eligibility if otherwise eligible.
Eligibility and Enrollment	Eligibility Determination	38049	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) system shall change the Alien Number field from a required field to an optional field if the "Document or status not listed" category is selected.
Eligibility and Enrollment	Eligibility Determination	38050	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) system shall change the Alien Number verbiage from "Alien number" to "Alien number/USCIS number"

Category	Sub Category	Req ID	Requirement
Eligibility and Enrollment			"California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall provide functionality to collect application information necessary to identify PRUCOL individuals as per regulations 42 CFR 435.408 and 436.408 (in each of the 15 documented PRUCOL categories on the MC 13). The online application shall have the functionality to ask the individual if they are in a PRUCOL status. If a PRUCOL status is selected in the selectable drop-down menu, described in BR 15, provide conditional full scope eligibility. The 15 documented PRUCOL categories are: ? A conditional entrant admitted to the United States before April 1, 1980 ? An immigrant paroled into the United States, including Cuban/Haitian entrants ? An immigrant subject to an Order of Supervision ? An immigrant granted an indefinite stay of deportation ? An immigrant granted an indefinite voluntary departure ? An immigrant on whose behalf an immediate relative petition (INS Form I-130) has been approved and who is entitled to voluntary departure ? An immigrant who has properly filed an application for lawful permanent resident status ? An immigrant granted a stay of deportation for a specified period ? An immigrant granted asylum ? A refugee admitted to the United States since April 1, 1980 ? An immigrant granted voluntary departure who is awaiting issuance of a visa ? An immigrant in deferred action status ? An immigrant who entered and has continuously resided in the United States since before January 1, 1972, who would be eligible for an adjustment of status to lawful permanent resident pursuant to INA Section 249 (eligible as a Registry Alien) ? An immigrant granted a suspension of deportation whose departure INS does not contemplate enforcing ? An immigrant granted withholding of deportation pursuant to INA Section 243(h) ? Document or status not listed"
	Eligibility Determination	38052	
Eligibility and Enrollment	Eligibility Determination	38053	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall have the functionality to determine eligibility for PRUCOL individuals in any of the 16 PRUCOL categories available on the MC 13 (12/09) and to place them in the full scope MAGI Medi-Cal Category aid codes (based on financial and non-financial eligibility criteria).
Eligibility and Enrollment			"The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) system shall add the following immigration statuses to a selectable drop-down menu to correctly determine Medi-Cal eligibility for all PRUCOL immigrants: ? A conditional entrant admitted to the United States before April 1, 1980 ? An immigrant paroled into the United States, including Cuban/Haitian entrants ? An immigrant subject to an Order of Supervision ? An immigrant granted an indefinite stay of deportation ? An immigrant granted an indefinite voluntary departure ? An immigrant on whose behalf an immediate relative petition (INS Form I-130) has been approved and who is entitled to voluntary departure ? An immigrant who has properly filed an application for lawful permanent resident status ? An immigrant granted a stay of deportation for a specified period ? An immigrant granted asylum ? A refugee admitted to the United States since April 1, 1980 ? An immigrant granted voluntary departure who is awaiting issuance of a visa ? An immigrant in deferred action status ? An immigrant who entered and has continuously resided in the United States since before January 1, 1972, who would be eligible for an adjustment of status to lawful permanent resident pursuant to INA Section 249 (eligible as a Registry Alien) ? An immigrant granted a suspension of deportation whose departure INS does not contemplate enforcing ? An immigrant granted withholding of deportation pursuant to INA Section 243(h) ?Document or status not listed"
	Eligibility Determination	38054	
Eligibility and Enrollment	Eligibility Determination	38055	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) must grant restricted scope Medi-Cal eligibility (without requiring immigration document and Alien Number information) to otherwise eligible immigrants who claim to be in the “document or status not listed” category of the drop-down menu.
Eligibility and Enrollment	Eligibility Determination	38056	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) must grant full scope Medi-Cal eligibility to consumers who selected “document or status not listed” category of the drop down menu and the consumer provides the county with a signed MC-13 attesting to PRUCOL category 16. The county will use administrative verification to indicate the MC-13 has been provided. No other electronic or administrative verification is required.
Eligibility and Enrollment	Eligibility Determination	38057	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) system shall add an “Admin Verified” option for verification of all 16 PRUCOL categories.
Eligibility and Enrollment	Eligibility Determination	38058	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) system shall grant conditional full scope eligibility to otherwise eligible documented PRUCOL immigrants while their status is being verified, and shall grant appropriate eligibility once status is verified.
Eligibility and Enrollment	Eligibility Determination	38059	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) system shall request immigration status verifications through the VLP interface from all of the documented PRUCOL categories including the 9 documented PRUCOL categories that do not meet the federal definition of “Qualified Alien”. Immigration status verification will not be requested from individuals who claim the last selectable category on the immigration status list. (The last selectable category is: "Document or status not listed".)
Eligibility and Enrollment	Eligibility Determination	38060	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) system will add new validation to assist consumers with what happens next in the application process when they select "Document or status not listed" in the 'Document Type' dropdown.
Eligibility and Enrollment	Eligibility Determination	38061	If administrative verification of immigration status is required because electronic verification fails, and immigration status is not verified during the reasonable opportunity period, then eligibility shall be reduced to restricted scope Medi-Cal with proper notice in accordance with current Medi-Cal policy.

Category	Sub Category	Req ID	Requirement
Eligibility and Enrollment	Eligibility Determination	38062	"The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) system shall treat the following immigration statuses as always exempt from the 5 year bar: A refugee under 207, Cuban /Haitian Entrant (501e), Deportation withheld (243(h)), Granted Asylum (208), Amerasians, Trafficking victims with ORR certification"
Eligibility and Enrollment	Eligibility Determination	38063	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall eliminate the question and check box for "eligible immigration status".
Eligibility and Enrollment	Eligibility Determination	38065	"California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall remove the following question from the portal: *Has this person lived in the US since August 22,1996?"
Eligibility and Enrollment	Eligibility Determination	38078	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) system shall direct consumers changing an income record or Projected Annual Income to the income summary page and require the consumer to confirm the change is correct, or require further edits to income entries.
Eligibility and Enrollment	Eligibility Determination	38082	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall always determine which income value (PAI or CMI), the lower of the two, has been used to calculate MAGI Medi-Cal eligibility and if either the value used has not been previously cached, the uncached value used shall be re-verified via the Federal Data Services Hub (FDSH).
Eligibility and Enrollment	Eligibility Determination	38086	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall add aid code 0G for the Medi-Cal Access Program effective October 1, 2016 through June 30, 2017.
Eligibility and Enrollment	Eligibility Determination	38087	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall add aid code 0E for the Medi-Cal Access Program effective July 1, 2017.
Eligibility and Enrollment	Eligibility Determination	38088	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall assign aid codes 0G or 0E for pregnant women with incomes above 213 of the federal poverty level up to and including 322 of the federal poverty who are eligible for the Medi-Cal Access Program .
Eligibility and Enrollment	Eligibility Determination	38089	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall discontinue the use of aid code 0D for new applicants effective October 1, 2016.
Eligibility and Enrollment	Eligibility Determination	38090	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall discontinue the use of aid code 0G for new applicants effective July 1, 2017.
Eligibility and Enrollment	Eligibility Determination	38091	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) system shall maintain the aid code 0D for all pregnant women determined eligible for the Medi-Cal Access Program prior to October 1, 2016 when a change is reported, unless the reported change will discontinue eligibility for the Medi-Cal Access Program.
Eligibility and Enrollment	Eligibility Determination	38092	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) system shall maintain the aid code 0G for all pregnant women determined eligible for the Medi-Cal Access Program prior to July 1, 2017 when a change is reported, unless the reported change will discontinue eligibility for the Medi-Cal Access Program.
Eligibility and Enrollment	Eligibility Determination	38127	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall attempt to verify both amounts with the Federal Data Service Hub (FDSH). If only the higher amount can be e-verified, and both amounts are within MAGI Medi-Cal income limits, then eligibility can be granted by California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) based upon the lower amount.
Eligibility and Enrollment	Eligibility Determination	38128	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall e-verify the lower amount when only the higher amount can be e-verified, and both amounts are within MAGI Medi-Cal income limits.
Eligibility and Enrollment	Eligibility Determination	38129	If only the lower amount can be e-verified, and the lower amount is within Medi-Cal limits, then CalHEERS shall establish eligibility based upon that lower amount.
Eligibility and Enrollment	Eligibility Determination	38130	If neither amount can be e-verified, California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall pend eligibility for admin verification
Eligibility and Enrollment	Eligibility Determination	38131	If the higher amount of either CMI and PAI is above the Medi-Cal limits and the lower unverified amount is within Medi-Cal limits, California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall pend eligibility for admin verification.
Eligibility and Enrollment	Eligibility Determination	38132	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) system shall not permit consumers to submit their application or reported changes until they validate that their updated income is accurate.
Eligibility and Enrollment	Eligibility Determination	38133	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS)-SAWS eHIT interface shall add a verification element under the income fields on the Manual Verifications Page that denotes if admin verification is needed (Y for Yes, N for No) for CMI, PAI, or both amounts that could not be e-verified.
Eligibility and Enrollment	Eligibility Determination	38134	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall add data element fields on the Self Employment screen for consumers to enter Projected Annual Income and Expenses.
Eligibility and Enrollment	Eligibility Determination	38135	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS)-SAWS eHIT interface shall add Projected Annual income effective dates and calendar year elements
Eligibility and Enrollment	Eligibility Determination	38136	If only the higher amount can be e-verified, and the higher amount is above Medi-Cal limits and the lower unverified amount is within Medi-Cal limits, California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall pend eligibility for admin verification.
Eligibility and Enrollment	Eligibility Determination	38140	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall place eligible and conditionally eligible APTC/CSR/CCP individuals into “Carry Forward” when a redetermination of eligibility results in “eligible”, “conditionally eligible” or “pending” MAGI Medi-Cal program eligibility.
Eligibility and Enrollment	Eligibility Determination	38141	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall output MAGI Medi-Cal eligibility status as "Pending" regardless of the actual status based on the eligibility results when placed in "Carry Forward".
Eligibility and Enrollment	Eligibility Determination	38142	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall place cases that have members who are in “Carry Forward” during the Renewals Batch process into Renewal mode. These cases will be excluded from the Passive Renewal process initially, but can be actively renewed.

Appendix A-4 - SOW Exhibit A - System Requirements Specification
(Extracted from CalHEERS RTM)

Category	Sub Category	Req ID	Requirement
Eligibility and Enrollment	Eligibility Determination	38143	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall passively renew cases that have members who are in 'Carry Forward' and are in Renewal Mode but have not actively renewed via the last batch sweep for renewals if all other criteria for the passive renewal is met.
Eligibility and Enrollment	Eligibility Determination	38146	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall provide a Carry Forward indicator at the member level in the California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) Portal for the following transition: APTC/CSR/CCP to MAGI M/C
Eligibility and Enrollment	Eligibility Determination	38149	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall continue Carry Forward for an individual when an EDR is sent from SAWS with a Carry Forward Lift Indicator and the redetermination of eligibility results in MAGI Medi-Cal pending.
Eligibility and Enrollment	Eligibility Determination	38151	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall end Carry Forward for an individual when there is a RAC in the California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) Portal and the redetermination of eligibility results in APTC/CSR/CCP, MCAP or CCHIP.
Eligibility and Enrollment	Eligibility Determination	38152	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall end "Carry Forward" no later than 12/31 of the current CC benefit year when the consumer is in a "Carry Forward" status due to IAP transition.
Eligibility and Enrollment	Eligibility Determination	38153	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall end Carry Forward for an individual when a Negative Action is sent from SAWS and a reevaluation for other programs occurs.
Eligibility and Enrollment	Eligibility Determination	38155	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall use the 15-day rule to discontinue an individual's APTC/CSR/CCP program eligibility when Carry Forward has ended and the individual is found MAGI Medi-Cal Eligible or Conditionally Eligible.
Eligibility and Enrollment	Eligibility Determination	38158	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall evaluate MAGI Medi-Cal eligibility for an individual in a requested Carry Forward month when a Carry Forward Lift Indicator is received for that individual.
Eligibility and Enrollment	Eligibility Determination	38159	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall determine dual eligibility when: - The individual is in Carry Forward (APTC/CSR/CCP Eligible or Conditionally Eligible) and - The current month is requested with a Carry Forward Lift Indicator and - The requested month is a Carry Forward Month and - The individual is found Eligible or Conditionally Eligible for MAGI Medi-Cal This is irrespective of the APTC/CSR/CCP discontinuance (which uses the 15 Day Rule).
Eligibility and Enrollment	Eligibility Determination	38160	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall determine dual eligibility when: - The individual is in Carry Forward (APTC/CSR/CCP Eligible or Conditionally Eligible) and - The future month is requested with a Carry Forward Lift Indicator after the 15th of the month and - The requested month is a Carry Forward Month and - The individual is found Eligible or Conditionally Eligible for MAGI Medi-Cal This is irrespective of the APTC/CSR/CCP discontinuance (which uses the 15 Day Rule).
Eligibility and Enrollment	Eligibility Determination	38161	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall evaluate MAGI Medi-Cal for an individual when a prior Ineligible or Pending IAP Transition Month is requested by SAWS after the individual has been determined eligible or conditionally eligible for MAGI Medi-Cal for a Carry Forward Month and allow for dual eligibility if applicable.
Eligibility and Enrollment	Eligibility Determination	38162	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall begin CCHIP eligibility the first of the month after discontinuance from another IAP.
Eligibility and Enrollment	Eligibility Determination	38163	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall open plan selection for APTC/CSR/CCP cases in Carry Forward and use the Carry Forward Budget in the following scenarios: -The APTC/CSR/CCP household moves to a new region -New applicant(s) are added to the case and are found eligible for APTC/CSR/CCP The current plan selection rules will apply.
Eligibility and Enrollment	Eligibility Determination	38164	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall maintain the APTC/CSR/CCP Carry Forward budget when a member of the APTC/CSR/CCP household is disenrolled from the plan and at least one member remains in Carry Forward.
Eligibility and Enrollment	Eligibility Determination	38166	When California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) receives a Non-MAGI Medi-Cal aid code via eHIT it will evaluate the aid code for MEC. If there is valid MEC for the Non-MAGI Medi-Cal aid code, California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) will trigger a redetermination of eligibility for IAPs.
Eligibility and Enrollment	Eligibility Determination	38167	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall display Covered CA transition text on the eligibility results page when a MAGI Medi-Cal individual's redetermination of eligibility results in eligible or conditionally for APTC/CSR/CCP.
Eligibility and Enrollment	Eligibility Determination	38242	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall set the initial reasonable opportunity expiration date based on a configurable time period after the date the conditional eligibility was determined.
Eligibility and Enrollment	Eligibility Determination	38250	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall set the discontinuance date to the end of the current month if the eligibility determination is performed on or before the 15th of the current month.
Eligibility and Enrollment	Eligibility Determination	38251	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall set the discontinuance date to the end of the coming month if the eligibility determination is performed after the 15th of the current month.

Category	Sub Category	Req ID	Requirement
Eligibility and Enrollment	Eligibility Determination	38254	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall only determine MAGI Medi-Cal eligibility to APTC individuals whose reasonable opportunity period has expired under the following conditions: - The consumer income is within the MAGI Medi-Cal FPL range; and - The verification inconsistency is for citizenship, lawful presence or incarceration.
Eligibility and Enrollment	Eligibility Determination	38255	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall apply the Carry Forward rules to a consumer's enrollment if the consumer is newly eligible to MAGI Medi-Cal due to the ROP Batch and shall not take action to discontinue the consumer when their verification inconsistency is for citizenship, lawful presence or incarceration.
Eligibility and Enrollment	Eligibility Determination	38258	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall enable APPLY mode as of the ROP run date if all members are discontinued/terminated.
Eligibility and Enrollment	Eligibility Determination	38259	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall enable REPORT A CHANGE mode if at least one of the members is eligible for one of the programs (includes MAGI Medi-Cal).
Eligibility and Enrollment	Eligibility Determination	38265	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall have the functionality to allow consumers to have access to the case summary page from the Individual homepage if case history exists for the consumer.
Eligibility and Enrollment	Eligibility Determination	38289	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall modify its existing computational method for calculating Advance Premium Tax Credit (APTC).
Eligibility and Enrollment	Eligibility Determination	38290	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall modify the maximum annual APTC amount calculation by: • only considering the number of applicable coverage months for the household in the benefit year. An applicable coverage month is defined as a month in which the consumer is enrolled in a QHP and eligible or conditionally eligible to APTC for the entire month • accommodating benchmark premiums that vary by month
Eligibility and Enrollment	Eligibility Determination	38291	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall determine benchmark premiums as follows: • Use member-level coverage start dates to derive the benchmark premium • Benchmark premiums should be recalculated to reflect changes in household circumstances, such that the household can have different benchmark premiums from month to month • When a change is reported, the old coverage start date should be used in the benchmark premium calculation only if the same plan is kept. If a new plan is selected, the new coverage start date should be used (going forward) • When plan effective date is changed, the new coverage start date should be used.
Eligibility and Enrollment	Eligibility Determination	38292	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall provide the capability to store maximum monthly APTC amount, applied monthly APTC amount, and monthly benchmark premium amount. When maximum annual APTC amount changes, California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) will recalculate the maximum monthly APTC amount for future months such that no surplus or deficit will occur if possible. When maximum annual APTC amount does not change, California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall not change the maximum monthly amount for future months.
Eligibility and Enrollment	Eligibility Determination	38293	When eligibility is determined and the consumer is eligible to APTC, California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall display the maximum annual APTC amount and the prospective maximum monthly APTC amount.
Eligibility and Enrollment	Eligibility Determination	38294	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall recalculate APTC according to the new coverage start date when the plan effective date is changed by an admin user.
Eligibility and Enrollment	Eligibility Determination	38314	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall have the ability to provide quotes for only part of a household.
Eligibility and Enrollment	Eligibility Determination	38315	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall support the admin ability to view quotes and plan data for multiple years.
Eligibility and Enrollment	Eligibility Determination	38316	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) system shall not display past benefit year rates to consumer past open enrollment.
Eligibility and Enrollment	Eligibility Determination	38317	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall not display programs that do not have potential eligibility on the My Options page.
Eligibility and Enrollment	Eligibility Determination	38326	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall call for e-verifications from the hub when a household member is being added during Renewals.
Eligibility and Enrollment	Eligibility Determination	38338	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall provide the functionality to auto-enroll a consumer in their current plan if still eligible with currently verified data.
Eligibility and Enrollment	Eligibility Determination	38340	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall provide the functionality to receive individual enrollment renewal responses/ updates through California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) Web Portal, Mail, Phone, and e-mail.

Category	Sub Category	Req ID	Requirement
Eligibility and Enrollment			The following OPA budget elements shall be populated in the California Healthcare Eligibility, Enrollment and Retention System (CalHEERS)-SAWS eHIT Interface for both MAGI and APTC: 1. Soft Paused Due To 2. Person Primary Tax Filer 3. Person Included in Primary Tax Filer's Tax Household 4. Person Plans to File Taxes 5. Person Expected to be Required to File Taxes 6. Person Tax Filing Status 7. Person Tax Dependent Status 8. Who claims this person as a tax dependent 9. MAGI - Employment Income (Monthly) 10. MAGI - Self-Employment Income (Monthly) 11. MAGI - Other income (Monthly) 12. MAGI - Total Income 13. MAGI - Allowable deductions (Monthly) 14. MAGI - Total Income after Deductions 15. MAGI - Projected Monthly Income 16. MAGI - Countable Income 17. MAGI - Number of household member + Number of expected babies 18. MAGI - List of Household Members 19. MAGI - Federal Poverty Level 20. MAGI - Federal Poverty Level % for individual 21. MAGI - MAGI Medi-Cal Eligible 22. MAGI- Meets 435.603(f)(2)(I-iii) to use a non-tax filer household composition for MAGI Medi-Cal 23. MAGI - Meets 435.603(l) exception to use APTC income/deduction calculations for MAGI Medi- Cal determination 24. MAGI - Meets 435.119(c): Adults ineligible to the New Adult Group due to dependent child under age 19 without Minimum Essential Coverage
	Eligibility Determination	38350	
Eligibility and Enrollment	Eligibility Determination	38442	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall display questions regarding the consumer's employer contact information only if the consumer is eligible or conditionally eligible for APTC
Eligibility and Enrollment	Eligibility Determination	38443	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall provide APTC consumers the ability to update answers to the employer contact information questions at any time.
Eligibility and Enrollment	Eligibility Determination	38444	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) system shall remove employer contact information questions from the Personal Data-Health Insurance Information page
Eligibility and Enrollment	Eligibility Determination	38445	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) system shall update the ESI Question flow on the Personal Data - Health Insurance Information page.
Eligibility and Enrollment			California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall call the Hub for the following federal-based verifications and store the outcome and response codes for eligibility determinations for Covered California Programs: o Medicare, o Peace Corps, o TRICARE, and o VHA
	Eligibility Determination	38446	
Eligibility and Enrollment			California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall not call the Hub for the following state-based verifications: o Medicaid, o CHIP, and o BHP
	Eligibility Determination	38447	
Eligibility and Enrollment	Eligibility Determination	38448	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall determine ineligibility for APTC/CCP when an Admin Failure of any MEC verification attribute (ESI, NON-ESI, MEDS, Medicare) even if another is e-verified.
Eligibility and Enrollment	Eligibility Determination	38449	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) system shall update the Household Member page "If No SSN, Why" Drop Down field"
Eligibility and Enrollment	Eligibility Determination	38465	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) system shall remove the employer questions on the Employer Information of the Earned Income Details page
Eligibility and Enrollment	Eligibility Determination	38468	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall preserve Employer Contact Information in Mixed Household scenarios.
Eligibility and Enrollment	Eligibility Determination	38470	Parent: The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall determine a consumer ineligible for CCP when the consumer attested to have Medicare at intake, or add a person during Report A Change, or add a person during Renewal.
Eligibility and Enrollment	Eligibility Determination	38471	Child: The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall continue a consumer's eligibility for CCP when the consumer has an active plan selection and attests to have Medicare at Report or Change or Renewal and continues to be otherwise eligible for CCP
Eligibility and Enrollment	Eligibility Determination	38472	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall have an Update Employer Contact Information transaction in the Transaction History Table.

Appendix A-4 - SOW Exhibit A - System Requirements Specification
(Extracted from CalHEERS RTM)

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Category	Sub Category	Req ID	Requirement
Eligibility and Enrollment	Eligibility Determination	38512	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall streamline income messaging, hover texts and collection screens to improve the income flow for the end user.
Eligibility and Enrollment	Eligibility Determination	38513	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall provide access to the Income and Deduction Types chart on the DHCS Website.
Eligibility and Enrollment	Eligibility Determination	38514	If a One-Time Lump Sum is entered for the month of application and one or more members are not MAGI Medi-Cal eligible, the California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) system shall determine eligibility for the month of application and for the month after application.
Eligibility and Enrollment	Eligibility Determination	38515	If a One-Time Lump Sum is entered for a future month for a Medi-Cal beneficiary, the California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall disregard the One-Time Lump Sum for the MAGI Medi-Cal determination.
Eligibility and Enrollment	Eligibility Determination	38516	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall prevent a non tax filer from claiming a dependent.
Eligibility and Enrollment	Eligibility Determination	38517	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System will identify per capita gaming distributions of AI/AN income and count them for the MAGI Medi-Cal and APTC determinations.
Eligibility and Enrollment	Eligibility Determination	38518	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall compare the individual's countable MAGI Medi-Cal income to the appropriate dollar income limit when determining eligibility for MAGI Medi-Cal and Exchange programs.
Eligibility and Enrollment	Eligibility Determination	38519	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall make all members of a MAGI-MC household eligible only when all of the countable income of that MAGI-MC household has been verified.
Eligibility and Enrollment	Eligibility Determination	38520	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall rename "Miscellaneous" to "Other Taxable Income" in the "What type of income?" dropdown option on the "Add Other Income" page.
Eligibility and Enrollment	Eligibility Determination	38526	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall apply the exception to the counting of income based on the member's role in the tax filing household under evaluation. This includes whether or not they are a Tax Filer or whether they are a dependent or child under 19 or 21 if a full time student with a parent living in the household. These are contained in 42 CFR Section 435.603 (f) and 42 CFR 435.603 (d)(2)(i).
Eligibility and Enrollment	Eligibility Determination	38527	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall always count a tax dependent's MAGI based income for their MAGI-Medi-Cal budget when the tax dependent is claimed by someone other than a parent; except when the tax-dependent's parent is in their MAGI Medi-Cal budget and the tax dependent is not expected to be required to file taxes.
Eligibility and Enrollment	Eligibility Determination	38659	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS)-SAWS eHIT interface shall add a verification element that denotes if admin verification is needed for CMI, PAI, or both amounts that could not be e-verified.
Eligibility and Enrollment	Eligibility Determination	38773	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) system shall apply the income amount provided by the electronic data sources upon expiration of the reasonable opportunity period for income verification inconsistencies.
Eligibility and Enrollment	Eligibility Determination	38774	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) system shall use the hierarchy of IRS, FTB, EDD in case of income inconsistency for eligibility determination.
Eligibility and Enrollment	Eligibility Determination	38775	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) system shall not apply the income amount provided by electronic data sources to the consumer's eligibility determination if the value is unavailable.
Eligibility and Enrollment	Eligibility Determination	38782	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) system shall update the transaction history table when the ROP date is updated by admin users
Eligibility and Enrollment	Eligibility Determination	38783	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) system shall enable consumer to change plan up to 60 days if the ROP batch execution is responsible for consumer's APTC/CSR eligibility discontinuance.
Eligibility and Enrollment	Eligibility Determination	38806	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall add data element fields on the Self Employment screen for consumers to enter Projected Annual Income and Expenses.
Eligibility and Enrollment	Eligibility Determination	38837	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) system shall have the functionality to discontinue APTC/CSR when the 009 or 010 tax filing codes are received from IRS.
Eligibility and Enrollment	Eligibility Determination	38838	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) system shall update the Eligibility Results Page with new language reflecting the reason for the action that was taken with the 009 and 010 tax filing codes received from IRS.
Eligibility and Enrollment	Eligibility Determination	38841	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) system shall always call income services during active renewals.
Eligibility and Enrollment	Eligibility Determination	38844	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) system shall allow designated individuals the ability to extend the Open Enrollment date that yields a coverage start date of 1/1 or 2/1 for the Open Enrollment benefit year.
Eligibility and Enrollment	Eligibility Determination	38845	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) system shall have the Open Enrollment extension in consideration in determining the plan selection dates on Eligibility Results page and Enrollment Introduction Page.
Eligibility and Enrollment	Eligibility Determination	38952	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS)-SAWS eHIT interface shall add Projected Annual income effective dates and calendar year elements.
Eligibility and Enrollment	Eligibility Determination	39112	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall have the ability for Admin users to submit applications (Intake, Report A Change, Renewals) without providing a PIN. (California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) will restore the functionality/capability which allows CEWS and SCRs to process a case in California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) without the use of PIN.)

Category	Sub Category	Req ID	Requirement
Eligibility and Enrollment	Eligibility Determination	39159	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall add effective dates for each PAI record and the calendar year for which the PAI applies on the "Expected Income for <Year>" application and RAC portal pages.
Eligibility and Enrollment	Eligibility Determination	39169	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall grant Full scope MAGI Medi-Cal for immigrants who have been administratively verified by SAWS as PRUCOL Last Category when immigration status is "Document or status not listed," any document type is selected or document type is blank, and the consumer is otherwise eligible for MAGI Medi-Cal.
Eligibility and Enrollment	Eligibility Determination	39274	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) system shall calculate the premium rate based on the age of the enrollee at the date of policy issuance or renewal.
Eligibility and Enrollment	Eligibility Determination	39466	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall count the taxable portion of the following income types only for APTC/CSR determinations: AmeriCorps State/National Stipend and Education Award AmeriCorps National Civilian Community Corps Stipend and Education Award AmeriCorps Vista Stipend and Educational Award Education scholarships, awards, fellowship grants not used for living expenses.
Eligibility and Enrollment	Eligibility Determination	39500	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall only apply 42 CFR 435.603(i) to individuals who meet the eligibility requirements for an advanced premium tax credit (APTC).
Eligibility and Enrollment	Eligibility Determination	39550	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall update the eligibility rules to use the non-ESI MEC verification service so that people will be conditionally eligible to APTC/CSR if the service returns enrollment information for Tri-Care, Peace Corps, and/or Veterans Health.
Eligibility and Enrollment	Eligibility Determination	39551	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall update the eligibility rules to use the non-ESI MEC verification service so that people will be ineligible/discontinue to APTC/CSR if the service returns enrollment information for Medicare.
Eligibility and Enrollment	Eligibility Determination	39552	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall have the ability for an Admin user to override Medicare verification status.
Eligibility and Enrollment	Eligibility Determination	39553	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall not run the Business Rules Engine or call the verification services when: Only non-eligibility data elements are updated by any user type within a Report a Change (RAC), regardless if Verification caching has expired
Eligibility and Enrollment	Eligibility Determination	39555	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall request and store the Medicare information from the RRV, and use the verification for eligibility determination.
Eligibility and Enrollment	Eligibility Determination	39559	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall allow consumers to report changes or apply for coverage for the current benefit year during Open Enrollment.
Eligibility and Enrollment	Eligibility Determination	39560	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall allow enrollment start date following the SEP rules If the consumer reports a qualifying life event of Loss of MEC, Marriage, or Birth / Adoption.
Eligibility and Enrollment	Eligibility Determination	39682	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall require individuals who attest to a tax filing status of Married Filing Jointly to include on the application, regardless of relationship status, the individual with whom they are Married Filing Jointly.
Eligibility and Enrollment	Eligibility Determination	39684	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall not enforce individuals who attest to a tax filing status of Married Filing Jointly to include on the application, regardless of relationship status, the individual with whom they are Married Filing Jointly when there is at least one individual attesting to Former Foster Youth.
Eligibility and Enrollment	Eligibility Determination	39685	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall require individuals who attest to a tax filing status of Married Filing Jointly to identify the other individual with whom they are Married Filing Jointly, and that person must also have tax filing status of Married Filing Jointly. An individual can have Married Filing Jointly status with more than one individual(s) on the case.
Eligibility and Enrollment	Eligibility Determination	39703	GI shall add the following races to the EDI 834 Transactions to carriers: Cambodian Other Hispanic\Latino/Spanish
Eligibility and Enrollment	Eligibility Determination	39704	GI shall not send 'Other' (2131-1) when a consumer fails to select a value for Race/Ethnicity in the California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) Portal
Eligibility and Enrollment	Eligibility Determination	39714	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall allow out-of-state residence addresses for all individuals on an application/case, including the Primary Contact, and the referral(s) logic shall be suppressed in rules engine for the individuals who are out-of-state. The "More Benefits Option" question will not be displayed on Household Eligibility Results Summary page when all individual(s) are denied/ineligible/discontinued due to residing out-of-state.
Eligibility and Enrollment	Eligibility Determination	39715	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall collect an out-of-country indicator for all individuals who are residing out-of-country. The Primary Contact on the case cannot have an out-of-country residence or mailing address. The referrals shall be suppressed for out-of-country individuals. The "More Benefits Option" question will not be displayed on Household Eligibility Results Summary screen when all individual(s) are denied/ineligible/discontinued due to residing out-of-country.
Eligibility and Enrollment	Eligibility Determination	39726	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall apply the same rules for calling the verification services that are used for non-applying members, to individuals who reside out-of-state/out-of-country and whose income counts in the budget.
Eligibility and Enrollment	Eligibility Determination	39727	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall determine individuals ineligible/discontinued when they attest to an out-of-state or out of country residence.
Eligibility and Enrollment	Eligibility Determination	39728	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall inform individuals that they have been determined ineligible/discontinued due to residing out-of-state or out-of-country. The Eligibility Results screen shall be updated to display ineligible/discontinued message for out-of-state/out-of-country.
Eligibility and Enrollment	Eligibility Determination	39730	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall use non-tax filer rules to determine MAGI Medi-Cal eligibility for unmarried individuals (all relationships other than "Spouse") who, regardless of relationship status, attest to a tax filing status of Married Filing Jointly, and this includes their dependents.
Eligibility and Enrollment	Eligibility Determination	39752	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall send and receive the COVID-19 Unemployment Insurance Benefit Stimulus Payments as a separate Income type.

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(Extracted from CalHEERS RTM)

Category	Sub Category	Req ID	Requirement
Eligibility and Enrollment	Eligibility Determination	39763	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall have the functionality to allow the Enrollers to search for consumer cases by DOB (MM/DD/CCYY) on the Active Consumers for Agency, Agent and Counselor Portals.
Eligibility and Enrollment	Eligibility Determination	39764	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall have the functionality to allow the Enrollers to search for consumer case by Last 4-digits of SSN on the Active Consumers for Agency, Agent and Counselor Portals.
Eligibility and Enrollment	Eligibility Determination	39766	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall consume the Benchmark Premium amount returned by Get Insured API at the household level when calculating APTC/State Subsidy eligibility
Eligibility and Enrollment	Eligibility Determination	39806	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall have the functionality to allow the Enrollers to search for consumer case by house address number on the Active Consumers for Agency, Agent and Counselor Portals.
Eligibility and Enrollment	Eligibility Determination	39807	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall have the functionality to display the consumer phone, email address, address, subscriber ID, DOB (MM/DD), Last 4-digits of SSN on the Active Consumer results page for Agency Managers and Approved Admin Staff.
Eligibility and Enrollment	Eligibility Determination	39850	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall display a dynamic coverage start date on the Account Home page Important Dates messaging for the Open Enrollment period.
Eligibility and Enrollment	Eligibility Determination	39852	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall have the functionality to display the consumer subscriber ID, DOB (MM/DD), Last 4-digits of SSN on the Active Consumer results page for Agents and Counselors.
Eligibility and Enrollment	Eligibility Determination	39853	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall have the functionality to allow the Enrollers to search for consumer case by Case ID on the Active Consumers for Agent and Counselor Portals.
Eligibility and Enrollment	Eligibility Determination	39881	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall consume the Benchmark Premium amount returned by Get Insured API at the household level when calculating APTC/State Subsidy eligibility
Eligibility and Enrollment	Eligibility Determination	39885	Get Insured shall return the Benchmark Premium Amount at the household level in the GI Recalc API
Eligibility and Enrollment	Eligibility Determination	39917	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall allow a consumer to be granted MAGI Medi-Cal for a prior month if the person was eligible for APTC and/or State Subsidy, but they were not enrolled for that prior month.
Eligibility and Enrollment	Eligibility Determination	39918	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall place eligible and conditionally eligible APTC/CSR/CCP/State Subsidy individuals into “Carry Forward” only if the consumer has selected a plan and a redetermination of eligibility results in MAGI Medi-Cal program eligibility.
Eligibility and Enrollment	Eligibility Determination	39947	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall add a new SEP Reason for "Victim of domestic abuse or spousal abandonment"
Eligibility and Enrollment	Eligibility Determination	39948	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall use the "Returned from Active Duty Military Service" SEP in the Eligibility determination when "Victim of domestic abuse or spousal abandonment" is selected as the SEP reason.
Eligibility and Enrollment	Eligibility Determination	39949	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall display the SEP reason "Victim of domestic abuse or spousal abandonment" as the value before the SEP reason "Returned from Active Duty Military Service" in the dropdown menu for QLE reasons.
Eligibility and Enrollment	Eligibility Determination	39960	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall suppress adding a Qualifying Life Event when applying for the upcoming year outside of the timeframe that a Qualifying Life Event would be applicable.
Eligibility and Enrollment	Eligibility Determination	39961	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall allow a newly added member to become eligible for Covered California programs outside of Open and Special Enrollment, when a Renewal has been completed for the upcoming year.
Eligibility and Enrollment	Eligibility Determination	40136	SIR 128769: California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall allow users to update income/deduction name for the income/deduction records that are received on EDR without income/deduction name
Eligibility and Enrollment	Eligibility Determination	40138	SIR 125445: California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) Portal shall be updated to display MEDICARE part A and B questions for all applying and non-applying members.
Eligibility and Enrollment	Eligibility Determination	40139	SIR 156792: California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) Portal shall be updated to display ""MCAP pregnancy hold applies?"" on the Budget Worksheet screen.
Eligibility and Enrollment	Eligibility Determination	40196	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall store the Transition Flag and the Transition QLE End Date which indicates the transition from MAGI Medi-Cal to Covered CA.
Eligibility and Enrollment	Eligibility Determination	40263	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall collect, store and use 'Lost Wages Assistance' income for eligibility determinations.
Eligibility and Enrollment	Eligibility Determination	40264	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall add 'Lost Wages Assistance' on the 'Government & Assistance Income' page for all modes (Intake, RAC, Renewal).
Eligibility and Enrollment	Eligibility Determination	40265	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall add a tool tip for 'Lost Wages Assistance' on the 'Government & Assistance Income' page for all modes (Intake, RAC, Renewal).
Eligibility and Enrollment	Eligibility Determination	40266	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall create a 'Lost Wages Assistance' Modal to collect the following data: Income Name, Amount, Frequency, Begin and End Dates.
Eligibility and Enrollment	Eligibility Determination	40267	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall count the 'Lost Wages Assistance' income for Covered California programs (APTC, State Subsidy, CSR) eligibility determinations.
Eligibility and Enrollment	Eligibility Determination	40268	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall not count the 'Lost Wages Assistance' income for Medi-Cal programs (MAGI Medi-Cal, MCAP, CCHIP) eligibility determinations.
Eligibility and Enrollment	Eligibility Determination	40269	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall send and receive the income related to 'Lost Wages Assistance' as a separate Income type via eHIT to SAWS.

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(Extracted from CalHEERS RTM)

Category	Sub Category	Req ID	Requirement
Eligibility and Enrollment	Eligibility Determination	40270	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall have the functionality to configure the 'Lost Wages Assistance' income to be countable or not countable for Covered California programs (APTC, State Subsidy, CSR) and Medi-Cal programs (MAGI Medi-Cal, MCAP, CCHIP) eligibility determinations.
Eligibility and Enrollment	Eligibility Determination	40271	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall add 'Lost Wages Assistance' on the 'What type of Income' dropdown in the Flexi App.
Eligibility and Enrollment	Eligibility Determination	40272	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall add a banner for 'Lost Wages Assistance' Income Type in Lost Wages Assistance Modal for all modes (Intake, RAC and Renewal).
Eligibility and Enrollment	Eligibility Determination	40273	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall collect, store and use 'Disaster Unemployment Assistance' income for eligibility determinations.
Eligibility and Enrollment	Eligibility Determination	40274	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall add 'Disaster Unemployment Assistance' on the 'Government & Assistance Income' page for all modes (Intake, RAC, Renewal).
Eligibility and Enrollment	Eligibility Determination	40275	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall add a tool tip for 'Disaster Unemployment Assistance' on the 'Government & Assistance Income' page for all modes (Intake, RAC, Renewal).
Eligibility and Enrollment	Eligibility Determination	40276	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall create a 'Disaster Unemployment Assistance' Modal to collect the following data: Income Name, Amount, Frequency, Begin and End Dates.
Eligibility and Enrollment	Eligibility Determination	40277	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall count the 'Disaster Unemployment Assistance' income for both Medi-Cal programs (MAGI Medi-Cal, MCAP, CCHIP) and Covered California programs (APTC, State Subsidy, CSR) eligibility determinations.
Eligibility and Enrollment	Eligibility Determination	40278	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall send and receive the income related to 'Disaster Unemployment Assistance' as a separate Income type via eHIT to SAWS.
Eligibility and Enrollment	Eligibility Determination	40279	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall have the functionality to configure the 'Disaster Unemployment Assistance' income to be countable or not countable for Covered California programs (APTC, State Subsidy, CSR) and Medi-Cal programs (MAGI Medi-Cal, MCAP, CCHIP) eligibility determinations.
Eligibility and Enrollment	Eligibility Determination	40280	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall add 'Disaster Unemployment Assistance' dropdown value on the 'What type of Income' dropdown in the Flexi App.
Eligibility and Enrollment	Eligibility Determination	40281	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall update a banner to include information related to 'Lost Wages Assistance' and 'Disaster Unemployment Assistance' Income types in 'Unemployment Income' page for all modes (Intake, RAC and Renewal)
Eligibility and Enrollment	Eligibility Determination	40282	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall map 'Lost Wages Assistance' and 'Disaster Unemployment Assistance' Income type to code 'Other' on all HX transactions where income is sent to MEDS interface
Eligibility and Enrollment	Eligibility Determination	40422	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall add 7 new "placeholder" SEP Reason, which will be configured and selected as a QLE reason when requested by Covered CA.
Eligibility and Enrollment	Eligibility Determination	40423	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall add configurability to the following attributes for all existing and new "placeholder" SEP reasons: - Description (English/Spanish) - Effective Start Date - Effective End Date - Priority in the SEP drop down - Coverage Code Category - Consideration for OSEP
Eligibility and Enrollment	Eligibility Determination	40424	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall display the SEP reason in the QLE drop down during the effective period configured and current system date is falling between effective start date and effective end date.
Eligibility and Enrollment	Eligibility Determination	40425	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall display the SEP reasons based on the order of priority configured.
Eligibility and Enrollment	Eligibility Determination	40426	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall follow the coverage date rules for the SEP reasons as per the coverage code category configured.
Eligibility and Enrollment	Eligibility Determination	40427	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall display the SEP reasons during open special enrollment period only if the reason is configured to be displayed.
Eligibility and Enrollment	Eligibility Determination	40428	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall update the "Victim of domestic abuse or spousal abandonment" SEP reason to have its separate code and send to GI and SAWS.
Eligibility and Enrollment	Eligibility Determination	40429	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall send and receive the SEP reason code for "Victim of domestic abuse or spousal abandonment" to SAWS via eHIT transaction.
Eligibility and Enrollment	Eligibility Determination	40430	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall configure SEP reasons to follow the first of the following month logic for all SEP reasons.
Eligibility and Enrollment	Eligibility Determination	40431	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall set the SEP Reasons of Birth/Adoption/Appeals Mid-Month with an effective date as the QLE date.
Eligibility and Enrollment	Eligibility Determination	40432	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall apply the SEP first of the following month rule for currently enrolled consumers who report a change, are not attesting to an SEP, and the report a change results in a detected SEP.
Eligibility and Enrollment	Eligibility Determination	40433	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall apply the first of the following month rule for currently enrolled consumers who report a change with no attested or detected SEP, and the report a change results in a detected increase or decrease in their financial assistance.
Eligibility and Enrollment	Eligibility Determination	40434	On the Admin view QLE page, California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall not display the "Regular" Code coverage date category option.

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Category	Sub Category	Req ID	Requirement
Eligibility and Enrollment	Eligibility Determination	40435	On the Admin view QLE page, California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall rename the “MEC or Marriage/Domestic Partnership” to “First of the following month”.
Eligibility and Enrollment	Eligibility Determination	40629	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall change the description of the SEP Reason for "Learned of new state penalty" to "Learned of American Rescue Plan"
Eligibility and Enrollment	Eligibility Determination	40630	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall have the new "Learned of American Rescue" SEP reason as the first value in the dropdown menu for QLE reasons.
Eligibility and Enrollment	Eligibility Determination	40631	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall make the new SEP Reason for "Learned of new state penalty" available from 05/01/2021
Eligibility and Enrollment	Eligibility Determination	40660	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall remove and concatenate the special characters in the Medicare XML for all the Data Elements: Person First Name, Last Name, Middle Name, Suffix Name.
Eligibility and Enrollment	Eligibility Determination	40712	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall update the system functionality to place an individual who selects "Citizen of Micronesia, the Marshall Islands, or Palau" on the immigration drop down menu (Compact of Free Association) into a MAGI full scope aid code, if otherwise eligible.
Eligibility and Enrollment	Eligibility Determination	40713	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall update the system functionality to move the immigration status of "Citizen of Micronesia, the Marshall Islands, or Palau" under the category of Lawful presence and QNC with no five-year bar.
Eligibility and Enrollment	Eligibility Determination	40714	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall apply the verification rules and determine eligibility for MAGI Medi-Cal benefits following the existing rules for Lawful Presence and QNC category with no five-year bar.
Eligibility and Enrollment	Eligibility Determination	40715	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall update the system functionality to move the immigration status of "Citizen of Micronesia, the Marshall Islands, or Palau" under the category of Lawful presence and QNC with no five-year bar, and apply the corresponding eligibility determination rules for full scope MAGI Medi-Cal benefits, if otherwise eligible when the benefit month being requested is 12/1/2020 and onwards.
Eligibility and Enrollment	Eligibility Determination	40716	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall apply the corresponding full scope aid codes to individuals who select "Citizen of Micronesia, the Marshal Islands, or Palau" on the immigration drop down menu.
Eligibility and Enrollment	Eligibility Determination	40722	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall evaluate current and future year MAGI Medi-Cal/MCAP/CCHIP eligibility for newly added members via RAC in the future year after the case is renewed.
Eligibility and Enrollment	Eligibility Determination	40733	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall exclude cases which have been closed as duplicate in the Renewals batch
Eligibility and Enrollment	Eligibility Determination	40735	During renewal or RAC, California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) will only trigger a Non-MAGI Medi-Cal referral for a person when one of the following conditions are newly met: • the person's age is greater than or equal to 65, or • the person is blind or disabled, or • the person is entitled to or enrolled in Medicare part A or B benefits (whether attested, electronically verified, or Admin failed), or • the person was in former foster care, is under the age of 26, and is not eligible to a mandatory MAGI-Based Medi-Cal program, or • the person is requesting Long Term Care or a person requesting home health services The Non-MAGI Medi-Cal referral shall be complete (closed) in California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) when SAWS has sent a disposition with ReferralStatusCode = Processed (PR) for the ReferralProgramTypeCode = Medi-Cal (MC).
Eligibility and Enrollment	Eligibility Determination	40737	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall not newly evaluate an individual as "Potentially Eligible" to Non-MAGI Medi-Cal if no new referral condition has been met and the previous referral was dispositioned with an eligibility status (for example IE/EL).
Eligibility and Enrollment	Eligibility Determination	40738	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall not trigger a Non-MAGI Medi-Cal Referral or determine an individual as "Potentially Eligible" to Non-MAGI Medi-Cal if the individual is EL to Non-MAGI Medi-Cal which is MEC then no further referrals are needed.
Eligibility and Enrollment	Eligibility Determination	40739	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall have a one-time data update for California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) cases existing prior to Release 21.9 to consider individuals as aged for Non-MAGI Medi-Cal referral purposes if consumer is aged 66 and over as of 10/1/2021.
Eligibility and Enrollment	Eligibility Determination	40740	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall have a one-time data update for California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) cases existing prior to Release 21.9 to consider individuals as having Medicare for Non-MAGI Medi-Cal referral purposes if at least one of the following conditions are met: 1) The consumer's self-attestation to Medicare (which triggers referral) is Yes 2) The current Medicare verification indicates that the hub returns the consumer has Medicare coverage 3) The current Medicare verification is Admin Fail

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Category	Sub Category	Req ID	Requirement
Eligibility and Enrollment	Eligibility Determination	41008	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall use SmartyStreets address validation API to validate and certify home/mailling addresses that are entered in the following Portal screens. - Consumer Account Creation - Household Primary Contact - Who Lives with Primary Contact Person? - Authorized Representative Account Creation - Authorized Representative Information (React) - Report a change/Renewal Household Member Address - Employer Contact Information Required - FlexiApp - primary Contact - FlexiApp - Household Members - Agency /Agent/Admin Staff /CEC - New account creation
Eligibility and Enrollment	Eligibility Determination	41009	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall support 50 characters limit in address line 1 and 2 on the HBX and Flexi App portal screens - Consumer Account Creation - Household Primary Contact - Who Lives with Primary Contact Person? - Authorized Representative Account Creation - Authorized Representative Information (React) - Report a change/Renewal Household Member Address - Employer Contact Information Required - Consumer Delegation - FlexiApp - primary Contact - FlexiApp - Household Members
Eligibility and Enrollment	Eligibility Determination	41010	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall display and persist county code information returned from SmartyStreets Address validation API.
Eligibility and Enrollment	Eligibility Determination	41011	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall display additional message if SmartyStreets address validation indicates the suggested address as undeliverable.
Eligibility and Enrollment	Eligibility Determination	41012	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall display additional message if SmartyStreets address validation indicates the suggested address as a renamed, renumbered or converted address
Eligibility and Enrollment	Eligibility Determination	41013	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall display all the address suggestions (maximum of 10) from SmartyStreets to user on HBX and FlexiApp portal screens
Eligibility and Enrollment	Eligibility Determination	41014	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall display user friendly message on portal if secondary information (ex apartment, suite, etc) returned as missing from Smarty Streets
Eligibility and Enrollment	Eligibility Determination	41015	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall persist the address change performed via Flexi App as a new record in database and update the 'is_delete_flag' as 'Y' for old record.
Eligibility and Enrollment	Eligibility Determination	41020	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall display error/generic message to the users for different error codes received from US Street Address API.
Eligibility and Enrollment	Eligibility Determination	41036	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall display correct county information for suggested address in Address Confirmation pop up in Flexi App Primary contact screen and allow to save the County selected in dropdown in Flexi App Primary contact screen.
Eligibility and Enrollment	Eligibility Determination	41038	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall implement new headers called "Home Address", "Mailing Address" and "Contact Information" to display on the "Who is the Primary Contact for your household?" screen
Eligibility and Enrollment	Eligibility Determination	41125	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall perform a one-time closure of MAGI Medi-Cal Renewal on the California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) Portal for cases that have MAGI Medi-Cal Renewal open for 90 days or more.
Eligibility and Enrollment	Eligibility Determination	41126	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall close MAGI Medi-Cal Renewals on a monthly basis (first weekend of the month) for cases that have MAGI Medi-Cal Renewal open for 90 days or more.
Eligibility and Enrollment	Eligibility Determination	41127	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall add case notes on cases where MAGI Medi-Cal Renewal was closed.
Eligibility and Enrollment	Eligibility Determination	41172	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall turn on the Accelerated Enrollment configuration effective 07/01/2021 for the adult population from the California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) access channel.
Eligibility and Enrollment	Eligibility Determination	41173	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall add potential eligibility for Accelerated Enrollment to Checkpoint 3 of the Dynamic Application functionality.
Eligibility and Enrollment	Eligibility Determination	41208	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall remove/hide 'Lost Wages Assistance' on the 'Government & Assistance Income' page for all modes (Intake, RAC, Renewal).
Eligibility and Enrollment	Eligibility Determination	41209	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall remove the tool tip and banner for 'Lost Wages Assistance' on the 'Government & Assistance Income' page for all modes (Intake, RAC, Renewal).
Eligibility and Enrollment	Eligibility Determination	41210	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall remove/hide 'Lost Wages Assistance' on the 'What type of Income' dropdown in the Flexi App.

Category	Sub Category	Req ID	Requirement
Eligibility and Enrollment	Eligibility Determination	41211	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall allow a user to view, edit, end or delete existing "Lost Wages Assistance" income record in both the consumer view and Flexi-App View
Eligibility and Enrollment	Eligibility Determination	41212	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall update banner on the 'Lost Wages Assistance - Edit modal' page for all modes (Intake, RAC, Renewal)
Eligibility and Enrollment	Eligibility Determination	41213	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall remove the option for adding new 'Pandemic Unemployment Compensation' under the consumer view for all modes (Intake, RAC, Renewal)
Eligibility and Enrollment	Eligibility Determination	41214	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall allow all users to view, edit, end or delete existing "Pandemic Unemployment Compensation" income record.
Eligibility and Enrollment	Eligibility Determination	41215	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall update banners on the 'Unemployment - Edit Income Modal' pages for all modes (Intake, RAC, Renewal)
Eligibility and Enrollment	Eligibility Determination	41385	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall create a unique transaction name in the Transaction History table to track when a consumer Opts In, Opts Out, or does not provide a response to the Opt In.
Eligibility and Enrollment	Eligibility Determination	41487	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall update the case status to "INACTIVE" when the case is terminated.
Eligibility and Enrollment	Eligibility Determination	41500	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall record "Case Terminated" in the Case Transaction History page when Admin submits case for termination.
Eligibility and Enrollment	Eligibility Determination	41501	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall remove the question "What year do you wish to terminate participation for?" from the Terminate Case page.
Eligibility and Enrollment	Eligibility Determination	41502	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall update the language that appears in the Cancel Coverage pop-up modal on the Terminate Case page.
Eligibility and Enrollment	Eligibility Determination	41503	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall discontinue eligibility for all individuals on a case for the current benefit year the first day of the following month when a case is closed as a duplicate or CancelDER is received from SAWS.
Eligibility and Enrollment	Eligibility Determination	41504	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall discontinue eligibility for the future benefit year effective 1/1 if the case has been renewed, and is closed as a duplicate or CancelDER is received from SAWS.
Eligibility and Enrollment	Eligibility Determination	41505	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall send Account Transfers for current and future benefit years when the case has been renewed and the case is closed as a duplicate or CancelDER is received from SAWS.
Eligibility and Enrollment	Eligibility Determination	41506	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall record "Duplicate Case Closure" in the Case Transaction History page for cases closed as duplicate or CancelDER is received from SAWS.
Eligibility and Enrollment	Eligibility Determination	41748	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall provide the functionality to add an unborn child in the third trimester (trigger month 6 for month 7) of pregnancy to the existing definition of a dependent child for women who have no other children.
Eligibility and Enrollment	Eligibility Determination	41749	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall provide the functionality to determine a pregnant mother in her third trimester (trigger month 6 for month 7) of pregnancy eligibility under the ACA Parent / Caretaker Relative group (Section 1931 (b) of the ACT.
Eligibility and Enrollment	Eligibility Determination	41750	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall no longer use deprivation as an eligibility criteria for the ACA Parent/Caretaker Relatives coverage group when the individual has income at or below the income limit established in the state plan.
Eligibility and Enrollment	Eligibility Determination	41828	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall no longer use deprivation for an individual who assumes primary responsibility for a child under the age of 18 yrs or in case of a full-time student under age 19.
Eligibility and Enrollment	Eligibility Determination	41829	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall no longer use deprivation for individuals who are the spouse or domestic partner of the parent or caretaker relative even after the marriage or domestic partnership has been terminated (death or divorce). As long as they maintain primary responsibility for the child's primary care.
Eligibility and Enrollment	Eligibility Determination	42008	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall display "begin dates" for income records on the Income pages.
Eligibility and Enrollment	Eligibility Determination	42077	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall display "begin dates" for deduction records on the Deduction page.
Eligibility and Enrollment	Eligibility Determination	42078	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall display "end dates" for income records on the Income pages.
Eligibility and Enrollment	Eligibility Determination	42079	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall display "end dates" for deduction records on the Deduction page.
Eligibility and Enrollment	Eligibility Determination	42080	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall display old (end) dated income records on the Income pages.
Eligibility and Enrollment	Eligibility Determination	42081	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall display old (end) dated deduction records on the Deduction page.
Eligibility and Enrollment	Eligibility Determination	42082	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall have the functionally to collect begin dates of income on the Income Detail pages for all income types.
Eligibility and Enrollment	Eligibility Determination	42114	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall have the functionality to collect end dates of income on the Income Detail pages for all income types.
Eligibility and Enrollment	Eligibility Determination	42115	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall have the functionally to collect begin dates of deductions on the Deduction Detail page for all deduction types.

Category	Sub Category	Req ID	Requirement
Eligibility and Enrollment	Eligibility Determination	42116	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall have the functionality to collect end dates of deductions on the Deduction Detail page for all deduction types.
Eligibility and Enrollment	Eligibility Determination	42121	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall implement a configuration for cost sharing to either use the existing Permanent (Baseline) CSR program or the Temporary (Enhanced) CSR program for a benefit year.
Eligibility and Enrollment	Eligibility Determination	42122	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall require that consumers meet the APTC eligibility requirements with the exception of FPL levels in order to be eligible for the Temporary (Enhanced) CSR program.
Eligibility and Enrollment	Eligibility Determination	42123	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall implement a configuration to set the upper FPL limit for Temporary (Enhanced) CSR Eligibility Determination for a benefit year.
Eligibility and Enrollment	Eligibility Determination	42124	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall build configurability to map the Temporary (Enhanced) cost sharing level to an income band within an array of preset income bands for a benefit year.
Eligibility and Enrollment	Eligibility Determination	42125	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall grant the appropriate Temporary (Enhanced) CS level to the household for a benefit year as per the configurations built for the income FPL% of the household.
Eligibility and Enrollment	Eligibility Determination	42126	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall build 3 new CS levels : CS7 to CS9 for the Temporary (Enhanced) CSR program.
Eligibility and Enrollment	Eligibility Determination	42127	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall continue to evaluate the Permanent (Baseline) CSRs along with the Temporary (Enhanced) CSRs when a benefit year is configured ON for Temporary (Enhanced) CSR determination.
Eligibility and Enrollment	Eligibility Determination	42128	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall evaluate only the Permanent (Baseline) CSRs when a benefit year is configured OFF for Temporary (Enhanced) CSR determination.
Eligibility and Enrollment	Eligibility Determination	42129	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall send the Temporary (Enhanced) CS levels and the Permanent (Baseline) CS levels in Account Transfer, when a benefit year is configured ON for Temporary (Enhanced) CSR determination.
Eligibility and Enrollment	Eligibility Determination	42130	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall only send the Permanent (Baseline) CS levels in Account Transfer, when a benefit year is configured OFF for Temporary (Enhanced) CSR determination.
Eligibility and Enrollment	Eligibility Determination	42131	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall update the Shop and Compare tool to determine either the existing Permanent (Baseline) CSRs or the Temporary (Enhanced) CSRs for a benefit year based on the configuration setting for CSR program.
Eligibility and Enrollment	Eligibility Determination	42132	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall send the Temporary (Enhanced) CSR Attribute(s) via IND73 when a benefit year is configured ON for Temporary (Enhanced) CSR program.
Eligibility and Enrollment	Eligibility Determination	42133	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall continue to send only the Permanent (Baseline) CSR Attribute(s) via IND73 when a benefit year is configured OFF for Temporary (Enhanced) CSR program.
Eligibility and Enrollment	Eligibility Determination	42134	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall fetch the Temporary (Enhanced) CSR and Permanent (Baseline) CSR attributes from the nightly sync batch when a benefit year is configured ON for Temporary (Enhanced) CSR program.
Eligibility and Enrollment	Eligibility Determination	42135	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall fetch only the Permanent (Baseline) CSR attributes from the nightly sync batch when a benefit year is configured OFF for Temporary (Enhanced) CSR.
Eligibility and Enrollment	Eligibility Determination	42136	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall fetch the Temporary (Enhanced) CSR and Permanent (Baseline) CSR attributes from getAPI when a benefit year is configured ON for Temporary (Enhanced) CSR.
Eligibility and Enrollment	Eligibility Determination	42137	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall fetch only the Permanent (Baseline) CSR attributes from getAPI when a benefit year is configured OFF for Temporary (Enhanced) CSR.
Eligibility and Enrollment	Eligibility Determination	42138	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall display both the Temporary (Enhanced) CSR level and Permanent (Baseline) CSR level on the Budget Worksheet when the benefit year is configured ON for Temporary (Enhanced) CSR program.
Eligibility and Enrollment	Eligibility Determination	42139	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall display only the Permanent (Baseline) CSR level on the Budget Worksheet when the benefit year is configured OFF for Temporary (Enhanced) CSR program.
Eligibility and Enrollment	Eligibility Determination	42158	The system will save verification data, received electronically through for SSA (verifying SSN, Name, Date of birth, Citizenship, Incarceration status and death) , VLP Step1, ESI MEC (OPM), non-ESI MEC and EDD, for a predefined period of time, to be used in future eligibility determinations.
Eligibility and Enrollment	Eligibility Determination	42159	The system will have the ability to maintain business rules that determine how long an electronic verification can be maintained for, to be used in future eligibility determinations.
Eligibility and Enrollment	Eligibility Determination	42160	The system will have the ability to bypass calls to federal and state electronic interfaces calls when there is a valid, current, saved verification in the system.
Eligibility and Enrollment	Eligibility Determination	42161	The system will have the ability to determine when a saved electronic verification is still valid, and therefore the call to the verification interface can be bypassed.
Eligibility and Enrollment	Eligibility Determination	42173	The system will have the ability to detect changes in attested data, that would require the verification interface to be called, even if a saved verification exists.
Eligibility and Enrollment	Eligibility Determination	42190	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall allow individuals to end date/update ongoing pregnancy under application submission workflow when existing members are removed from the household
Eligibility and Enrollment	Eligibility Determination	42370	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall calculate and display preliminary eligibility results for CA Premium Subsidy in the Shop and Compare tool.
Eligibility and Enrollment	Eligibility Determination	42371	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall update the fair share adjustment percentage amount for California Premium Subsidy for the Benefit year 2023.

Category	Sub Category	Req ID	Requirement
Eligibility and Enrollment	Eligibility Determination	42434	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall create a page to collect authorization of release of tax data for annual redeterminations (renewals) for APTC/CSR.
Eligibility and Enrollment	Eligibility Determination	42435	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall allow users to change the authorization of release of tax data for annual redeterminations (renewals) for APTC/CSR at any time.
Eligibility and Enrollment	Eligibility Determination	42437	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall remove the California Residency verification check from OPA (BRE) Eligibility Determination as a condition for MAGI Medi-Cal Eligibility.
Eligibility and Enrollment	Eligibility Determination	42469	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall deny pending MAGI-Based Medi-Cal eligibility or conditional eligibility to 8E, from the requested benefit month forward- until the eligibility status is other than pending, ineligible, or conditionally eligible for 8E, when the requested benefit month is equal to or after the application month.
Eligibility and Enrollment	Eligibility Determination	42490	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall Change the current FFY question on the Personal Data-Demographic Information Page to state: Was this person in foster care in any state on his or her 18th birthday or later? If yes, this person may qualify for free Medi-Cal up to age 26 and income does not matter. For immediate coverage for former foster youth contact your county human services agency.
Eligibility and Enrollment	Eligibility Determination	42492	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall check for MEDS Medi-Cal Minimum Essential Coverage when determining MAGI Medi-Cal eligibility at application, renewal or change of circumstances.
Eligibility and Enrollment	Eligibility Determination	42493	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall disregard the results of the MEDS MEC check for existing case members when a person is being added to the household at Report a Change or Renewal.
Eligibility and Enrollment	Eligibility Determination	42502	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall determine eligibility under aid codes M7, M8, M9 or M0 when pregnancy is attested in the initial application, all other criteria is met and consumer is not eligible for any other MAGI Medi-Cal category above the pregnancy group based on the hierarchy.
Eligibility and Enrollment	Eligibility Determination	42503	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall remove the pregnancy restriction from eligibility determination of MAGI Medi-Cal Newly Adult Group (NAG) with aid codes M1 and M2 when the pregnancy status is reported as a change in circumstances.
Eligibility and Enrollment	Eligibility Determination	42504	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall retain eligibility under existing aid codes M1 or M2 when pregnancy is reported as a change of circumstance if the beneficiary otherwise remains eligible for these coverage groups (i.e., continue to meeting income, family size, citizenship/immigration criteria for the coverage group).
Eligibility and Enrollment	Eligibility Determination	42505	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall retain eligibility under existing aid codes M3 or M4 when pregnancy is reported as a change of circumstance if the beneficiary otherwise remains eligible for these coverage groups (i.e., continue to meeting income, family size, citizenship/immigration criteria for the coverage group).
Eligibility and Enrollment	Eligibility Determination	42506	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall not use the pregnancy due date as criteria to end MAGI Medi-Cal pregnancy related services, California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall use the 60-day postpartum to end the pregnancy related services. (Eliminate the hard cut off of expected delivery due date).
Eligibility and Enrollment	Eligibility Determination	42575	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall display an individual MAGI-Based Medi-Cal budget calculation including the income and deductions and family compositions for each member of the application to the administrative profiles in California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) portal.
Eligibility and Enrollment	Eligibility Determination	42576	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall display an APTC/CSR Family budget calculation including the income and deductions and family compositions for each member of the application to the administrative profiles in California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) portal.
Eligibility and Enrollment	Eligibility Determination	42577	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall have Eligibility Determination budget calculations for MAGI Medi-Cal and APTC/CSR viewable in California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) Portal to admin users for up to 5 years and available upon request if over 60 months.
Eligibility and Enrollment	Eligibility Determination	42578	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall display a budget worksheet for all the members included in a case if Eligibility Determination has been processed.
Eligibility and Enrollment	Eligibility Determination	42580	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall create an Application History Page to displays application history.
Eligibility and Enrollment	Eligibility Determination	42582	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall allow admin users to access the most current prospective Monthly MAGI Medi-Cal and Annual APTC/CSR budget calculation
Eligibility and Enrollment	Eligibility Determination	42583	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall allow admin users to access the historical Monthly MAGI Medi-Cal and Annual APTC/CSR budget calculation
Eligibility and Enrollment	Eligibility Determination	42584	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall display the eligibility determination date and programs effective date for which the Monthly MAGI Medi-Cal and Annual APTC/CSR budget calculation was performed
Eligibility and Enrollment	Eligibility Determination	42585	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall include the following data/status in the budget worksheet at the individual/family level: - Soft Paused Due To: - Person Primary Tax Filer: - Person included in Primary Tax Filer's Tax household: - Person Plans to File Taxes: - Person Expected to be Required to File Taxes: - Person Tax Filing Status: - Person Tax Dependent Status: - Who claims this person as a tax dependent?

Category	Sub Category	Req ID	Requirement
Eligibility and Enrollment		42586	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall include the following information in the Individual Monthly MAGI Medi-Cal budget calculation: a. Employment Income (Monthly) b. Self-Employment Income (Monthly) c. Other Income (Monthly) d. Total Income (sum of a, b, c) e. Allowable deductions (Monthly) f. Total Income after Deductions (Subtract e from d) g. Projected Monthly Income h. Countable Income (Sum of f and g) i. Number of household members + Number of expected babies j. Federal Poverty Level for (i) (Monthly) k. FPL % for individual (Divide (h) by (j) and round) MAGI Medi-Cal Eligible? Meets 435.603(f)(2)(i-iii) to use a non tax filer household composition for MAGI Medi-Cal Meets 435.603(i) exception to use APTC income/deduction calculations for MAGI Medi-Cal determination Meets 435.119(c): Adults ineligible to the New Adult Group due to dependent child under age 19 without Minimum Essential Coverage
	Eligibility Determination		
Eligibility and Enrollment		42587	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall include the following information in the Family Annual APTC/CSR budget calculation: (a) Employment Income (Yearly) (b) Self-Employment Income (Yearly) (c) Other Income (Yearly) (d) Projected Annual Income (e) Total Household Income (sum of a, b, c, & d) (f) Allowable Deductions (Yearly) (g) Countable Income (subtract f from e) (h) Number of household members (i) Federal Poverty Level for (h) (Yearly) (j) FPL % for individual (Divide (g) by (i) and round) Eligible for Tax Credit and Cost Sharing Reductions? Eligible for Tax Credit only? Eligible for AI/AN Cost Sharing Reduction? Benchmark plan monthly premium: Maximum Annual Premium Amount: Maximum Monthly Premium Amount:
	Eligibility Determination		
Eligibility and Enrollment	Eligibility Determination	42588	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall allow the admin users to access the members in the household that are counted in the household composition for each member in the budget worksheet
Eligibility and Enrollment		42589	The Application History page shall display the: Request Type User ID Date/Time Requested Determination Start Date Eligibility Results (Link) Application PDF (Link).
	Eligibility Determination		
Eligibility and Enrollment	Eligibility Determination	42598	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall update the binding arbitration agreement to move the Check box and Tax Question above the Binding Arbitration Agreement.
Eligibility and Enrollment	Eligibility Determination	42630	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall update the MEC table to match the most current MEC Table.
Eligibility and Enrollment	Eligibility Determination	42778	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall update the latest version of Verify Lawful Presence Service (VLP)

Appendix A-4 - SOW Exhibit A - System Requirements Specification
(Extracted from CalHEERS RTM)

Category	Sub Category	Req ID	Requirement
Eligibility and Enrollment	Eligibility Determination	42779	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall request the 5 year bar verification and store the results.
Eligibility and Enrollment	Eligibility Determination	42781	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) will update the portal pages to collect immigration documentation from California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) and SAWS Channels based on requirements.
Eligibility and Enrollment	Eligibility Determination	42782	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall provide the 5 year bar and qualified non-citizen electronic verifications result to SAWS
Eligibility and Enrollment	Eligibility Determination	42788	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) system shall check electronic sources for Income, Incarceration and Deceased verifications when the eligibility run reason is 'RE'.
Eligibility and Enrollment	Eligibility Determination	42789	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) system shall leverage cached verifications (is applicable) for income, Incarceration and Deceased verifications when the eligibility run reason is 'RM'.
Eligibility and Enrollment	Eligibility Determination	42790	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) system shall leverage cached verifications (if applicable) for income, Incarceration and Deceased verifications when running renewals via the California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) auto-renewal batch.
Eligibility and Enrollment	Eligibility Determination	42795	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall identify cases that were not picked up for Renewal Mode and are now eligible to a Covered California Program and are in an 'enrolled' status.
Eligibility and Enrollment	Eligibility Determination	42796	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall identify cases that have not initiated a 2015 benefit year application during open enrollment.
Eligibility and Enrollment	Eligibility Determination	42797	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall auto-renew these cases for 2015 in a nightly batch run that begins no later than 12/01/14 through 12/15/14.
Eligibility and Enrollment	Eligibility Determination	42798	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall generate NOD01 and NOD60.
Eligibility and Enrollment	Eligibility Determination	42799	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall generate a report with case name, case id, etc. for each batch run.
Eligibility and Enrollment	Eligibility Determination	42829	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall provide the functionality to automatically determine effective dates of temporary coverage timeframes based on program eligibility rules.
Eligibility and Enrollment	Eligibility Determination	42842	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall allow selection of 1/1/2015 coverage start date through the portal through midnight 12/21/2014.
Eligibility and Enrollment	Eligibility Determination	42850	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall provide the functionality to display online the results of the eligibility determination or redetermination and the reasons and data associated with the result.
Eligibility and Enrollment	Eligibility Determination	42851	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall provide the functionality to allow an applicant choose or decline a reduced or no advanced premium tax credit for which they are eligible.
Eligibility and Enrollment	Eligibility Determination	42852	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall provide the functionality to determine the category of cost-sharing reductions based on Federal Poverty Level (FPL).
Eligibility and Enrollment	Eligibility Determination	42883	For a mixed household case where Medi-Cal is in renewal, SAWS shall send the transaction as RE for the entire household. California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall determine if APTC is in renewal. If APTC is not in renewal, the system shall process APTC as report-a-change.
Eligibility and Enrollment	Eligibility Determination	42884	For a mixed household where APTC is in renewal, the California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) system shall process Medi-Cal as Continuing (CO). The Medi-Cal will be finalized with a confirmation from SAWS
Eligibility and Enrollment	Eligibility Determination	42890	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) system shall capture all identified income types regardless if they are counted or not counted for program eligibility determination. (add list income types when available)
Eligibility and Enrollment	Eligibility Determination	42891	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) system shall use non-taxable interest income, non-taxable social security benefits and non-taxable foreign earned income in the calculation for MAGI-Based M/C program eligibility.
Eligibility and Enrollment	Eligibility Determination	42892	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall restrict the lump sum frequency only to the identified income types. (add list income types when available)
Eligibility and Enrollment	Eligibility Determination	42893	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall restrict the lump sum frequency only to the identified deduction types. (add list income types when available)
Eligibility and Enrollment	Eligibility Determination	42894	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall not use projected yearly income data at the person level in the MAGI-Based M/C calculation when projected yearly income data is collected.
Eligibility and Enrollment	Eligibility Determination	42895	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) system shall use allowable deduction types in the calculation for MAGI-Based M/C program eligibility. (Add income deduction types when available)
Eligibility and Enrollment	Eligibility Determination	42904	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall provide the functionality to screen individuals for non-MAGI eligibility criteria (e.g. blind or disabled, etc.) and send a referral, including application data and document images to the appropriate SAWS.
Eligibility and Enrollment	Eligibility Determination	42905	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall provide the functionality to send a referral, including application data and document images, to the appropriate SAWS for potential eligibility for screened non-MAGI Medi-Cal.
Eligibility and Enrollment	Eligibility Determination	42906	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall provide the functionality to screen individuals for non-MAGI eligibility criteria such as aged, blind, disabled, receiving Medicare benefits, institutionalized, long- term care or former foster care so data can be sent to appropriate SAWS for full eligibility determination.

Category	Sub Category	Req ID	Requirement
Eligibility and Enrollment	Eligibility Determination	42919	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall update income levels of the following aid codes to the following: M7: 0% FPL up to and including 138% FPL M8: 0% FPL up to and including 138% FPL M9: above 138% FPL up to and including 213% FPL M0: above 138% FPL up to and including 213% FPL
Eligibility and Enrollment	Eligibility Determination	42920	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall use the updated income levels for Pregnancy Aid Codes M7, M8, M9, and M0 for intake and continuing applications effective July 1st, 2015.
Eligibility and Enrollment	Eligibility Determination	42921	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall generate a report at the time of implementation of this change, ordered by county, for the targeted mailing population of the cases that have a household member with the M9 Aid Code between 60% and 138% of FPL that includes the following information: - California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) Case ID - SAWS Case ID (When available) - First Name and Last Name of the affected Case Member - Primary Contact Address - Phone Number and Email Address (when available) - CIN
Eligibility and Enrollment	Eligibility Determination	42922	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall use the Annual 2015 Subsidy FPLs as of the month of the effective date per Covered California Guidance.
Eligibility and Enrollment	Eligibility Determination	42923	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall use the Annual 2015 Subsidy FPLs for California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) access channel applications and reported changes beginning with Renewals in October 2015.
Eligibility and Enrollment	Eligibility Determination	42924	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall use the Annual 2015 Subsidy FPLs for SAWS access channel applications and reported changes beginning with Renewals in October 2015.
Eligibility and Enrollment	Eligibility Determination	42925	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall use the 2015 Monthly MAGI Medi-Cal FPL table for Anonymous Screening as of the month of the effective date per DHCS and Covered California Guidance.
Eligibility and Enrollment	Eligibility Determination	42926	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall use the 2015 Monthly MAGI Medi-Cal FPL table for Quick Sort as of the month of the effective date per DHCS and Covered California Guidance.
Eligibility and Enrollment	Eligibility Determination	42927	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall update the Monthly MAGI Medi-Cal FPL Table in OPA with the Actual 2015 FPLs.
Eligibility and Enrollment	Eligibility Determination	42928	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall use the Monthly 2015 MAGI Medi-Cal FPLs as of the month of the effective date per DHCS Guidance.
Eligibility and Enrollment	Eligibility Determination	42929	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall use the Monthly 2015 MAGI Medi-Cal FPLs for California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) access channel applications and reported changes on or after January 1, 2015.
Eligibility and Enrollment	Eligibility Determination	42930	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall use the Monthly 2015 MAGI Medi-Cal FPLs for SAWS access channel applications and reported changes on or after January 1, 2015.
Eligibility and Enrollment	Eligibility Determination	42931	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall use the 2015 Monthly MAGI Medi-Cal FPL table for SAWS access channel Retroactive changes with an assessment date requested by SAWS on or after January 1, 2015.
Eligibility and Enrollment	Eligibility Determination	42932	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall update the Annual 2015 Subsidy FPL Table in OPA with the Actual 2015 FPLs.
Eligibility and Enrollment	Eligibility Determination	42933	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall provide the functionality to calculate advance premium tax credit and cost sharing reduction.
Eligibility and Enrollment	Eligibility Determination	42957	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall provide the functionality to notify the applicant that they may be eligible for other State programs and direct them to the appropriate links (Cal Works, CalFresh, etc.)
Eligibility and Enrollment	Eligibility Determination	42974	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall provide the functionality to send basic application information, upon consumer request and or consent, to the appropriate SAWS in order to process for other non-health services.
Eligibility and Enrollment	Eligibility Determination	42986	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) system shall perform a database batch update to remove the negative action indicators for the 660,000 cases that were identified through California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) analysis that currently exist in the production environment. Batch sweep/update to be run prior to implementing CR 28702.
Eligibility and Enrollment	Eligibility Determination	42995	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall program the 5% MAGI income disregard for determining income eligibility under the ACA Parent/Caretaker Relative coverage group for certain non-pregnant adults who are not eligible for enrollment in the ACA New Adult coverage group.
Eligibility and Enrollment	Eligibility Determination	42996	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) system shall apply the 5% MAGI income disregard to the non-pregnant Parent/Caretaker Relative group when: a) a child under 19 linking the individual is not enrolled in minimum essential coverage (MEC), or b) the non-pregnant Parent/Caretaker Relative is enrolled for coverage under Medicare Parts A or B, or c) the non-pregnant Parent/Caretaker Relative is 65 years old or older.
Eligibility and Enrollment	Eligibility Determination	42998	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall change the "Add Employment Income," "Add Other Income," and "Add Deductions" pages so that at intake and when income changes are reported in the portal and the consumer selects a frequency of Paid Daily or Hourly, the "days per week" or "hours per week" fields will be required.
Eligibility and Enrollment	Eligibility Determination	42999	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) Business Rules Engine shall default existing null values for hours per week and days per week to a value of "1" for those sub-frequencies.

Category	Sub Category	Req ID	Requirement
Eligibility and Enrollment	Eligibility Determination	43000	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) Business Rules Engine shall default e-HIT null values for hours per week and days per week to a value of "1" for those sub-frequencies.
Eligibility and Enrollment	Eligibility Determination	43001	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall change the "Add Employment Income," "Add Other Income," and "Add Deductions" panels so that on the Flexible Application page when the user selects a frequency of Paid Daily or Hourly, the "days per week" or "hours per week" fields will be required.
Eligibility and Enrollment	Eligibility Determination	43002	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall program the eligibility rules for ACA-related mandatory categorically needy and optional Former Foster Youth coverage groups and assign the 4M aid code to them.
Eligibility and Enrollment	Eligibility Determination	43003	"Per Federal Regulations 42 CFR 435.150 and California Welfare and Institutions Code 14005.28, the California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall use the following criteria to determine conditional eligibility for mandatory categorically needy and optional FFY programs using aid code 4M: 1) Were enrolled in foster care under the responsibility of the State (any state) or tribe and enrolled in Medicaid under the State's Medicaid State Plan or 1115 demonstration waiver upon obtaining age 18, or at such higher age at which the State's or Tribes foster care assistance ends under title IV-E of the Act, and 2) the applicant is under age 26, and 3) No income test is required."
Eligibility and Enrollment	Eligibility Determination	43004	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall determine conditional eligibility for self-attested Former Foster Youth (FFY) individuals, as per Federal Regulations 42 CFR 435.150 and 435.226 and state law, California Welfare and Institutions Code 14005.28 and 14005.285.
Eligibility and Enrollment	Eligibility Determination	43005	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) system shall assign the 4M Aid Code to individuals when a determination is made via the California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) access channel.
Eligibility and Enrollment	Eligibility Determination	43006	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) system shall assign the 4M Aid Code to applicable individuals when a full MAGI determination is sent via eHIT.
Eligibility and Enrollment	Eligibility Determination	43035	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall provide the functionality to notify an enrollee in real-time of changes to APTC or CSR calculations based on income updates provided via the Web Portal.
Eligibility and Enrollment	Eligibility Determination	43040	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall remove Former Foster Youth from the 4M Aid code at Age 26.
Eligibility and Enrollment	Eligibility Determination	43041	"The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) system shall add the following pop-up explaining to an FFY over age 26 their options to be assessed for other health options: a) Header : 26-year-old Former Foster Youth – Need More Information b) Pop-Up Information: ""Right now you are in the Medi-Cal program for Former Foster Youth. This program gives free Medi-Cal to people who were in foster care at age 18 or older. You qualified for this Medi-Cal program until your 26th birthday. On [X date] you turned 26. We looked at the information we have about you to decide if you still qualify for Medi-Cal, but we now need more information from you, such as your income. This information will help to decide if you still qualify for Medi-Cal or another affordable health program. You can give us this information online through Covered California or you can contact your county Medi-Cal worker. Your Medi-Cal will continue while your information is checked to see if you are still eligible for another Medi-Cal program or another affordable health program."" "
Eligibility and Enrollment	Eligibility Determination	43042	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) system will accept and process all MAGI determinations from the SAWS Access Channel for FFY over age 26 and return a full MAGI determination including a new aid code.
Eligibility and Enrollment	Eligibility Determination	43043	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) system shall add logic to allow FFY to be a part of a household while maintaining their 4M status.
Eligibility and Enrollment	Eligibility Determination	43044	"The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) system shall add the following information explaining to FFY that their income is required if they are a part of a household when they attest to being a former foster youth: a) Header : Applying with Other Household Members b) Pop-Up Information: ""If a former foster youth applies for health insurance with other household members, such as a their child or spouse, then their income information must be given to decide whether those other household members will get help paying for health insurance. The former foster youth will qualify for Medi-Cal regardless of their income information.""
Eligibility and Enrollment	Eligibility Determination	43045	"The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall provide information for Former Foster Youth on the Eligibility Results page: ""Good news! Your Medi-Cal application dated [x] has been conditionally approved and will be reviewed by the county. Your Medi-Cal coverage begins on [Y] and you can begin using health care services through Medi-Cal on this date. Your information will be sent to your county social services office, and the county will check that you were in foster care at age 18 or older. If the county has any difficulty checking your information, the county will contact you and ask for more information. The Former Foster Youth Program gives free Medi-Cal to individuals who were in foster care at age 18 or older and their income does not matter.""
Eligibility and Enrollment	Eligibility Determination	43046	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) system shall exclude the Former Foster Youth individual from the initial and ongoing NOD02 while they receive conditional or full eligibility under the 4M Aid Code.
Eligibility and Enrollment	Eligibility Determination	43047	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) system shall exclude the Former Foster Youth individual from the initial and ongoing NOD02 while they receive a negative action under the 4M Aid Code.

Category	Sub Category	Req ID	Requirement
Eligibility and Enrollment	Eligibility Determination	43048	"The California Healthcare Eligiblity, Enrollment and Retention System (CalHEERS) system add language to the NOD01 for Former Foster Youth only. The language shall read: Good news! Based on the information you gave us, you have been conditionally approved for the Medi-Cal program for former foster youth. You can begin using your Medi-Cal while your information is sent to your county social services office. The county social services office will contact you and ask for more information if needed. You will get a separate notice from your county social service office telling you about your ongoing Medi-Cal eligibility. If you have already received a notice from your county about your Medi-Cal eligibility, please disregard this message. If you have questions, please contact your county social services office. Covered California Eligibility You do not qualify for Covered California with premium assistance (a federal tax credit) or cost-sharing reductions (lower co-payments and deductibles) because you qualify for the Medi-Cal program for former foster youth. "
Eligibility and Enrollment	Eligibility Determination	43049	The California Healthcare Eligiblity, Enrollment and Retention System (CalHEERS) system shall discontinue a Former Foster Youth from a 4M when a Negative Action is received.
Eligibility and Enrollment	Eligibility Determination	43050	"The California Healthcare Eligiblity, Enrollment and Retention System (CalHEERS) system will revise the foster care referral question to say: ""Was this person in foster care in any state on his or her 18th birthday or later? If yes ,this person may qualify for free Medi-Cal up to age 26 and his or her income does not matter.""
Eligibility and Enrollment	Eligibility Determination	43051	"The California Healthcare Eligiblity, Enrollment and Retention System (CalHEERS) flexible application page will revise the foster care referral question to say: ""Was this person in foster care in any state on his or her 18th birthday or later? If yes ,this person may qualify for free Medi-Cal up to age 26 and his or her income does not matter.""
Eligibility and Enrollment	Eligibility Determination	43052	"If the answer is yes to the foster care referral question, display the following question: ""Where was this person in foster care on his or her 18th birthday or later?"" (Drop down listing all states, ""I don't know"", ""US Territories"", ""Washington, D.C."", and ""An American Indian or Alaska Native Tribe"")"
Eligibility and Enrollment	Eligibility Determination	43053	"The California Healthcare Eligiblity, Enrollment and Retention System (CalHEERS) flexible application page will include the question ""Where was this person in foster care on his or her 18th birthday or later?"" (Drop down listing all states, ""I don't know"", ""US Territories"", ""Washington, D.C."", and ""An American Indian or Alaska Native Tribe"")"
Eligibility and Enrollment	Eligibility Determination	43054	"The California Healthcare Eligiblity, Enrollment and Retention System (CalHEERS) system will revise the information for Former Foster Youth on the Get Help Page to say: ""If you were in foster care in any state on your 18th birthday or later, you may qualify for free Medi-Cal until age 26. Your income does not matter, and you do not need to give income or tax information when you sign up for Medi-Cal. The easiest way for you to apply is through your county social services office. You can also sign up online through Covered California, but you will be asked questions about your income and taxes. You do not need to give this information if you sign up through your county social services office. You can apply through the county using a simple one-page form for former foster youth, called the MC 250A, or by giving your information over the phone. You can get the MC 250A form here: http://www.dhcs.ca.gov/formsandpubs/forms/Forms/MCED/MC_Forms/MC250A_Eng.pdf . Most counties have a specific phone number, office, or staff to help former foster youth sign up for Medi-Cal. To find out the former foster youth contact for your county, go to: http://www.dhcs.ca.gov/services/medi-cal/Pages/CountyOffices.aspx . For more information about the Medi-Cal program for former foster youth, go to http://www.dhcs.ca.gov/services/medi-cal/eligibility/Pages/FFY.aspx OR www.covereditil26.org .""
Eligibility and Enrollment	Eligibility Determination	43055	"The California Healthcare Eligiblity, Enrollment and Retention System (CalHEERS) system shall add a pop-up for Former Foster Youth on the Demographics Page when there is only one applicant and they attest to being Former Foster Youth. a) Header: Medi-Cal for Former Foster Youth b) Pop-Up Information ""If you were in foster care in any state on your 18th birthday or later, you may qualify for free Medi-Cal until age 26 and your income does not matter. You can 1) continue with this application or 2) sign up for Medi-Cal by contacting your county social services office. The easiest way for you to apply is through your county social services office. If you continue with this on-line application you will be asked questions about your income or taxes. If you apply through the county, you will not have to give this information. You can apply over the phone by telling the county worker you are a former foster youth or by using a simple one-page form (MC 250A). You can get the MC 250A form online at: http://www.dhcs.ca.gov/formsandpubs/forms/Forms/MCED/MC_Forms/MC250A_Eng.pdf Most counties have a specific phone number, office, or staff to help former foster youth sign up for Medi-Cal. To find out who the former foster youth contact is in your county, go to: http://www.childrennow.org/uploads/documents/Covereditil26_CountyContactList.pdf For more information about the Medi-Cal program for former foster youth, go to http://www.dhcs.ca.gov/services/medi-cal/eligibility/Pages/FFY.aspx OR www.covereditil26.org "" "
Eligibility and Enrollment	Eligibility Determination	43060	If an active monthly income record for the benefit year and Projected Annual Income are both available, The California Healthcare Eligiblity, Enrollment and Retention System (CalHEERS) System shall divide PAI by 12, compare PAI divided by 12 with user-entered monthly income, and then use the lower of the two (PAI divided by 12 or user-entered monthly income). If user-entered income is not provided for the benefit year, PAI divided by 12 shall be used.
Eligibility and Enrollment	Eligibility Determination	43061	When determining the MAGI Medi-Cal individual household monthly income, the California Healthcare Eligiblity, Enrollment and Retention System (CalHEERS) System, when both the user-entered Projected Annual Income divided by 12 and user-entered monthly income are of equal values, shall use the Projected Annual Income divided by 12 value.

Category	Sub Category	Req ID	Requirement
Eligibility and Enrollment	Eligibility Determination	43062	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) system shall alert consumers changing an income record or Projected Annual Income that they should review their Income Summary Page.
Eligibility and Enrollment	Eligibility Determination	43064	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall ensure that the question, "Is this person a U.S. Citizen or National?" will not appear in the application for household members who answered 'No' to the following question. 'Does this person want health insurance? Even if you have insurance now, you may find better coverage or lower costs.'
Eligibility and Enrollment	Eligibility Determination	43065	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall ensure that the question, "Is this person a U.S. Citizen or National?" will not appear in the single page flexible application for household members who answered 'No' to the following question. 'Does this person want health insurance? Even if you have insurance now, you may find better coverage or lower costs.'
Eligibility and Enrollment	Eligibility Determination	43066	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall ensure that the question, "Check this box if this person has satisfactory immigration status" will not appear in the application for household members who answered 'No' to the following question. 'Does this person want health insurance? Even if you have insurance now, you may find better coverage or lower costs.'
Eligibility and Enrollment	Eligibility Determination	43067	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall ensure that the question, "Check this box if this person has satisfactory immigration status" will not appear in the single page flexible application for household members who answered 'No' to the following question. 'Does this person want health insurance? Even if you have insurance now, you may find better coverage or lower costs.'
Eligibility and Enrollment	Eligibility Determination	43068	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall ensure that all immigration status question follow ups will not appear in the application for household members who answered 'No' to the following question. 'Does this person want health insurance? Even if you have insurance now, you may find better coverage or lower costs.'
Eligibility and Enrollment	Eligibility Determination	43069	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall ensure that all immigration status question follow ups will not appear in the single page flexible application for household members who answered 'No' to the following question. 'Does this person want health insurance? Even if you have insurance now, you may find better coverage or lower costs.'
Eligibility and Enrollment	Eligibility Determination	43070	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall ensure that the following question, "Has this person lived in the U.S. since 1996?" will not appear in the application for household members who answered 'No' to the following question. 'Does this person want health insurance? Even if you have insurance now, you may find better coverage or lower costs.'
Eligibility and Enrollment	Eligibility Determination	43071	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall ensure that the following question, "Has this person lived in the U.S. since 1996?" will not appear in the single page flexible application for household members who answered 'No' to the following question. 'Does this person want health insurance? Even if you have insurance now, you may find better coverage or lower costs.'
Eligibility and Enrollment	Eligibility Determination	43072	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall ensure that the following question, "Is this person an honorably discharged veteran or active duty member of the military?" will not appear in the application for household members who answered 'No' to the following question. 'Does this person want health insurance? Even if you have insurance now, you may find better coverage or lower costs.'
Eligibility and Enrollment	Eligibility Determination	43073	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall ensure that the following question, "Is this person an honorably discharged veteran or active duty member of the military?" will not appear in the single page flexible application for household members who answered 'No' to the following question. 'Does this person want health insurance? Even if you have insurance now, you may find better coverage or lower costs.'
Eligibility and Enrollment	Eligibility Determination	43074	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall ensure that the question "Does this person have a physical, mental, emotional, or developmental disability?" will not appear in the application for household members who answered 'No' to the following question. 'Does this person want health insurance? Even if you have insurance now, you may find better coverage or lower costs.'
Eligibility and Enrollment	Eligibility Determination	43075	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall ensure that the question "Does this person have a physical, mental, emotional, or developmental disability?" will not appear in the single page flexible application for household members who answered 'No' to the following question. 'Does this person want health insurance? Even if you have insurance now, you may find better coverage or lower costs.'
Eligibility and Enrollment	Eligibility Determination	43076	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall change the following question on the portal from: "Does this person have a medical expense in the last 3 months that you need help paying for?" to "Do you want Medi-Cal to help pay for medical expenses you had in the 3 months prior to application month? If yes, a referral will be made to your local county office. They will contact you to get more information."
Eligibility and Enrollment	Eligibility Determination	43077	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall change the following question on the single page flexible application from: "Does this person have a medical expense in the last 3 months that you need help paying for?" to "Do you want Medi-Cal to help pay for medical expenses you had in the 3 months prior to application month? If yes, a referral will be made to your local county office. They will contact you to get more information."

Category	Sub Category	Req ID	Requirement
Eligibility and Enrollment	Eligibility Determination	43078	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall ensure that the question, "Does this person need help with long-term care or home and community-based services?" will not appear in the application for household members who answered 'No' to the following question.
Eligibility and Enrollment	Eligibility Determination	43079	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall ensure that the question, "Does this person need help with long-term care or home and community-based services?" will not appear in the single page flexible application for household members who answered 'No' to the following question. 'Does this person want health insurance? Even if you have insurance now, you may find better coverage or lower costs.'
Eligibility and Enrollment	Eligibility Determination	43080	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall ensure that the following question, "Does this person receive Medicare benefits?" will not appear in the application for household members who answered 'No' to the following question.
Eligibility and Enrollment	Eligibility Determination	43081	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall ensure that the following question, "Does this person receive Medicare benefits?" will not appear in the single page flexible application for household members who answered 'No' to the following question. 'Does this person want health insurance? Even if you have insurance now, you may find better coverage or lower costs.'
Eligibility and Enrollment	Eligibility Determination	43082	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall display text on the eligibility results page to explain to household members who answered 'No' to the following question that they did not apply for coverage. 'Does this person want health insurance? Even if you have insurance now, you may find better coverage or lower costs.'
Eligibility and Enrollment	Eligibility Determination	43083	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall include a "click here" link in the display text on the eligibility results page for household members who answered 'No' to the following question. 'Does this person want health insurance? Even if you have insurance now, you may find better coverage or lower costs.' On click of "click here" link, a pop-up window will be generated with additional instructions and "Continue" button to return to the home page.
Eligibility and Enrollment	Eligibility Determination	43084	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall generate non-applying snippets for the NOD01 when at least one member of the household answered 'No' to the following question. 'Does this person want health insurance? Even if you have insurance now, you may find better coverage or lower costs.'
Eligibility and Enrollment	Eligibility Determination	43085	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall treat non-applying members, who are part of the tax filing household, whose US Citizenship/National/Satisfactory Immigration status or Undocumented status is unknown to California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) as citizens when calculating APTC eligibility for the applying members of the tax filing household.
Eligibility and Enrollment	Eligibility Determination	43086	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall not call the Verify Lawful Presence services for non-applying members.
Eligibility and Enrollment	Eligibility Determination	43087	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall not display existing user entered data in the summary pages for non-applicants for the following question set: - Is this person a U.S. Citizen or National? - Check this box if this person has satisfactory immigration status - all immigration status question follow up questions - Has this person lived in the U.S. since 1996? - Is this person an honorably discharged veteran or active duty member of the military? - Does this person have a physical, mental, emotional, or developmental disability? - Does this person need help with long-term care or home and community-based services? - Does this person receive Medicare benefits?
Eligibility and Enrollment	Eligibility Determination	43088	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall direct a 4M Aid Code recipient on an application alone to the Get Help With Costs page when they click the Report a Change or Resume Change Report buttons and are 26 and over in the California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) Access Channel. The user will be required to follow the intake-mode full MAGI page flow after clicking the button and receive a full MAGI determination including a new aid code.
Eligibility and Enrollment	Eligibility Determination	43089	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) system shall not apply business validations or persist data to the below element when provided by SAWS through Eligibility Determination Request (EDR) for a consumer who is not applying for health coverage: • ReceiveMediCareBenefitsInd
Eligibility and Enrollment	Eligibility Determination	43090	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall not store the “DocumentInfo” node when provided by SAWS through Eligibility Determination Request (EDR) for a consumer who is not applying for health coverage.
Eligibility and Enrollment	Eligibility Determination	43091	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) eHIT Interface shall not persist the “DocumentInfo” node in the Determination Eligibility Response (DER) for a consumer who is not applying for health coverage.
Eligibility and Enrollment	Eligibility Determination	43092	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall not store the “NONMagiReferrals” node when provided by SAWS through Eligibility Determination Request (EDR) for consumer who is not applying for health coverage.
Eligibility and Enrollment	Eligibility Determination	43093	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) eHIT Interface shall not send the “NonMAGIReferrals” node in the Determination Eligibility Response (DER) for a consumer who is not applying for health coverage.

Appendix A-4 - SOW Exhibit A - System Requirements Specification
(Extracted from CalHEERS RTM)

OTSI CalHEERS RFP #73040873 Addendum 1
October 31, 2025

Category	Sub Category	Req ID	Requirement
Eligibility and Enrollment	Eligibility Determination	43104	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall collect the following information for notifying all current employers when a consumer indicates they are employed: o Employer Name o Employer Mailing Address Line 1, Address Line 2, City, State, Zip, County
Eligibility and Enrollment	Eligibility Determination	43105	"The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall collect the following additional information for all current employers for random sampling when a consumer indicates they are employed: o Employer Phone Number o Employer Contact Person"
Eligibility and Enrollment	Eligibility Determination	43106	"The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall collect the following additional information for all current employers for 1095 reporting when a consumer indicates they are employed: o Employer Identification Number (EIN) o if address is foreign, Employer Mailing Address Line 1, Employer Mailing Address Line 2, City Name, Country Code, Foreign Province Name, Foreign Postal Code"
Eligibility and Enrollment	Eligibility Determination	43108	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall use street level address validation if employer mailing address is within USA (same as CR 9494)
Eligibility and Enrollment	Eligibility Determination	43167	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall add defined Babel pages to all outbound NOD01 notices.
Eligibility and Enrollment	Eligibility Determination	43168	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall add a new Income Verification page to all NOD01 notices that indicate income verification inconsistencies for the consumer household.
Eligibility and Enrollment	Eligibility Determination	43169	"The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall annually update applicable percentages to calculate fair share (required contribution) that determines the maximum annual APTC. Updates shall be made based on annual IRS publication. For 2016 benefit year, updates shall be based on IRS guidance in the following link: http://www.irs.gov/irb/2014-50_IRB/ar11.html "
Eligibility and Enrollment	Eligibility Determination	43199	When eligibility is determined and the consumer is eligible to APTC, California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall display the maximum annual APTC amount and the prospective maximum monthly APTC amount
Eligibility and Enrollment	Eligibility Determination	43200	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall provide a field for admin users to input a plan selection date in order to derive the correct plan effective date when the system date is different from the application date
Eligibility and Enrollment	Eligibility Determination	43201	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall use the assessment date to derive program eligibility for SEP reasons marriage/domestic partnership and loss of MEC, and use the plan selection date to derive coverage start date (1st of month following plan selection date) from the standard California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) application
Eligibility and Enrollment	Eligibility Determination	43202	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall use the assessment date to derive program eligibility for SEP reasons marriage/domestic partnership and loss of MEC, and use the plan selection date to derive coverage start date (1st of month following plan selection date) from the flexible app
Eligibility and Enrollment	Eligibility Determination	43203	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall modify the Coverage Date Category label for "Life Event Date" on the Application Signature page to "Birth/Adoption/Appeals Mid-Month" on the standard California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) application
Eligibility and Enrollment	Eligibility Determination	43204	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall modify the Coverage Date Category label for "Life Event Date" on the Application Signature page to "Birth/Adoption/Appeals Mid-Month" on the flexible application
Eligibility and Enrollment	Eligibility Determination	43207	"When one or more household members are not lawfully present, the APTC program eligibility for the remaining household members should be evaluated using a FPL that 1) does not consider those not lawfully present individuals in the household size, and 2) reduces the annual household income by the following multiplier: 100% FPL for the family size excluding the unlawfully-present individual(s) ÷ 100% FPL for the family size including the unlawfully-present individual(s). "
Eligibility and Enrollment	Eligibility Determination	43208	"When one or more household members are not lawfully present and some members of the household meet the program requirements for APTC, the maximum premium percent of income should be calculated using a FPL that 1) does not consider those not lawfully present individuals in the household size, and 2) reduces the annual household income by the following multiplier: 100% FPL for the family size excluding the unlawfully-present individual(s) ÷ 100% FPL for the family size including the unlawfully-present individual(s). "
Eligibility and Enrollment	Eligibility Determination	43209	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall display the Annual APTC amount and the Monthly APTC amount on the Tax Credit & Cost Sharing Reduction Income Budget.
Eligibility and Enrollment	Eligibility Determination	43210	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) system shall change the title of 'Household PTC Info.' pop up to 'Tax Filing Status' and replace the content of the pop up with 'To qualify for health insurance through Covered California, married applicants and their spouse must file taxes jointly.' in 'Personal Data – Tax Information' page.
Eligibility and Enrollment	Eligibility Determination	43234	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) system shall display a validation message on the flexible app stating 'To qualify for health insurance through Covered California, married applicants and their spouse must file taxes jointly.' in 'Personal Data – Tax Information' page" when 'Married, Filing Separately' is selected
Eligibility and Enrollment	Eligibility Determination	43255	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) system shall include eligibility determination rules for the Medi-Cal Access Program (MCAP) as an Insurance Affordability Program

Category	Sub Category	Req ID	Requirement
Eligibility and Enrollment	Eligibility Determination	43256	"The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall determine eligibility for pregnant women to the Medi-Cal Access Program (MCAP) based on the following eligibility criteria: *individual must be a California resident; and *individual must meet the income thresholds of greater than 213% FPL and up to and including 322% FPL; and *individual must be female and pregnant at application; and *individual is not currently receiving no-cost full scope Medi-Cal (MEDS MEC); and *individual is not currently covered by private Employer/Non-Employer Sponsored Insurance; and *individual is not currently enrolled in Medicare as of the application date; and *individual is verified as not incarcerated; and *individual is verified as not deceased"
Eligibility and Enrollment	Eligibility Determination	43258	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall determine MCAP effective eligibility date (begin date) for pregnant women as the date the applicant is determined Eligible or Pending Eligible for MCAP
Eligibility and Enrollment	Eligibility Determination	43259	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall re-determine the MCAP effective eligibility date (begin date) for pregnant women who are going from Pending to Eligible or Ineligible as the date the applicant is determined Eligible or Ineligible
Eligibility and Enrollment	Eligibility Determination	43260	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall determine MCAP end date for pregnant women as the last day of the month when the 60 days postpartum takes place based on the expected delivery due date or child's date of birth when available
Eligibility and Enrollment	Eligibility Determination	43267	"The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall determine eligibility for Insurance Affordability Programs using the following hierarchy for pregnant female consumers who have NOT been previously determined eligible or conditionally eligible for APTC/CSR: MAGI Medi-Cal MCAP APTC/CSR Unsub CCP"
Eligibility and Enrollment	Eligibility Determination	43274	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall retain APTC/CSR eligibility for pregnant female consumers who have been previously determined eligible or conditionally eligible for APTC/CSR when due to an eligibility re-determination the consumer falls within the MCAP eligibility criteria.
Eligibility and Enrollment	Eligibility Determination	43275	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall add aid code 0D for pregnant women who are granted MCAP eligibility with incomes above 213%FPL up to and including 322% FPL using the MAGI Medi-Cal FPL calculation.
Eligibility and Enrollment	Eligibility Determination	43276	"The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) system shall determine Pending Eligible for MCAP mothers when the mother meets the MCAP program criteria AND one or more of the following verifications are outstanding: - income is not reasonably compatible; - incarceration status; - deceased indicator; - California state residency; - ESI/Non ESI MEC"
Eligibility and Enrollment	Eligibility Determination	43277	"The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall determine Ineligible status for MCAP mothers when the mother fails to provide one or more of the following outstanding verifications and MAXIMUS has manually failed them through the California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) portal: - income is not reasonably compatible; - incarceration status; - deceased indicator; - California state residency (if verification comes from SAWS on initial application); - ESI/Non ESI MEC"
Eligibility and Enrollment	Eligibility Determination	43279	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall discontinue MCAP consumers when due to a change consumer becomes eligible to a more beneficial program
Eligibility and Enrollment	Eligibility Determination	43281	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall send a weekly data extract to San Francisco County of children under the following criteria: 1) Resides in San Francisco County, 2) Ages 0 through age 19, 3) Household income is above 266% and below 322% of Federal Poverty Level
Eligibility and Enrollment	Eligibility Determination	43282	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall send a weekly data extract to San Mateo County of children under the following criteria: 1) Resides in San Mateo County, 2) Ages 0 through age 19, 3) Household income is above 266% and below 317% of Federal Poverty Level
Eligibility and Enrollment	Eligibility Determination	43283	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall send a weekly data extract to Santa Clara County of children under the following criteria: 1) Resides in Santa Clara County, 2) Ages 0 through age 19, 3) Household income is above 266% and below 317% of Federal Poverty Level
Eligibility and Enrollment	Eligibility Determination	43284	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall place the output file in the established two-way secure File Transfer Protocol server between California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) and DHCS. The data extract will be transferred from DHCS to the counties securely through the server and the counties will have the ability to send information pertaining to enrollment results back to DHCS.
Eligibility and Enrollment	Eligibility Determination	43285	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall add the following fields to the CCHIP Daily / Incremental report 1.) Social Security Number 2.) Health Plan 3.) Spoken Language
Eligibility and Enrollment	Eligibility Determination	43291	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) system shall update the current minimum essential coverage (MEC) table used for APTC/CSRs for aid code M9 (limited-scope Medi-Cal for pregnant women) from "False" to "True".

Appendix A-4 - SOW Exhibit A - System Requirements Specification
(Extracted from CalHEERS RTM)

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Category	Sub Category	Req ID	Requirement
Eligibility and Enrollment	Eligibility Determination	43293	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall update the MEC table to match the most current MEC Table as provided by DHCS.
Eligibility and Enrollment	Eligibility Determination	43294	"The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) system shall add the following sentence to the signature/declaration page in both English and Spanish applications: I attest that if I or anyone in my tax household received premium tax credits for Covered California health coverage in <previous year>, I or the person who received premium tax credits, have filed or will file a <previous year> federal tax return. "
Eligibility and Enrollment	Eligibility Determination	43295	"The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall update the following dates in the reference table: 1. 2014 End Special Enrollment: 11-Oct-15 2. 2014 End Preview Plans: 11-Oct-15 3. 2015 End Special Enrollment: 31-Oct-16 4. 2015 End Preview Plans: 31-Oct-16 5. 2016 Start Open Enrollment: 1-Nov-15 6. 2016 End Open Enrollment: 31-Jan-16 7. 2016 Start Open Special Enrollment: 16-Dec-15 8. 2016 End Open Special Enrollment: 31-Jan-16 9. 2016 Start Special Enrollment: 1-Feb-16 10. 2016 End Special Enrollment: 31-Oct-17 11. 2016 Start Preview Plans: 12-Oct-15 12. 2016 End Preview Plans: 31-Oct-17 13. 2016 Start Renewal: 12-Oct-15 14. 2016 End Renewal: 15-Dec-15"
Eligibility and Enrollment	Eligibility Determination	43305	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall collect electronic and administrative verifications on application intake/initial case linkage through SAWS Interface Access Channel.
Eligibility and Enrollment	Eligibility Determination	43306	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall apply admin verifications to eligibility determinations when both electronic verification and admin verification are present.
Eligibility and Enrollment	Eligibility Determination	43311	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall update the Business Rules Engine to prorate income using begin and end dates for months in which a record is not active for the entire month.
Eligibility and Enrollment	Eligibility Determination	43322	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) system shall treat CCHIP as another program type (another insurance affordability program).
Eligibility and Enrollment	Eligibility Determination	43323	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) system shall determine eligibility for the CCHIP program at application intake, report a change, and at renewals.
Eligibility and Enrollment	Eligibility Determination	43324	"The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) system shall determine Conditionally Eligible for CCHIP children when the child meets the CCHIP program criteria AND one or more of the following verifications are outstanding: - citizenship or lawful presence; - income is not reasonably compatible; - incarceration status; - deceased indicator; - MEC."
Eligibility and Enrollment	Eligibility Determination	43325	"The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) system shall determine Ineligible for CCHIP children when the admin has failed any of the following verifications: - Citizenship or lawful presence; - State residency; - Deceased; - Incarceration; - Income; - MEC."
Eligibility and Enrollment	Eligibility Determination	43328	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall have the ability to identify CCHIP children who are aging out as per CCHIP age criteria in a monthly basis 60 days before the end of the month in which they turn 19, the month of Discontinuance.
Eligibility and Enrollment	Eligibility Determination	43329	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall have the ability to redetermine eligibility for CCHIP consumers who are aging out of the program in 30 days.

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(Extracted from CalHEERS RTM)

Category	Sub Category	Req ID	Requirement
Eligibility and Enrollment	Eligibility Determination	43333	"The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) system shall apply the following discontinuance criteria for CCHIP consumers: - CCHIP to MAGI Medi-Cal transition * Determine eligibility for MAGI Medi-Cal the first day of the following month (since this is a more beneficial change the 10 days-notice period is not followed) - CCHIP to APTC transition * Protection for 12 months of coverage based on the renewal date * Due to loss of MEC, APTC starts following the 10 days-notice period for CCHIP "
Eligibility and Enrollment	Eligibility Determination	43334	"The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) system shall evaluate CCHIP eligibility following the hierarchy listed below: 1. MAGI Medi-Cal 2. MCAP 3. CCHIP 4. APTC/CSR 5. Unsub CCP"
Eligibility and Enrollment	Eligibility Determination	43336	"The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall follow the 10 days-notice period rule when one or more of the following verifications are manually failed: - citizenship or lawful presence; - income; - incarceration status; - deceased; - MEC."
Eligibility and Enrollment	Eligibility Determination	43340	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall protect CCHIP consumers from getting discontinued from CCHIP when there is an increase on income that places consumer out of CCHIP threshold until the renewal date.
Eligibility and Enrollment	Eligibility Determination	43341	"The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall not apply CCHIP protection under the following circumstances: - Child is aging out (until the end of the month on which child turns 19) - Child moves out of the CCHIP county - At renewals - Child is confirmed deceased - At discontinuance request - Non-Payment of premium"
Eligibility and Enrollment	Eligibility Determination	43344	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall determine CCHIP effective coverage date (begin date) as the date the applicant is determined Eligible or Conditionally Eligible for CCHIP.
Eligibility and Enrollment	Eligibility Determination	43345	"The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) system shall determine CCHIP for children who reside in one of the following counties: - San Mateo County, or - San Francisco County, or - Santa Clara County"
Eligibility and Enrollment	Eligibility Determination	43346	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall add, store and update Projected Annual Income verification in the Manual Verifications page.
Eligibility and Enrollment	Eligibility Determination	43347	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall update the label on the Manual Verifications page for existing MAGI Medi-Cal income verification to "MAGI Medi-Cal Current Monthly Income" verification.
Eligibility and Enrollment	Eligibility Determination	43348	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS)-SAWS eHIT interface shall add a verification element for MAGI Medi-Cal Projected Annual Income.
Eligibility and Enrollment	Eligibility Determination	43349	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall always determine which income value (PAI or CMI), the lower of the two, has been used to calculate MAGI Medi-Cal eligibility and if either value has not been previously cached, the uncached value used shall be re-verified via the Federal Data Services Hub (FDSH).
Eligibility and Enrollment	Eligibility Determination	43350	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall use Projected Annual Income in it's Medi-Cal income evaluation only when electronically verified as reasonable compatible or admin verified.
Eligibility and Enrollment	Eligibility Determination	43351	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall continue to use Projected Annual Income prospectively (even after the budget period expires) until a reported change of income or at renewal when income is determined to NOT be reasonably compatable and admin verification of income is requested.
Eligibility and Enrollment	Eligibility Determination	43353	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) system shall include an administrative verification for Former Foster Youth.
Eligibility and Enrollment	Eligibility Determination	43354	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) system shall make an individual eligible for coverage under the 4M Aid Code when they recieve a passing verification for Former Foster Youth status.
Eligibility and Enrollment	Eligibility Determination	43355	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) system shall make an individual ineligible for coverage under the 4M Aid Code when they recieve a failed verification for Former Foster Youth status.
Eligibility and Enrollment	Eligibility Determination	43356	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) system shall add the ability for Former Foster Youth who are Conditionally Eligible to upload verification documents to California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) for verification of the former foster youth status.

Category	Sub Category	Req ID	Requirement
Eligibility and Enrollment	Eligibility Determination	43357	"The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) SAWS eHIT interface shall include the following elements in the eHIT Schema: - Document Category of ""Proof of Former Foster youth Status"" - Document Types within Document Category of ""Proof of Former Foster youth status"" of: a) California Documents b) Out of State Documents c) American Indian or Alaska Native Tribal Documents"
Eligibility and Enrollment	Eligibility Determination	43358	"The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) system shall not display the Tax, Health, or Income pages for members who meet the below criteria. If data already exist in California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) and the user reports a change that causes the member to meet the criteria below, the Tax, Health, and Income pages will be hidden and the associated data will be removed - single applicant - attest to being Former Foster Youth - age between 18 and 26."
Eligibility and Enrollment	Eligibility Determination	43359	"The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) system shall not apply business validations or persist data to the below nodes when provided by SAWS through Eligibility Determination Request (EDR) for a consumer who is applying alone and attests to being a Former Foster Youth individual: - TaxFilingInfo; - OtherHealthCare; and - IncomeInfo."
Eligibility and Enrollment	Eligibility Determination	43360	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) system shall display the name of the Foster Parent, when present, in the dropdown list for the question "Who is the Primary Caretaker of this child?".
Eligibility and Enrollment	Eligibility Determination	43361	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall not grant eligibility to the Parent/Caretaker Relative Aid Code category to a Foster Parent who is identified as the Primary Caretaker of a child.
Eligibility and Enrollment	Eligibility Determination	43362	"The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) system shall modify the pop-up for Former Foster Youth on the Get Help with costs foster youth popup to the following: ?If you were in foster care in any state on your 18th birthday or later, you may qualify for free Medi-Cal until age 26. Your income does not matter, and you do not need to give income or tax information when you sign up for Medi-Cal for yourself. If you are applying for health insurance for a member of your family, such as your child, you will need to answer questions about your income and taxes to see if your child qualifies for Medi-Cal or another insurance affordability programs. You can apply (1) through Covered California using the on-line application or (2) through the county using a simple one-page form for former foster youth, called the MC 250A, or by giving your information over the phone. If you continue with the online application you may need to give more information about yourself than you need to give if you apply through the county using the MC 250A form. You can get the MC 250A form here: http://www.dhcs.ca.gov/formsandpubs/forms/Forms/MCED/MC_Forms/MC250A_Eng.pdf Most counties have a specific phone number, office, or staff to help former foster youth sign up for Medi-Cal. To find out the former foster youth contact for your county, go to: http://www.childrennow.org/uploads/documents/Coveredtil26_CountyContactList.pdf For more information about the Medi-Cal program for former foster youth, go to http://www.dhcs.ca.gov/services/medi-cal/eligibility/Pages/FFY.aspx OR www.coveredtil26.org "
Eligibility and Enrollment	Eligibility Determination	43363	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) system shall maintain the Former Foster Youth verification for the lifetime of the individual once verified.
Eligibility and Enrollment	Eligibility Determination	43364	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall determine CCHIP end date as the last day of the anniversary (one year) month of CCHIP coverage from the date CCHIP was granted.
Eligibility and Enrollment	Eligibility Determination	43365	"The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) system shall determine CCHIP Eligible for children who meet the following criteria: 1) U.S. Citizen, US National, or lawfully present, AND 2) Ages 0 up to age 19, AND 3) Household income is above 266% and up to and including 322% (includes the 5% disregard) of Federal Poverty Level (FPL). 4) Does not have MEC 5) Is not incarcerated 6) Is not deceased"
Eligibility and Enrollment	Eligibility Determination	43368	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) system shall assign aid code 2C to children who are found eligible for CCHIP.
Eligibility and Enrollment	Eligibility Determination	43371	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall determine CCHIP renewal date as the last day of the anniversary (one year) month of CCHIP coverage from the date CCHIP was granted (same as the end date).
Eligibility and Enrollment	Eligibility Determination	43372	"The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall update the renewal date as the last day of the anniversary (one year) month of CCHIP coverage from the date the following change is reported: - New child (under the age of 19) is added to the case"

Appendix A-4 - SOW Exhibit A - System Requirements Specification
(Extracted from CalHEERS RTM)

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Category	Sub Category	Req ID	Requirement
Eligibility and Enrollment	Eligibility Determination	43373	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall run CCHIP renewal determination for CCHIP consumers whose renewal date is at the end of the current month.
Eligibility and Enrollment	Eligibility Determination	43374	"The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall evaluate CCHIP consumers who are going through the renewal process using the following rules: - More beneficial coverage change will be applied even before the renewal date - Less beneficial coverage change will be applied prospectively after the renewal date - Begin date and End Date/Renewal Date will be re-set - Protection will applied for the current coverage period"
Eligibility and Enrollment	Eligibility Determination	43375	"The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall apply the following rules after the renewal determination has been established: - More beneficial coverage change will be applied even before the renewal date - Less beneficial coverage change will be applied prospectively after the renewal date"
Eligibility and Enrollment	Eligibility Determination	44499	"California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall re-word the following question with the new verbiage below: * Is this person an active duty or honorably discharged member of the military, or the spouse or child of a person who is?"
Eligibility and Enrollment	Eligibility Determination	44519	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall always display the QLE Event page for Service Center Representatives and County Eligibility Workers
Eligibility and Enrollment	Eligibility Determination	44521	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall always display the QLE Event page for Agents
Eligibility and Enrollment	Eligibility Determination	44613	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall provide the functionality to create and maintain eligibility qualifying events (e.g. pregnancy, recently unemployed, turned 65, etc.) by program.
Eligibility and Enrollment	Eligibility Determination	44614	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall provide the functionality to record an applicant's qualifying event(s).
Eligibility and Enrollment	Eligibility Determination	45172	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall update the California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) SAWS EHIT schema to version 7.0 to account for change requests 10021, 52600, 30049, and 29911 for changes aligned to 2017 Q1.
Eligibility and Enrollment	Eligibility Determination	45674	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall cease to display the interim banner (Alert: You continue to have MCAP coverage for 365 days after the end of your pregnancy. Coverage will be re-determined during the month in which your 365th day falls. Please contact MCAP if you have questions.) introduced under Eligibility Summary screen
Eligibility and Enrollment	Eligibility Determination	45921	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall identify non-primary applicants' contact information (email, phone number, residence address, and mailing address) as sensitive based on a sensitive indicator received from SAWS.
Eligibility and Enrollment	Eligibility Determination	45929	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall perform a one-time data population activity on the existing sensitive non-primary applicant population in California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) to flag existing sensitive individuals.
Eligibility and Enrollment	Eligibility Determination	45930	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall hide sensitive non-primary applicant's contact information (email, phone number, residence address, and mailing address) on California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) Portal from consumers, authorized representatives, and enrollers.
Eligibility and Enrollment	Eligibility Determination	45931	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall hide sensitive non-primary applicant's contact information (email, phone number, residence address, and mailing address) on California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) Portal from consumers, authorized representatives, and enrollers in the Renewal/RAC Application.
Eligibility and Enrollment	Eligibility Determination	45932	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall hide sensitive non-primary applicant's contact information (email, phone number, residence address, and mailing address) on California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) Portal from consumers, authorized representatives, and enrollers in the Intake Application (for reapplication scenarios).
Eligibility and Enrollment	Eligibility Determination	45933	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall hide sensitive non-primary applicant's contact information (email, phone number, residence address, and mailing address) on California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) Portal from consumers, authorized representatives, and enrollers on case management screens.
Eligibility and Enrollment	Eligibility Determination	45995	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall have the functionality to access the stored FTB file to verify state residency.
Eligibility and Enrollment	Eligibility Determination	45996	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall have the functionality to track verification of state residency from FTB.
Eligibility and Enrollment	Eligibility Determination	45997	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall provide the functionality to establish residency for a child/dependent when he/she resides with the parent or parents and they have established that they meet the requirements of state residency in accordance with the requirements of subdivision (b).
Eligibility and Enrollment	Eligibility Determination	45998	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall provide the functionality to establish residency for a child/dependent when he/she resides with the caretaker relative and the caretaker relative establishes that he/she meet the requirements of state residency in accordance with the requirements of subdivision (b).
Eligibility and Enrollment	Eligibility Determination	46010	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall update the FPL values for 2023 based on the FPL guidelines received for 2023 from DHCS.
Eligibility and Enrollment	Eligibility Determination	46011	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall hide contact information updates on the Case Transaction History screen from consumers, authorized representatives, and enrollers for contact information updates that were made prior to the application submitted where an individual is moved from being sensitive to no longer sensitive.
Eligibility and Enrollment	Eligibility Determination	46012	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall hide contact information of individuals on Application PDFs from consumers, authorized representatives, and enrollers for applications that were submitted prior to where an individual is moved from being sensitive to no longer sensitive.
Eligibility and Enrollment	Eligibility Determination	46013	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall display messaging to admins when sensitive contact information is displayed.
Eligibility and Enrollment	Eligibility Determination	46014	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall display messaging to admins when sensitive contact information is displayed on the Renewal/RAC Application.
Eligibility and Enrollment	Eligibility Determination	46015	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall display messaging to admins when sensitive contact information is displayed on the Intake Application (for reapplicaiton scenarios).

Appendix A-4 - SOW Exhibit A - System Requirements Specification
(Extracted from CalHEERS RTM)

Category	Sub Category	Req ID	Requirement
Eligibility and Enrollment	Eligibility Determination	46016	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall display messaging to admins when sensitive contact information is displayed on case management screens.
Eligibility and Enrollment	Eligibility Determination	46017	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall display messaging to admins for contact information updates on the Case Transaction History screen for contact information updates that were made prior to the date when an individual is moved from being sensitive to no longer sensitive.
Eligibility and Enrollment	Eligibility Determination	46465	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall evaluate all prior months a consumer was enrolled in a Qualified Health Plan and then becomes eligible to Covered CA Subsidy Programs in the same benefit year, in the determination of the annual APTC and State Subsidy amounts.
Eligibility and Enrollment	Eligibility Determination	46466	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall only include prior months in which a consumer was enrolled in a Qualified Health Plan (CCP) and has not attested to receiving MEC, when determining the annual APTC and State Subsidy amounts.
Eligibility and Enrollment	Eligibility Determination	46467	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall use the benchmark premium for all enrolled months even if there was no active eligibility for subsidy programs for that month.
Eligibility and Enrollment	Eligibility Determination	46468	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall navigate the consumer to the 1.0R Introduction page on click of Report a Change page from the Enrollment Dashboard.
Eligibility and Enrollment	Eligibility Determination	46841	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall enhance the prior eligibility look-back logic for MAGI Medi-Cal eligibility determinations to find the most recent eligibility record that is Eligible, Conditionally Eligible or Discontinued when determining eligibility for MAGI Medi-Cal for Run reasons other than Intake or Retro.
Eligibility and Enrollment	Eligibility Determination	46843	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall use MAGI Medi-Cal Discontinuance records that occur on/after SAWS CCU Renewal (RE/RM) run date for the enhanced look-back logic for MAGI Medi-Cal eligibility determinations.
Eligibility and Enrollment	Eligibility Determination	46845	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall not utilize the enhanced prior eligibility look-back logic for MAGI Medi-Cal eligibility status protections.
Eligibility and Enrollment	Eligibility Determination	46852	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall enhance the prior eligibility look-back logic to use program begin and end dates when retrieving the prior eligibility for the current enrollment year or enrollment year - 1.
Eligibility and Enrollment	Eligibility Determination	46853	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall allow the individual's Exchange eligibility and enrollment to be protected in Carry Forward status when a redetermination of eligibility due to enhanced look-up logic results in the individual being potentially eligible for MAGI Medi-Cal.
Eligibility and Enrollment	Eligibility Determination	46854	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall reinstate enrollment via BOT process for the individuals who are enrolled in their own group and whose Exchange eligibility has been Discontinued and their enrollment has been Terminated as of 8/31/23 or Canceled as of 9/1/23, due to enhanced look up logic.
Eligibility and Enrollment	Eligibility Determination	46856	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall discontinue MAGI Medi-Cal eligibility when the individual is in MAGI Medi-Cal Discontinuance Awaiting Review status and a Disposition is received with Discontinuance or Ineligible status
Eligibility and Enrollment	Eligibility Determination	46937	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall not use the Enhanced look-back logic results for Non-Applying members.
Eligibility and Enrollment	Eligibility Determination	46938	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall enhance the MAGI Medi-Cal Enhanced look-back logic to ignore the MAGI Medi-Cal eligibility records created due to a Retro Run from SAWS (Run Reason: RO)
Eligibility and Enrollment	Eligibility Determination	46939	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall update the Enhanced look-back logic to ignore any eligibility records prior to 01/01/2019
Eligibility and Enrollment	Eligibility Determination	46940	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall have the ability to configure the Enhanced look-back logic start date
Eligibility and Enrollment	Eligibility Determination	47434	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall log a consumer's active response to the PDM inconsistency for Medicare and Deceased verification attribute in the case transaction history.
Eligibility and Enrollment	Eligibility Determination	47452	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall not discontinue Covered California program eligibility or terminate enrollment if the individual is eligible or conditionally eligible for Covered California programs and enrolled in a health plan when an individual is placed in MAGI Medi-Cal Awaiting Review for discontinuance.
Eligibility and Enrollment	Eligibility Determination	47644	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall display both the Covered California and DHCS/Medi-Cal logo on the Medi-Cal Eligibility Confirmation Letter.
Eligibility and Enrollment	Eligibility Determination	47645	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall update following in Medi-Cal Eligibility Confirmation Letter: 1. Label for CIN field to Identification Number 2. Remove gender 3. Spelling of word "country" to "county"
Eligibility and Enrollment	Eligibility Determination - SHOP		
Eligibility and Enrollment	Eligibility Determination - SHOP	42780	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall store the qualified non-citizen attestation and the results of the qualified non-citizen verification.
Eligibility and Enrollment	Enrollment		
Eligibility and Enrollment	Enrollment	37931	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall provide the functionality to print the plan comparisons.
Eligibility and Enrollment	Enrollment	37932	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall provide the functionality for an online calculator to calculate the net premium of selected plans based on eligibility for Advanced Premium Tax Credit (APTC), the impact of Cost Sharing Reductions (CSR) for subsidized out-of-pocket costs, and also show the consumer the gross premium with the net savings.
Eligibility and Enrollment	Enrollment	37933	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall provide the functionality to notify individuals who select APTC subsidies of penalties and / or liabilities that may occur at time of tax filing due to increase in income.

Category	Sub Category	Req ID	Requirement
Eligibility and Enrollment	Enrollment	37935	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall provide easily understood descriptions and quality ratings of the various aspects of each plan's care and service quality for each plan selected for comparison.
Eligibility and Enrollment	Enrollment	37972	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall allow any FR AI/AN members and non-FR AI/AN members to select the same non-FR AI/AN policy as a deviation from the suggested FR AI/AN default grouping.
Eligibility and Enrollment	Enrollment	37974	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall prevent subsidized (APTC) members and unsubsidized members from enrolling into the same member level plans.
Eligibility and Enrollment	Enrollment	37975	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall prevent NQI members and non-NQI members from enrolling into the same member level plan.
Eligibility and Enrollment	Enrollment	37976	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall update snippets on the Household Enrollment Introduction page and add a popup on the Regroup button. .
Eligibility and Enrollment	Enrollment	37977	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall display a default grouping for mixed Federally Recognized American Indian/ Alaska Native families (families with FR AI/AN and non-FR AI/AN members) into separate groups.
Eligibility and Enrollment	Enrollment	38033	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall provide the functionality to process plan selection and confirm enrollment in the selected plan(s).
Eligibility and Enrollment	Enrollment	38034	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall provide the functionality to process plan selection and confirm enrollment in the QHP Plans
Eligibility and Enrollment	Enrollment	38035	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall provide the functionality to list available plans and benefit designs via the Web Portal based on the individual's circumstances (e.g. income, age, location, etc.) and stored preferences.
Eligibility and Enrollment	Enrollment	38037	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall provide the functionality to notify issuer of individual enrollment in a QHP and / or stand-alone dental plan.
Eligibility and Enrollment	Enrollment	38038	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall provide the functionality to track individual enrollments with a qualified health plan(s) for issuer notifications.
Eligibility and Enrollment	Enrollment	38039	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall provide the functionality to process acknowledgement of individual enrollment from Issuer.
Eligibility and Enrollment	Enrollment	38113	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall provide the functionality to process Issuer enrollment discrepancies and payment information.
Eligibility and Enrollment	Enrollment	38125	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall track the enrollees' effective dates of coverage in each QHP.
Eligibility and Enrollment	Enrollment	38181	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall track and report all manually changed plan enrollment effective dates.
Eligibility and Enrollment	Enrollment	38183	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) system will allow authorized users to edit (effectuate, terminate, and cancel) current and past enrollment segments.
Eligibility and Enrollment	Enrollment	38184	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) system will allow authorized users to edit (effectuate, terminate, and cancel) an enrollment that is prior to the current enrollment without impacting the current enrollment.
Eligibility and Enrollment	Enrollment	38185	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) system will display a history log of transactions performed by manual override.
Eligibility and Enrollment	Enrollment	38187	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) system will have a new user role for authorized users to access the manual override functionality.
Eligibility and Enrollment	Enrollment	38197	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) system will allow authorized users to choose whether or not to trigger an 834 when performing a manual override.
Eligibility and Enrollment	Enrollment	38198	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) system will allow authorized users to enter case notes when performing a manual override.
Eligibility and Enrollment	Enrollment	38199	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) system will allow authorized users to view case notes that were entered when performing a manual override.
Eligibility and Enrollment	Enrollment	38201	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) system will allow authorized users to perform a manual override for APTC eligible amount and APTC applied amounts for consumers.
Eligibility and Enrollment	Enrollment	38202	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) system will allow authorized users to change the enrollment status and benefit effective dates for a consumer: Pending to Enrolled, Cancelled to Pending, and Cancelled to Enrolled.
Eligibility and Enrollment	Enrollment	38203	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) system will allow authorized users to change the effective date for an APTC eligibility determination without being limited by the 15 day rule.
Eligibility and Enrollment	Enrollment	38253	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall terminate the consumer's insurance policy when all active consumers on the insurance policy are discontinued.
Eligibility and Enrollment	Enrollment	38260	If re-apply is performed, California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall apply APTC/CSR/CCP eligibility is effectuated based on the current 15 days rules during open enrollment period or based on the SEP rules during special enrollment period and new ROP date is set if appropriate.

Appendix A-4 - SOW Exhibit A - System Requirements Specification
(Extracted from CalHEERS RTM)

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Category	Sub Category	Req ID	Requirement
Eligibility and Enrollment	Enrollment	38271	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall have an automated process to update a consumer's insurance policy under the following outcomes from reasonable opportunity period processing: - Removal of a dependent listed on the consumer's policy - Updates to Advanced Premium Tax Credit (APTC) benefits for a consumer's policy - Update from a subsidized Covered CA plan to an unsubsidized Covered CA plan when there is no CSR level change.
Eligibility and Enrollment	Enrollment	38296	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall send an automatic maintenance transaction to update the APTC amount to the carriers when the user reports a change and only the APTC amount changes (no CSR changes and no SHOP option).
Eligibility and Enrollment	Enrollment	38352	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) system shall persist delegations between a consumer and a CEC regardless of eligibility and consumer enrollment status, until either the CEE, CEC, SCR admin, or consumer removes the delegation.
Eligibility and Enrollment	Enrollment	38740	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall retain Medi-Cal Access Program (MCAP) eligibility for a woman when a report a change results in Modified Adjusted Gross Income (MAGI) Medi-Cal eligibility.
Eligibility and Enrollment	Enrollment	38741	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall display messaging on the Eligibility Results page when a woman is retained in MCAP due to the MCAP pregnancy hold.
Eligibility and Enrollment	Enrollment	38742	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall add functionality allowing all users to select the option for a pregnant woman in MCAP pregnancy hold to transition from MCAP to MAGI Medi-Cal.
Eligibility and Enrollment	Enrollment	38743	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall add functionality to allow the Business Rules Engine to assign an aid code based on the existing aid code hierarchy when a pregnant woman in the MCAP pregnancy hold selects the option to transition from MCAP to MAGI Medi-Cal.
Eligibility and Enrollment	Enrollment	38744	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall set the end date for the MCAP Pregnancy Hold to the Expected Date of Delivery, or the date that the Consumer switches coverage, or to the end of the pregnancy as reported by the consumer, whichever occurs first.
Eligibility and Enrollment	Enrollment	38745	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall limit the option to transition from MCAP to MAGI Medi-Cal to the 15th day of the month prior to the end of the month of the MCAP Pregnancy Hold. After this date, the option to transition shall no longer be displayed.
Eligibility and Enrollment	Enrollment	38746	For mixed households, California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall send an eligibility evaluation reason via eHIT when the MCAP pregnancy hold applies.
Eligibility and Enrollment	Enrollment	38747	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall send an eligibility evaluation reason via eHIT when the pregnant women elects to switch from MCAP to MAGI Medi-Cal and when an Admin returns a user to MCAP after switching.
Eligibility and Enrollment	Enrollment	38749	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall add functionality for the eligibility into MAGI Medi-Cal to begin the day after the last day of eligibility in MCAP.
Eligibility and Enrollment	Enrollment	38750	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall limit the transition from MCAP into MAGI Medi-Cal to once per pregnancy.
Eligibility and Enrollment	Enrollment	38751	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall suppress the text that contains the option to switch on the Eligibility Results page after user elects to keep or switch eligibility or after the last date to switch has passed. If consumer is still eligible to switch, user will have the option to switch on the Individual homepage.
Eligibility and Enrollment	Enrollment	38752	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall add the functionality for admins to return consumers who have elected to transition to another coverage to MCAP.
Eligibility and Enrollment	Enrollment	38753	For individuals who transition from MCAP or the County Children's Health Insurance Program into MAGI Medi-Cal, California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall send the HX20 ESAC 1 transaction to MEDS upon an eligibility determination that results in an Eligible or Conditionally Eligible status for the MAGI program.
Eligibility and Enrollment	Enrollment	38754	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall follow the 15 day rule for all MCAP and CCHIP discontinuances.
Eligibility and Enrollment	Enrollment	38779	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) system shall have an automated process to update a consumer's enrollment under the outcomes from reasonable opportunity period processing.
Eligibility and Enrollment	Enrollment	38846	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) system shall set the enrollment status to "Enrolled" for active renewals in custom group cases where the subscriber remains in the same carrier and the current status is enrolled.
Eligibility and Enrollment	Enrollment	38847	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) system shall exclude a case with custom grouping from passive enrollment when an active renewal has started and custom grouping has been changed and plan selection completed for at least one of the groups.
Eligibility and Enrollment	Enrollment	39765	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall call the IND22 at the household level
Eligibility and Enrollment	Enrollment	39767	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall pass the Benchmark Premium used to calculate APTC/State Subsidy to GI in the Account Transfer.
Eligibility and Enrollment	Enrollment	39880	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall call the IND22 at the household level
Eligibility and Enrollment	Enrollment	39882	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall pass the Benchmark Premium used to calculate APTC/State Subsidy to GI in the Account Transfer.
Eligibility and Enrollment	Enrollment	39883	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall apply the new APTC/State Subsidy calculation methodology for eligibility in 2021 and forward.
Eligibility and Enrollment	Enrollment	40295	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall generate an EDI 834 transaction to the Carrier with an indicator when there is a change to the broker information or delegation associated with the existing case.
Eligibility and Enrollment	Enrollment	40314	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall display the eligibility for California Premium Subsidy (CAPS) for each member in the Household Eligibility Information screen on the enroller portals (Agency/Agent/CEC Portals).

Appendix A-4 - SOW Exhibit A - System Requirements Specification
(Extracted from CalHEERS RTM)

Category	Sub Category	Req ID	Requirement
Eligibility and Enrollment	Enrollment	40315	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall allow Issuer Enrollment Representatives to search for consumer cases by HBX Household Case ID on the Issuer Enrollment Portal.
Eligibility and Enrollment	Enrollment	40316	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall display HBX Household Case ID on the Issuer Enrollment Portal in the Search results, Enrollment details screen, and Export file.
Eligibility and Enrollment	Enrollment	40602	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall allow Agents, Entity, and CEC search for Consumer First Name and Last Name with a search operator of 'Contains'.
Eligibility and Enrollment	Enrollment	40603	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) to reduce the number of characters for the City field on the Correspondence Address Section for an Agency Application.
Eligibility and Enrollment	Enrollment	40604	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall have the capability for Entity Managers to export all the household cases on the Entity Portal.
Eligibility and Enrollment	Enrollment	40605	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall have the capability for Certified Enrollment Counselors to export all the household cases on the Entity Portal
Eligibility and Enrollment	Enrollment	40606	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall provide the ability for a Broker Admin to do a bulk BoB Transfer for an Agency.
Eligibility and Enrollment	Enrollment	40607	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall provide the ability for an Entity Admin to do a bulk BoB Transfer for an Entity.
Eligibility and Enrollment	Enrollment	40608	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall provide the ability to select more than 10 cases to change delegation within the Agency Portal
Eligibility and Enrollment	Enrollment	40609	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall provide the ability to select one or more up to all cases to change delegation within the Entity Portal
Eligibility and Enrollment	Enrollment	40610	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) to increase the number of characters for the Address 1 and Address 2 fields on the Correspondence Address Section for an Agency/Agent Application.
Eligibility and Enrollment	Enrollment	40611	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall display CAPS column after APTC column in the Premium and APTC Grid.
Eligibility and Enrollment	Enrollment	40612	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall capture the delegation changes in all enrollments including terminated enrollments within the current benefit plan year.
Eligibility and Enrollment	Enrollment	40640	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall create an informational page within California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) with co-branding of the carrier logo and the consumer will have 2 options: Login as an existing customer Create a New Account
Eligibility and Enrollment	Enrollment	40641	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall allow the user to select the option for the consumer to be matched to their previous Agent.
Eligibility and Enrollment	Enrollment	40642	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall add carrier co-branding on every page of the application for consumers who are referred to California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) via the Covered California carrier-only link/microsite.
Eligibility and Enrollment	Enrollment	40643	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall provide consumers the ability to toggle between English and Spanish
Eligibility and Enrollment	Enrollment	40644	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall stop co-branding and do lead termination if - entire household is eligible for MAGI Medical plans - active lead is inactive beyond 60 days
Eligibility and Enrollment	Enrollment	40645	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall provide co-branding for mobile views
Eligibility and Enrollment	Enrollment	40646	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall create necessary tags for Google Analytics reporting
Eligibility and Enrollment	Enrollment	40724	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall retain the Renewal mode for cases who complete an RAC between Active Renewal period and OEP.
Eligibility and Enrollment	Enrollment	40741	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall passively renew enrollments which have one or more members in Carry Forward Status in the existing or crosswalked plan
Eligibility and Enrollment	Enrollment	40742	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall send an EDI 834 renewal transaction to the carriers if the subscriber renews into a plan with the same Carrier regardless of adding or removing members in the enrollment group.
Eligibility and Enrollment	Enrollment	40743	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall send an EDI 834 renewal transaction to the carriers if there is a change in Subscriber in the new enrollment year and the new Subscriber was previously enrolled as a dependent in the prior benefit year, in the same plan.
Eligibility and Enrollment	Enrollment	40744	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall verify enrollment status daily before passive renewal is applied to each enrollment
Eligibility and Enrollment	Enrollment	40745	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall renew dental only enrollments if their same plan is available, regardless of CCA eligibility
Eligibility and Enrollment	Enrollment	40746	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall set a confirmation date for renewed enrollments if a consumer actively renews into the same plan, or a crosswalked plan, after shopping to compare prices

Appendix A-4 - SOW Exhibit A - System Requirements Specification
(Extracted from CalHEERS RTM)

Category	Sub Category	Req ID	Requirement
Eligibility and Enrollment	Enrollment	41207	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall turn on the Microsite functionality for Bright Health Care
Eligibility and Enrollment	Enrollment	41281	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall display “Change Plan” as the primary call to action on the Account Home page once the health and dental plan selection is completed and the SEP/OEP window is open.
Eligibility and Enrollment	Enrollment	41282	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall display a "Change Plan" link on the Household Summary modal accessed from the Account Home Page once the health and dental plan selection is completed and the SEP/OEP window is open.
Eligibility and Enrollment	Enrollment	41283	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall display a "Change Plan" link on the Account Alert banner on the Eligibility Results Summary Page once the health and dental plan selection is completed and the SEP/OEP window is open.
Eligibility and Enrollment	Enrollment	41284	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall display a "Change Plan" button on the Household Next Steps section on the Eligibility Results Summary Page once the health and dental plan selection is completed and the SEP/OEP window is open.
Eligibility and Enrollment	Enrollment	41285	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall direct the user to the same benefit year on the GI Enrollment Dashboard as the benefit year for which the user selects "Change Plan" on the Account Home Page.
Eligibility and Enrollment	Enrollment	42307	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) system shall add voter registration page in English and Spanish application prior to eligibility determination page. The voter registration page shall display specific language in English or Spanish to consumer and shall also ask if the consumer would like to register to vote and shall provide three selections to the consumer.
Eligibility and Enrollment	Enrollment	42308	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) system shall display the following question in the voter registration page: "If you are not registered to vote where you live now, would you like to apply to register to vote today?"
Eligibility and Enrollment	Enrollment	42309	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) system shall display the following answer with a radio button to select each choice to the question "If you are not registered to vote where you live now, would you like to apply to register to vote today?": - "Yes, open the California Online Voter Registration website in a new tab" - "Yes, please mail me a voter registration card" - "No"
Eligibility and Enrollment	Enrollment	42310	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) system shall add voter registration page to subsidized and unsubsidized application.
Eligibility and Enrollment	Enrollment	42311	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) system shall display voter registration page to all covered transactions which includes application, change of address, and renewal.
Eligibility and Enrollment	Enrollment	42362	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) system shall collect and record each choice selected by the consumer on the voter registration page in a manner that can be stored for at least two years.
Eligibility and Enrollment	Enrollment	42363	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) system shall differentiate the difference between those who selects "No" as an answer and those who does not answer the question.
Eligibility and Enrollment	Enrollment	42364	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) system shall store the consumer's answer on the voter registration page only if the application is submitted.
Eligibility and Enrollment	Enrollment	42365	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) system shall open the California Online Voter Registration website in a new tab with the following link when the consumer select "Yes, open the California Online Voter Registration website in a new tab" as the final answer. If consumer is in English mode, use "http://registertovote.ca.gov/?t=n&id=4/" If consumer is in Spanish mode, use "http://registertovote.ca.gov/es/?t=n&id=4/"
Eligibility and Enrollment	Enrollment	42366	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) system shall not take any action when the consumer selects "No" on the voter registration page.
Eligibility and Enrollment	Enrollment	42367	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) system shall mail the consumer voter registration card when no choice is selected when the consumer leaves the voter registration page and when the consumer selects "Yes, please mail me a voter registration card".
Eligibility and Enrollment	Enrollment	42368	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) system shall create an exportable list of people who answer "Yes, please mail me a voter registration card" or do not answer the voter registration question for all covered transactions which include application, change of address, and renewal. The list shall include: Head of Household/Primary Contact, Physical Mailing address, preferred method of contact, email address (if available), preferred written language, and Program. This list will be sent to CovCA fulfillment vendor to mail voter registration cards and letter notices in appropriate preferred language. The list shall be created and sent to the fulfillment vendor monthly. The list will also be used to pull email's of consumers whose preferred method was electronic, and email notices (in appropriate language) with SOS links, instead of paper mailing.
Eligibility and Enrollment	Enrollment	42369	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) system shall trigger a mailing addressed to the head of household, in consumer's preferred written language, if no choice is selected when the consumer leaves the voter registration page. If consumer's preferred method of contact is email, default to email instead of mail.
Eligibility and Enrollment	Enrollment	42417	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) system shall generate a report on a monthly basis with the following data elements based on responses to the voter registration page and separately for the English and Spanish applications. -Number and percent of each of the three choices and non-responses by user role -Number and percent of each of the three choices and non-responses by covered transaction (application, change of address, renewal) -Number and percent of each of the three choices and non-responses by program eligibility (Medi-Cal, subsidized Covered CA, unsubsidized Covered CA, ineligible for all programs)
Eligibility and Enrollment	Enrollment	42868	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System will allow a consumer to change their APTC outside of a Report a Change.

Category	Sub Category	Req ID	Requirement
Eligibility and Enrollment	Enrollment	42869	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall only allow an enrollee, who qualifies for an APTC amount above \$0, to change/adjust their APTC monthly amount when initiating an APTC change/adjustment.
Eligibility and Enrollment	Enrollment	42870	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall not limit the number of times that the monthly APTC amount is changed/adjusted.
Eligibility and Enrollment	Enrollment	42871	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall allow enrollees (who are receiving APTC subsidies) to make changes/adjustments to their monthly APTC amount any time on or prior to November 15th of the current benefit year.
Eligibility and Enrollment	Enrollment	42872	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall allow enrollees, (who are receiving APTC subsidies), with an enrollment for the next benefit year, to make changes to the APTC amount prior to the beginning of the next benefit year
Eligibility and Enrollment	Enrollment	42873	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall only allow prospective modifications to the change of the APTC amount applied to the monthly premium.
Eligibility and Enrollment	Enrollment	42874	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall allow consumers to change the applied APTC amount if the current enrollment status is 'Enrolled' or 'Pending' for the current or future benefit year.
Eligibility and Enrollment	Enrollment	43057	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall provide the functionality to allow plan selection and transfer due to plan decertification.
Eligibility and Enrollment	Enrollment	43058	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall provide the functionality to qualify individual for an enrollment period.
Eligibility and Enrollment	Enrollment	43059	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall provide the functionality to create and maintain rules (including historical rules) for enrollment effective dates based on State or Exchange policies for each program and/or qualifying event.
Eligibility and Enrollment	Enrollment	43138	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall provide the functionality to gather individual plan preferences.
Eligibility and Enrollment	Enrollment	43139	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall provide the functionality to present the consumer the detailed comparisons of qualified health plans filtered on individual plan preferences.
Eligibility and Enrollment	Enrollment	43140	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall provide the functionality to present appropriate MAGI Medi-Cal, MCAP, C-CHIP and BHP (if enacted) plans for which an applicant is eligible to enroll.
Eligibility and Enrollment	Enrollment	43211	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall validate presence of potential duplicate or overlap coverage whenever a user goes through plan selection or plan update process.
Eligibility and Enrollment	Enrollment	43212	"The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall display an error message on the portal to the user if a potential duplicate coverage has been identified with the exception of a re-enrollment due to an ""add a member"" with a life event date < current policy coverage start date "
Eligibility and Enrollment	Enrollment	43213	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) system shall validate if the new coverage start date keyed by SCR on Change Plan Effective Date page is within the benefit year of the selected enrollment.
Eligibility and Enrollment	Enrollment	43214	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) system shall display an error message on the Portal if the new coverage start date falls outside the benefit year of the selected enrollment.
Eligibility and Enrollment	Enrollment	43223	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall provide the functionality to support individual selection of a Qualified Health Plan in the Exchange.
Eligibility and Enrollment	Enrollment	43227	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall provide the functionality to estimate annual costs (premium plus out of pocket cost) for each plan selected for comparison.
Eligibility and Enrollment	Enrollment	43228	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall determine plan availability, calculate plan cost and display their results, including average monthly premium costs and estimated annual out of pocket, net costs, gross costs (net savings) and at risk costs.
Eligibility and Enrollment	Enrollment	43230	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall provide the functionality to display the QHP summary of benefits and coverage as specified by ACA regulations.
Eligibility and Enrollment	Enrollment	43231	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall provide the functionality to hide and unhide plan selection criteria and cost components.
Eligibility and Enrollment	Enrollment	43232	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall provide the functionality to display for each plan selected, the plan quality rating, and one or more quality indicators and one or more customer service indicators, as determined by the Exchange.
Eligibility and Enrollment	Enrollment	43297	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall provide the functionality for applicants to select multiple QHPs or qualified stand-alone dental plans and sort the results by premium, quality rating, deductible amount, out of pocket limits, annual costs, quality indicators, and customer service indicators.
Eligibility and Enrollment	Enrollment	43298	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall show a range (low, medium, high) of estimated annual cost based on consumer's possible or actual health conditions (from consumer provided or pre-defined utilization scenarios) for each plan selected for comparison.
Eligibility and Enrollment	Enrollment	43299	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall provide the maximum out-of-pocket costs for each plan selected for comparison.
Eligibility and Enrollment	Enrollment	43300	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall provide the functionality for the consumer to provide known current or future medical usage (Dr. visits, prescriptions, surgeries, etc.) and disease scenarios to dynamically and real-time adjust the estimated annual out of pocket costs for each plan selected for comparison.
Eligibility and Enrollment	Enrollment	43396	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall display benefits or features in a plan consistent with the SERFF Template.

Category	Sub Category	Req ID	Requirement
Eligibility and Enrollment	Enrollment	44476	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall provide the functionality to generate reports to Issuer about individuals and family enrollments in Qualified Health Plans.
Eligibility and Enrollment	Enrollment	44477	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall provide the functionality for authorized users to manually change individual plan effective dates.
Eligibility and Enrollment	Enrollment	44615	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall provide the functionality for special enrollment periods based on specified criteria (birth, death, change in address, change in household, laid off, etc.).
Eligibility and Enrollment	Enrollment	47015	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall only allow reinstatement through Reconciliation when eligibility has been verified for the consumer
Eligibility and Enrollment	Enrollment	47016	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall develop a report for the cases that are not going to be reinstated due to being not eligible for reinstatement.
Eligibility and Enrollment	Enrollment	47017	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall add the total case count by HIOS ID to the existing Reconciliation Dashboard after the Others_to_fix_ column. The new column name should be CalHeers_Ineligible_Reinstate
Eligibility and Enrollment	Enrollment	47105	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall turn on the Microsite functionality for IEHP for PY 2024.
Eligibility and Enrollment	Enrollment	48024	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall use “first of the month following the QLE date” rule for APS Coverage Start Date when the member transitions from MAGI MC/MCAP/CCHIP to Exchange Programs but had prior Exchange eligibility with no enrollments during this Eligibility Record.
Eligibility and Enrollment	Enrollment	48025	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) system shall make sure the coverage start date for any dependents added to an enrollment will be equal to or later than the subscriber Coverage start date.
Eligibility and Enrollment	General Requirement		
Eligibility and Enrollment	General Requirement	37867	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall allow the SCR, CEW, Agent, CEC and PBE to have access to all pages and links seen by a Consumer when the Consumer has or has not created an account.
Eligibility and Enrollment	General Requirement	37959	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall identify all unmarried pregnant women not eligible for any other mandatory or optional categorically needy coverage group (not eligible to any other Medi-Cal aid code) who are either: (a) under age 21 and living with her parent(s), and is not going to file a tax return for the taxable year, or (b) under age 21 and is going to be claimed as a tax dependent by parent(s) in the taxable year.
Eligibility and Enrollment	General Requirement	37960	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall exempt all household income when determining the eligibility for unmarried pregnant women as defined.
Eligibility and Enrollment	General Requirement	37961	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall determine eligibility for the identified population and assign eligibility status in aid code M7 or M8 depending on their immigration status (Aid Code M7 for Satisfactory Immigration Status and M8 for all cases without Satisfactory Immigration Status). Authority: SPA 13-0029, SSA 1902(a)(10)(A)(ii)(I), and 42 CFR 435.222
Eligibility and Enrollment	General Requirement	37965	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall communicate to SAWS when an individual is determined eligible to the Unmarried Pregnant Women Under 21 Income Disregard program.
Eligibility and Enrollment	General Requirement	37967	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall allow APTC households to be allowed to utilize current custom grouping functionality and select a plan(s).
Eligibility and Enrollment	General Requirement	37968	"California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall allow APTC households with Federally Recognized American Indians / Alaska Natives to utilize the current custom grouping functionality and select a plan(s)."
Eligibility and Enrollment	General Requirement	37969	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall provide (display the) explanation to splitting APTC before plan selection in the Plan Selection - In Progress page.
Eligibility and Enrollment	General Requirement	38079	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall retain APTC/CSR/CCP eligibility and enrollment for pregnant women or women who have reported a pregnancy and have selected a Qualified Health Plan and have income at or above 100 percent subsidy FPL up to and including 322 percent MAGI FPL. This will be called "QHP pregnancy hold".
Eligibility and Enrollment	General Requirement	38080	During renewals, California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall determine APTC/CSR/CCP eligibility for pregnant women or women who have reported a pregnancy and have income at or above 100 percent subsidy FPL up to and including 322 percent MAGI FPL and who are in the QHP pregnancy hold and are otherwise eligible.
Eligibility and Enrollment	General Requirement	38081	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall display messaging on the Eligibility Results page when a pregnant woman is retained in a Qualified Health Plan due to QHP pregnancy hold.
Eligibility and Enrollment	General Requirement	38083	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall include language on the NOD01 when a pregnant woman is retained in a Qualified Health Plan due to the QHP pregnancy hold.
Eligibility and Enrollment	General Requirement	38094	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall modify existing MCAP snippets in NOD01 to include opt out instructions to keep or switch coverage.
Eligibility and Enrollment	General Requirement	38095	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall add functionality allowing all users to select the option for a pregnant woman in QHP pregnancy hold to transition from a Qualified Health Plan to another Insurance Affordability Program.
Eligibility and Enrollment	General Requirement	38096	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall add functionality to allow the Business Rules Engine to assign an aid code based on the existing aid code hierarchy when a pregnant woman in QHP pregnancy hold selects the option to transition from a QHP to another Insurance Affordability Program.
Eligibility and Enrollment	General Requirement	38097	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall set the end date for the QHP pregnancy hold to the expected date of delivery. The QHP pregnancy hold will end at expected date of delivery or when the consumer reports the end of the pregnancy or the birth of the child, whichever is sooner.
Eligibility and Enrollment	General Requirement	38098	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall limit the option to transition from APTC to other insurance affordability programs to the 15th of the month prior to the month of the Expected Delivery Date. Once the pregnancy end date is reported, the option to transition shall no longer be displayed.

Category	Sub Category	Req ID	Requirement
Eligibility and Enrollment	General Requirement	38100	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) eHIT interface shall add a new title 21 program node which will be populated with MCAP and CCHIP program information.
Eligibility and Enrollment	General Requirement	38101	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall discontinue APTC following the 15 day rule when a consumer elects to end the QHP pregnancy hold.
Eligibility and Enrollment	General Requirement	38102	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall add functionality for the eligibility into MCAP to begin the day after the last day of Qualified Health Plan eligibility.
Eligibility and Enrollment	General Requirement	38103	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall add functionality for the eligibility into Medi-Cal to begin based on the effective dating rules defined in CR 46047 (Carry Forward).
Eligibility and Enrollment	General Requirement	38104	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall add functionality allowing all users to select the option for a pregnant woman in MCAP, who meets the QHP eligibility criteria, to transition to QHP during Open Enrollment or in a Special Enrollment Period.
Eligibility and Enrollment	General Requirement	38105	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall disregard the existing aid code hierarchy and assign a QHP aid code when a pregnant woman, with current MCAP eligibility and who meets the QHP eligibility criteria, elects to transition to a QHP.
Eligibility and Enrollment	General Requirement	38106	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall limit the transition from the Medi-Cal Access Program into a Qualified Health Plan to the open enrollment period or upon declaration of a qualifying life event.
Eligibility and Enrollment	General Requirement	38107	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall discontinue MCAP following the 15 day rule when a consumer elects to switch out of MCAP.
Eligibility and Enrollment	General Requirement	38108	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall add functionality for the eligibility into the Qualified Health Plan to begin the day after the last day of eligibility in the Medi-Cal Access Program.
Eligibility and Enrollment	General Requirement	38109	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall suppress the text that contains the option to switch on the Eligibility Results page after user elects to keep or switch eligibility. If consumer is still eligible to switch, user will have the option to switch on the Individual homepage.
Eligibility and Enrollment	General Requirement	38110	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall create a report to track the enrollments that were pending to see if they become effectuated and capture the choice made on the Keep or Switch Coverage page.
Eligibility and Enrollment	General Requirement	38111	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall add the functionality for admins to return consumers who have selected to transition to another coverage to their previous program
Eligibility and Enrollment	General Requirement	38115	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall add language in the NOD01 to inform the consumer when the admin returned them to previous coverage
Eligibility and Enrollment	General Requirement	38678	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) system shall display to the consumer the minimum set of applicable questions necessary to determine eligibility.

Category	Sub Category	Req ID	Requirement
Eligibility and Enrollment			California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall use the following immigration statuses to determine lawful presence and eligibility for APTC/CSR/CCP/CAPS. If one of the following immigration statuses is selected but there is no document information sufficient for electronic verification of immigration status, eligibility shall be conditional until electronic or admin verification is provided.
		38788	1) Lawful Permanent Resident (LPR/Green Card holder) 2) A non-citizen with an approved visa petition, who has a pending application for adjustment to LPR status 3) A non-citizen, without a visa petition, who has a pending application for adjustment to LPR Status, with Employment Authorization 4) Refugee 5) Asylee 6) Cuban/Haitian Entrant 7) Amerasian Immigrant 8) Granted withholding of deportation or removal 9) Granted a stay of deportation 10) Granted suspension of deportation whose departure USCIS does not contemplate enforcing 11) Conditional Entrant granted before 1980 12) Paroled into the United States for one year or more 13) Paroled into the United States for less than one year 14) Battered non-citizen, or parent or child of battered non-citizen 15) Granted Deferred Action (but not under Deferred Action for Childhood Arrivals - DACA) Deferred Action for Childhood Arrivals - DACA 16) Granted Order of Supervision, with Employment Authorization 17) Registry applicant, with Employment Authorization 18) Pending application for Creation of Record of Lawful Admission for Permanent Residence, with Employment Authorization 19) Granted withholding of removal under the Convention against Torture – CAT 20) Granted for a Victim of Trafficking visa (T visa), or spouse, child, sibling, or parent 21) Pending application for a Victim of Trafficking visa (T visa), or spouse, child, sibling, or parent 22) Granted U non-immigrant visa 23) Student Visa – Granted a student visa (e.g. F or M visa) 24) Work Visa – Granted a work visa (e.g. H-1, J-1, O, R, P visa) 25) Visitor Visa – Granted a visitor visa (e.g. B visa) 26) Lawful Temporary Resident (special agricultural workers, or certain immigrants admitted into the U.S. before 1982) 27) Granted Temporary Protected Status (TPS), or pending applicants for TPS (pending applicants must have Employment Authorization) 28) Family Unity Beneficiary 29) Granted Deferred Enforced Departure
	General Requirement		

Category	Sub Category	Req ID	Requirement
Eligibility and Enrollment			California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall grant conditional full scope Medi-Cal eligibility (without requiring immigration document and Alien Number information) for otherwise eligible consumers who attest to any of the following immigration statuses listed below. Conditional eligibility status shall be removed once verified.
		38789	1) Lawful Permanent Resident (LPR/Green Card holder) 2) A non-citizen with an approved visa petition, who has a pending application for adjustment to LPR status 3) A non-citizen, without a visa petition, who has a pending application for adjustment to LPR Status, with Employment Authorization 4) A non-citizen who has a pending application for adjustment to LPR status, without Employment Authorization 5) Refugee 6) Asylee 7) Cuban/Haitian Entrant 8) Amerasian Immigrant 9) Granted withholding of deportation or removal 10) Granted a stay of deportation 11) Granted suspension of deportation whose departure USCIS does not contemplate enforcing 12) Conditional Entrant granted before 1980 13) Paroled into the United States for one year or more 14) Paroled into the United States for less than one year 15) Battered non-citizen, or parent or child of battered non-citizen 16) Granted Deferred Action (but not under Deferred Action for Childhood Arrivals - DACA) 17) Granted Deferred Action for Childhood Arrivals – (DACA) 18) Granted Order of Supervision, with Employment Authorization 19) Granted Order of Supervision, without Employment Authorization 20) An immigrant who entered and has continuously resided in the United States since before January 1, 1972, who would be eligible for an adjustment of status to lawful permanent resident (eligible as a Registry immigrant). 21) Granted voluntary departure and awaiting issuance of a visa 22) A non-citizen on whose behalf an immediate relative petition (I-130) has been approved and who is entitled to voluntary departure 23) Granted for a Victim of Trafficking visa (T visa), or spouse, child, sibling, or parent 24) Pending application for a Victim of Trafficking visa (T visa), or spouse, child, sibling, or parent 25) Taking steps to apply for a T visa or for certification by the Office of Refugee Resettlement 26) Granted U non-immigrant visa 27) Filed for a U visa
	General Requirement		

Category	Sub Category	Req ID	Requirement
Eligibility and Enrollment		38790	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall determine INELIGIBILITY for APTC/CSR when the consumer is eligible or conditionally eligible to full-scope Medi-Cal, household income is less than or equal to 138%FPL, and who attest to any of the following immigration statuses: 1) Lawful Permanent Resident (LPR/Green Card holder) 2) A non-citizen with an approved visa petition, who has a pending application for adjustment to LPR status 3) A non-citizen, without a visa petition, who has a pending application for adjustment to LPR Status, with Employment Authorization 4) A non-citizen who has a pending application for adjustment to LPR status, without Employment Authorization 5) Refugee 6) Asylee 7) Cuban/Haitian Entrant 8) Amerasian Immigrant 9) Granted withholding of deportation or removal 10) Granted a stay of deportation 11) Granted suspension of deportation whose departure USCIS does not contemplate enforcing 12) Conditional Entrant granted before 1980 13) Paroled into the United States for one year or more 14) Paroled into the United States for less than one year 15) Battered non-citizen, or parent or child of battered non-citizen 16) Granted Deferred Action (but not under Deferred Action for Childhood Arrivals - DACA) 17) Granted Deferred Action for Childhood Arrivals – (DACA) 18) Granted Order of Supervision, with Employment Authorization 19) Granted Order of Supervision, without Employment Authorization 20) An immigrant who entered and has continuously resided in the United States since before January 1, 1972, who would be eligible for an adjustment of status to lawful permanent resident (eligible as a Registry immigrant). 21) Granted voluntary departure and awaiting issuance of a visa 22) A non-citizen on whose behalf an immediate relative petition (I-130) has been approved and who is entitled to voluntary departure 23) Granted for a Victim of Trafficking visa (T visa), or spouse, child, sibling, or parent 24) Pending application for a Victim of Trafficking visa (T visa), or spouse, child, sibling, or parent 25) Taking steps to apply for a T visa or for certification by the Office of Refugee Resettlement 26) Granted U non-immigrant visa 27) Filed for a U visa
	General Requirement		
Eligibility and Enrollment		38791	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall grant restricted scope Medi-Cal eligibility (without requiring immigration document and Alien Number information) for otherwise eligible consumers who attest to any of the following immigration statuses if the individual is known to be 21 or older and not pregnant. 1) Pending application for Creation of Record of Lawful Admission for Permanent Residence, with Employment Authorization 2) Granted withholding of removal under the Convention against Torture – CAT 3) Student Visa – Granted a student visa (e.g. F or M visa) 4) Work Visa – Granted a work visa (e.g. H-1, J-1, O, R, P visa) 5) Visitor Visa – Granted a visitor visa (e.g. B visa) 6) Lawful Temporary Resident (special agricultural workers, or certain immigrants admitted into the U.S. before 1982) 7) Granted Temporary Protected Status (TPS), or pending applicants for TPS (pending applicants must have Employment Authorization) 8) Family Unity Beneficiary 9) Granted Deferred Enforced Departure 10) Resident of American Samoa 11) Citizens of Micronesia, the Marshall Islands, and Palau 12) Administrative order staying removal issued by the Department of Homeland Security 13) Registry applicant, with Employment Authorization 14) Pending application for legalization under Immigration Reform and Control Act - IRCA, with Employment Authorization 15) Pending application for asylum with Employment Authorization or is under the age of 14 and has had a pending application for asylum for at least 180 days 16) Pending application for withholding of removal with Employment Authorization, or is under the age of 14 and has had a pending application for withholding of removal for at least 180 days 17) Pending application for legalization under the LIFE Act, with Employment Authorization 18) Pending application for suspension of deportation, or cancellation of removal or special rule cancellation of removal, with Employment Authorization 19) Pending application for Special Immigrant Juvenile Status
	General Requirement		

Category	Sub Category	Req ID	Requirement
Eligibility and Enrollment		38792	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall grant conditional (if not verified) full scope Medi-Cal to consumers otherwise eligible and known to be under 21 or pregnant for the following immigration statuses: 1) Pending application for Creation of Record of Lawful Admission for Permanent Residence, with Employment Authorization 2) Granted withholding of removal under the Convention against Torture – CAT 3) Student Visa – Granted a student visa (e.g. F or M visa) 4) Work Visa – Granted a work visa (e.g. H-1, J-1, O, R, P visa) 5) Visitor Visa – Granted a visitor visa (e.g. B visa) 6) Lawful Temporary Resident (special agricultural workers, or certain immigrants admitted into the U.S. before 1982) 7) Granted Temporary Protected Status (TPS), or pending applicants for TPS (pending applicants must have Employment Authorization) 8) Family Unity Beneficiary 9) Granted Deferred Enforced Departure 10) Resident of American Samoa 11) Citizens of Micronesia, the Marshall Islands, and Palau 12) Administrative order staying removal issued by the Department of Homeland Security 13) Registry applicant, with Employment Authorization 14) Pending application for legalization under Immigration Reform and Control Act - IRCA, with Employment Authorization 15) Pending application for asylum with Employment Authorization or is under the age of 14 and has had a pending application for asylum for at least 180 days 16) Pending application for withholding of removal with Employment Authorization, or is under the age of 14 and has had a pending application for withholding of removal for at least 180 days 17) Pending application for legalization under the LIFE Act, with Employment Authorization 18) Pending application for suspension of deportation, or cancellation of removal or special rule cancellation of removal, with Employment Authorization 19) Pending application for Special Immigrant Juvenile Status
	General Requirement		
Eligibility and Enrollment		38793	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall determine eligible or conditionally eligible (if not verified) for CCP/APTC/CSR when the consumer is eligible or conditionally eligible to restricted-scope Medi-Cal, if household income is less than or equal to 138%FPL, for the following immigration statuses. Pending Medi-Cal eligibility shall not allow eligibility or conditional eligibility for CCP/APTC/CSR. 1) Pending application for Creation of Record of Lawful Admission for Permanent Residence, with Employment Authorization 2) Granted withholding of removal under the Convention against Torture – CAT 3) Student Visa – Granted a student visa (e.g. F or M visa) 4) Work Visa – Granted a work visa (e.g. H-1, J-1, O, R, P visa) 5) Visitor Visa – Granted a visitor visa (e.g. B visa) 6) Lawful Temporary Resident (special agricultural workers, or certain immigrants admitted into the U.S. before 1982) 7) Granted Temporary Protected Status (TPS), or pending applicants for TPS (pending applicants must have Employment Authorization) 8) Family Unity Beneficiary 9) Granted Deferred Enforced Departure 10) Resident of American Samoa 11) Citizens of Micronesia, the Marshall Islands, and Palau 12) Administrative order staying removal issued by the Department of Homeland Security 13) Registry applicant, with Employment Authorization 14) Pending application for legalization under Immigration Reform and Control Act - IRCA, with Employment Authorization 15) Pending application for asylum with Employment Authorization or is under the age of 14 and has had a pending application for asylum for at least 180 days 16) Pending application for withholding of removal with Employment Authorization, or is under the age of 14 and has had a pending application for withholding of removal for at least 180 days 17) Pending application for legalization under the LIFE Act, with Employment Authorization 18) Pending application for suspension of deportation, or cancellation of removal or special rule cancellation of removal, with Employment Authorization 19) Pending application for Special Immigrant Juvenile Status .
	General Requirement		
Eligibility and Enrollment		38794	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall use SAWS administrative verification of immigration if available instead of VLP verification.
	General Requirement		
Eligibility and Enrollment		38795	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall request Grant Date through VLP if sufficient document information is provided to make a VLP request and SAWS provides administrative verification without the Grant Date for the following statuses: oLawful Permanent Resident (LPR/Green Card holder) o Conditional Entrant granted before 1980 o Paroled into the United States for one year or more o Battered non-citizen, or parent or child of battered non-citizen
	General Requirement		
Eligibility and Enrollment		38864	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) system shall auto-determine eligibility for the next benefit year when ""Report a Change"" occurs between system dates 11/1 and 12/31 for the current benefit year for when MAGI Medi-Cal only case results in at least 1 household member being ineligible/discontinued for all programs for the current benefit year and the case is not part of the Exchange Renewal population.
	General Requirement		

Appendix A-4 - SOW Exhibit A - System Requirements Specification
(Extracted from CalHEERS RTM)

Category	Sub Category	Req ID	Requirement
Eligibility and Enrollment	General Requirement	38918	With the exception of intake or renewals, the California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall only trigger the Income Services Verification for individual within the subsidy FPL limits when subsidy income verification is not cached.
Eligibility and Enrollment	General Requirement	38919	With the exception of intake or renewals, the California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall only trigger the Income Services Verification for individuals within the MAGI Medi-Cal FPL limits when MAGI Medi-Cal income verification is not cached at an individual level
Eligibility and Enrollment	General Requirement	38920	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall not trigger the Income Services Verification when a Negative Action is received for individuals within the MAGI Medi-Cal FPL Limits and their current MAGI Medi-Cal Income Verifications are not cached.
Eligibility and Enrollment	General Requirement	38921	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall limit the number of IRS requests made to the Income Services Verification to no more than once per refresh cycle per SSN list value for a Report a Change.
Eligibility and Enrollment	General Requirement	38922	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall limit the number of IRS requests made to the Income Services Verification to no more than once per refresh cycle per SSN list even if the impacted data elements related to Income (except for SSN) are changed.
Eligibility and Enrollment	General Requirement	38923	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall call IRS income service if the SSN list value is changed within the Refresh Cycle.
Eligibility and Enrollment	General Requirement	39027	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall create a dynamic application for the State Medi-Cal Inmate Eligibility Program (MCIEP).
Eligibility and Enrollment	General Requirement	39028	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall only allow DHCS MCIEP staff to create, submit and make changes to State MCIEP applications.
Eligibility and Enrollment	General Requirement	39029	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall prevent individuals other than the DHCS MCIEP staff from creating or updating State MCIEP cases.
Eligibility and Enrollment	General Requirement	39030	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall have the ability to capture the following information: • Incarceration Status • Date of Incarceration • CDCR Number • Deceased status and date of death (if applicable) • Long Term Care status and start and end date of Long Term Care (if applicable) • Pseudo ID • Place of Birth (Country and State) • Inmate's County of Responsibility
Eligibility and Enrollment	General Requirement	39031	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall only evaluate State MCIEP applications for State Inmate and State Medical Parole Program aid codes.
Eligibility and Enrollment	General Requirement	39032	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall have the functionality to determine eligibility for the State Inmate Program and the State Medical Parole Program aid codes as State MCIEP.
Eligibility and Enrollment	General Requirement	39033	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall have the ability to determine eligibility for the following State Inmate aid codes under State MCIEP. • N5 (Full Scope) • N6 (Restricted Scope)
Eligibility and Enrollment	General Requirement	39034	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall allow eligibility determinations under MAGI MCIEP State Inmate Medi-Cal aid code N5 when a consumer: • is an adult age 19-64 • is a U.S. citizen or has satisfactory immigration status • is at or below 138% FPL • is not enrolled or entitled to Medicare Part A and/or B • is a recipient of inpatient services off the correctional facility ground (in the past, current, or future) • is incarcerated in a state facility • is not deceased • is not pregnant • is not blind or disabled
Eligibility and Enrollment	General Requirement	39035	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall allow eligibility determinations under MAGI MCIEP State Inmate Medi-Cal aid code N6 when a consumer: • is an adult age 19-64 • is undocumented or does not have satisfactory immigration status • is at or below 138% FPL • is not enrolled or entitled to Medicare Part A and/or B • is a recipient of inpatient services off the correctional facility ground (in the past, current, or future) • is incarcerated in a state facility • is not deceased • is not pregnant • is not blind or disabled

Category	Sub Category	Req ID	Requirement
Eligibility and Enrollment	General Requirement	39036	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall have the ability to determine eligibility for the State Medical Parole aid codes under State MCIEP: • K2 (Full Scope) • K3 (Restricted Scope) • K4 (Full Scope) • K5 (Restricted Scope).
Eligibility and Enrollment	General Requirement	39037	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall allow eligibility determinations under MAGI MCIEP State Medical Parole aid code K2 when a consumer: • is an adult age 19-64 • is a citizen or has satisfactory immigration status • is at or below 138% FPL • is not pregnant • is not enrolled or entitled to Medicare Part A and/or B • is not deceased • is in Long Term Care
Eligibility and Enrollment	General Requirement	39038	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall allow eligibility determinations under MAGI MCIEP State Medical Parole aid code K2 when a consumer: • is an adult age 19-64 • is a citizen or has satisfactory immigration status • is disabled or blind • is above 128% FPL & under 138% FPL • is not pregnant • is not enrolled or entitled to Medicare Part A and/or B • is not deceased • is in Long Term Care
Eligibility and Enrollment	General Requirement	39039	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall allow eligibility determinations under MAGI MCIEP State Medical Parole aid code K3 when a consumer: • is adult age 19-64 • is undocumented or does not have satisfactory immigration status • is at or below 138% FPL • is not pregnant • is not enrolled or entitled to Medicare Part A and/or B • is not deceased • is in Long Term Care
Eligibility and Enrollment	General Requirement	39040	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall allow eligibility determinations under MAGI MCIEP State Medical Parole aid code K3 when a consumer: • is adult age 19-64 • is undocumented or does not have satisfactory immigration status • is disabled or blind • is above 128% FPL & under 138% FPL • is not pregnant • is not enrolled or entitled to Medicare Part A and/or B • is not deceased • is in Long Term Care
Eligibility and Enrollment	General Requirement	39041	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall allow eligibility determinations under MAGI MCIEP State Medical Parole aid code K4 when a consumer: • is an adult age 19-64 • is a citizen or has satisfactory immigration status • is disabled or blind • is at or below 128% FPL • is not pregnant • is not enrolled or entitled to Medicare Part A and/or B • is not deceased • is in Long Term Care

Category	Sub Category	Req ID	Requirement
Eligibility and Enrollment	General Requirement	39042	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall allow eligibility determinations under MAGI MCIEP State Medical Parole aid code K5 when a consumer: • is an adult age 19-64 • is undocumented or does not have satisfactory immigration status • is disabled or blind • is at or below 128% FPL • is not pregnant • is not enrolled or entitled to Medicare Part A and/or B • is not deceased • is in Long Term Care
Eligibility and Enrollment	General Requirement	39043	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall grant eligibility for the State Inmate Program aid codes under State MCIEP using the following effective start date rules for prospective eligibility determinations: • if application date and incarceration date fall within the same month, start date should be the date of incarceration • if incarceration date is in a month prior to the application date, start date should be the first day of the application month. • If the applicant is transitioning from a State Medical Parole aid code to a State Inmate aid code, start date should be the date following the Long Term Care End Date
Eligibility and Enrollment	General Requirement	39044	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall grant eligibility for the State Medical Parole aid codes under State MCIEP using the following effective start date rules for prospective eligibility determinations: • If the applicant is transitioning from a State Inmate aid code to Medical Parole aid code, start date should be the start date at Long Term Care Facility (LTC). • If the applicant does not have prior State MCIEP eligibility, the effective start date will be the first day of the application month.
Eligibility and Enrollment	General Requirement	39045	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall add the functionality to determine eligibility for State Inmate and Medical Parole programs within the same month when applicable.
Eligibility and Enrollment	General Requirement	39046	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall have the ability for the DHCS MCIEP staff to request a retroactive eligibility determination for State MCIEP applications.
Eligibility and Enrollment	General Requirement	39047	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall have the ability to grant closed period of eligibility for the State MCIEP up to three months prior to the application date when retroactive eligibility determination is requested.
Eligibility and Enrollment	General Requirement	39048	When retroactive eligibility determination is requested for State MCIEP and the inmate is not in a Long Term Care facility during the evaluation period, California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall grant eligibility for State Inmate aid codes based on the following rules: • if incarceration date falls within the requested benefit month, eligibility should start on the date of incarceration and end at the end of the requested benefit month • if incarceration date is in a month prior to the requested benefit month, eligibility should start on the first day of the requested benefit month • if incarceration date is in a month after the requested benefit month, the applicant will be Ineligible for the requested benefit month.
Eligibility and Enrollment	General Requirement	39049	When retroactive eligibility determination is requested for the State MCIEP and the inmate is in Long Term Care during the requested time period, California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall grant eligibility to a State Medical Parole aid code based on the following rules: • if Long Term Care start date falls within the requested benefit month, eligibility should start on the start date of Long Term Care and end at the end of the requested benefit month • if Long Term Care start date is in a month prior to the requested benefit month, eligibility should start on the first day of the requested benefit month • if Long Term Care start date is in a month after the requested benefit month, the applicant will be Ineligible for the requested benefit month.
Eligibility and Enrollment	General Requirement	39050	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) system shall add the functionality for DHCS MCIEP staff to apply negative action reasons in the California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) Portal to deny or discontinue State MCIEP cases.
Eligibility and Enrollment	General Requirement	39051	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall add the following negative action reasons for denial of State MCIEP eligibility: • Withdrew application for State MCIEP and requested to not be evaluated. • Not a resident of California.
Eligibility and Enrollment	General Requirement	39052	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) system shall add the following negative action reasons for discontinuance of State MCIEP eligibility: • Requested for State MCIEP benefits to end • Failed to complete the annual redetermination process. • Paroled from a state correctional facility and began receiving Medi-Cal on a non-MCIEP aid code. • Ex parte review completed by the county. • Not a resident of California.
Eligibility and Enrollment	General Requirement	39053	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) system shall deny or discontinue beneficiaries from State MCIEP when they no longer meet the program eligibility criteria or when they are negative actioned.
Eligibility and Enrollment	General Requirement	39054	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall deny eligibility for State Inmate Program and State Medical Parole Programs using the following effective dating rules: • When an applicant is Ineligible and was not previously Pending, the effective date of ineligibility is the run date. • When an applicant is Ineligible and was previously Pending, the effective date of ineligibility is the previous start date of Pending eligibility.
Eligibility and Enrollment	General Requirement	39055	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall discontinue eligibility for State Inmate and State Medical Parole Programs first day of the following month when the following negative action reasons are received: • Requested for State MCIEP benefits to end. • Failed to complete the annual redetermination process. • Not a resident of California.

Appendix A-4 - SOW Exhibit A - System Requirements Specification
(Extracted from CalHEERS RTM)

Category	Sub Category	Req ID	Requirement
Eligibility and Enrollment	General Requirement	39056	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall discontinue eligibility for State Inmate Program effective on the release date when the following negative action reasons are received: Released from a state correctional facility and began receiving Medi-Cal on a non-MCIEP aid code. • Ex parte review completed by the county.
Eligibility and Enrollment	General Requirement	39057	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall discontinue eligibility for State Medical Parole Program effective first day of the following month when the following negative action reasons are received: • Released from a state correctional facility and began receiving Medi-Cal on a non-MCIEP aid code. • Ex parte review completed by the county.
Eligibility and Enrollment	General Requirement	39058	When death is reported, the California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall discontinue State Inmate and State Medical Parole programs effective one day following the date of death.
Eligibility and Enrollment	General Requirement	39059	When the beneficiary no longer meets the age criteria for State Inmate or State Medical Parole Programs, the California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) system shall discontinue eligibility effective the first of the month of the beneficiary's 65th birthday.
Eligibility and Enrollment	General Requirement	39060	When the beneficiary's no longer meets the FPL requirements for State Inmate or State Medical Parole programs, the California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall discontinue State Inmate or State Medical Parole programs effective on the first date of the following month subsequent to the 10 day Medi-Cal Notice of Action being met.
Eligibility and Enrollment	General Requirement	39061	When any of the following verifications are failed for a State Inmate or State Medical Parole beneficiary, the California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall discontinue eligibility on the first day of the following month subsequent to the 10 day Medi-Cal Notice of Action being met. • SSN • MEC - Non ESI • Income • Medicare
Eligibility and Enrollment	General Requirement	39062	When the deceased verification is failed for a State Inmate or State Medical Parole beneficiary, the California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall discontinue eligibility on the first day of the following month.
Eligibility and Enrollment	General Requirement	39063	When a beneficiary of the State MCIEP is transitioning from the State Inmate Program to the State Medical Parole Program or vice versa, the California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) system shall update the aid code.
Eligibility and Enrollment	General Requirement	39064	When a beneficiary of the State Inmate Program aid code is transitioning to the State Medical Parole Program, the California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall end date the State Inmate Program aid code effective one day prior to the start date of Long Term Care.
Eligibility and Enrollment	General Requirement	39065	When a beneficiary of a State Medical Parole Program aid code is transitioning into the State Inmate Program, the California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall end date the State Medical Parole Program aid code effective the end date of Long Term Care.
Eligibility and Enrollment	General Requirement	39066	When a beneficiary's aid code for the State MCIEP is updated from State Inmate Program to State Medical Parole aid code or vice versa, the California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) system shall send a discontinuance transaction (HX40) to MEDS.
Eligibility and Enrollment	General Requirement	39067	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall have the ability to protect eligibility for the State MCIEP.
Eligibility and Enrollment	General Requirement	39068	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) system will protect eligibility for the State Inmate program aid codes if the selection value for any of the following elements change for the inmate: • State Facility indicator • Pregnancy status
Eligibility and Enrollment	General Requirement	39069	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) system will protect eligibility for the State Inmate program aid codes when the following verifications are failed: • Residency
Eligibility and Enrollment	General Requirement	39070	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System will protect eligibility for the Medical Parole program aid codes if the selection value for any of the following elements change for the inmate: • Pregnancy Status
Eligibility and Enrollment	General Requirement	39071	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) system will protect eligibility for the Medical Parole program aid codes when the following verifications are failed: • Residency
Eligibility and Enrollment	General Requirement	39072	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall have the ability to automatically discontinue beneficiaries who no longer meet the age requirements for State MCIEP.
Eligibility and Enrollment	General Requirement	39073	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall create new messaging on the Eligibility Results page for the State MCEIP.
Eligibility and Enrollment	General Requirement	39074	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall update the budget worksheet to include the State MCIEP budget.
Eligibility and Enrollment	General Requirement	39075	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall suppress all Non MAGI referrals from the California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) system for the State MCIEP cases.
Eligibility and Enrollment	General Requirement	39076	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall have the ability to identify and send to MEDS the aid codes relevant to the State Inmate or State Medical Parole Programs.
Eligibility and Enrollment	General Requirement	39077	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall update the following MEDS transactions for the State MCIEP: HX12, HX18, HX34, HX40, HX20 ESAC-1, HX20 ESAC-2.
Eligibility and Enrollment	General Requirement	39078	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall send 'Place of Birth' (Country and State) on the HX18, if present.

Appendix A-4 - SOW Exhibit A - System Requirements Specification
(Extracted from CalHEERS RTM)

Category	Sub Category	Req ID	Requirement
Eligibility and Enrollment	General Requirement	39079	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall send date of death on the following MEDS transactions when date of death is reported for the State Inmate: HX12, HX18, HX40.
Eligibility and Enrollment	General Requirement	39080	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall send Pseudo ID in lieu of the SSN on the following MEDS transactions whenever SSN is unavailable and Pseudo ID is available: Identify Member, HX12, HX18, HX34, HX40, HX20 ESAC-1, HX20 ESAC-2.
Eligibility and Enrollment	General Requirement	39081	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall send the DHCS MCIEP entered County of Responsibility (not the residence address) as the County of Responsibility for the following transactions: HX12, HX18, HX20, HX34, HX40.
Eligibility and Enrollment	General Requirement	39082	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System will start sending HX20 ESAC-6 and HX20 ESAC-7 for closed period retroactive determinations for State MCIEP.
Eligibility and Enrollment	General Requirement	39083	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System will send effective start and end dates, termination dates and termination reason on the HX20 ESAC-6 and HX20 ESAC-7.
Eligibility and Enrollment	General Requirement	39084	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall display MEDS alerts for HX20 ESAC-6 and HX20 ESAC-7.
Eligibility and Enrollment	General Requirement	39085	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall send HX34 to MEDS when State MCIEP eligibility goes from Pending to Ineligible.
Eligibility and Enrollment	General Requirement	39086	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall send the appropriate denial reasons to MEDS for State MCIEP.
Eligibility and Enrollment	General Requirement	39087	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall send the appropriate discontinuance reasons on HX40 to MEDS.
Eligibility and Enrollment	General Requirement	39088	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) system shall add renewal functionality for the State MCIEP.
Eligibility and Enrollment	General Requirement	39089	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall determine the State MCIEP renewal date as the last date of the twelfth month of State MCIEP coverage from the date eligibility was granted.
Eligibility and Enrollment	General Requirement	39090	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall add the functionality for DHCS MCIEP staff to indicate that the manual renewal process is complete.
Eligibility and Enrollment	General Requirement	39094	When any of the following verifications are failed for State MCIEP applicant without prior State Inmate or State Medical Parole program eligibility, the California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall deny eligibility. • SSN • MEC - Non ESI • Income • Deceased • Medicare
Eligibility and Enrollment	General Requirement	39095	At Renewals, California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall verify income, deceased, and Medicare verifications.
Eligibility and Enrollment	General Requirement	39096	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall enable 'Apply Now' mode on State MCIEP cases after eligibility is no longer effective on the case.
Eligibility and Enrollment	General Requirement	39119	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall suppress the following calls to the FDSH: Incarceration Verification, MEDS MEC, MEC - ESI, and VLP for State MCIEP.
Eligibility and Enrollment	General Requirement	39120	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall grant coverage for State MCIEP cases regardless of any other existing aid code in MEDS.
Eligibility and Enrollment	General Requirement	39121	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall pend eligibility when there's a discrepancy between the applicant's attested information and the response from the SSA and VLP verification service.
Eligibility and Enrollment	General Requirement	39167	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall use the ESI-MEC service response for eligibility purposes.
Eligibility and Enrollment	General Requirement	39180	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall log the reason for making or not making Income services call (IRS, EDD and FTB) based on the income verification caching rules.
Eligibility and Enrollment	General Requirement	39192	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall produce an Eligibility Evaluation Reason for MAGI Medi-Cal individuals determined ineligible or discontinued for MAGI Medi-Cal because of the dependency of another MAGI Medi-Cal household member's projected annual or current monthly income that is administratively assigned as not verified.
Eligibility and Enrollment	General Requirement	39196	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall add consumer messaging in the Eligibility Results page for Parent/Caretaker Relative individuals with an FPL greater than 114% up to and including 138% who are discontinued/ineligible for MAGI Medi-Cal because a dependent child who lives in the home does not have minimum essential coverage (MEC).
Eligibility and Enrollment	General Requirement	39198	Enter requirement text.
Eligibility and Enrollment	General Requirement	39200	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) system shall display the dropdown menu for Immigration Status before the dropdown menu for Immigration Document Type.
Eligibility and Enrollment	General Requirement	39201	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) system shall update the system validation for the Receipt or Card Number field to only allow the User to enter the number as first 3 characters as alpha the rest as numeric for a total of 13 characters to proceed with submission.
Eligibility and Enrollment	General Requirement	39203	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) system shall be updated to only allow numeric values in the Alien Number field to proceed with submission.

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(Extracted from CalHEERS RTM)

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Category	Sub Category	Req ID	Requirement
Eligibility and Enrollment	General Requirement	39208	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) system shall not display the Change Log in Report A Change Application flow
Eligibility and Enrollment	General Requirement	39209	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) system shall allow the consumer to provide Change Reason for Remove a Member Application flow.
Eligibility and Enrollment	General Requirement	39214	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall display the Secure Mailbox link to Consumers and Authorized Representatives on the Account Home page.
Eligibility and Enrollment	General Requirement	39243	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) system shall include cover page with NOD01 when at least one household member is conditional eligible.
Eligibility and Enrollment	General Requirement	39244	The cover page shall be the first page of the notice for the NOD01.
Eligibility and Enrollment	General Requirement	39245	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) system shall include cover page with NOD03 when at least one household member is conditional eligible.
Eligibility and Enrollment	General Requirement	39246	The cover page shall be the first page of the notice for the NOD03.
Eligibility and Enrollment	General Requirement	39249	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall send a DER-U when case data triggers eligibility, or there is a change in aid code or eligibility status for any individual on the case.
Eligibility and Enrollment	General Requirement	39250	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall update the functionality for income begin dates to ensure that we capture current calendar year income and open enrollment benefit year income information during OEP.
Eligibility and Enrollment	General Requirement	39251	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall have functionality for all users to access and submit current year RAC while case is in renewal mode.
Eligibility and Enrollment	General Requirement	39252	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall add the consent for verification dropdown on the sign and submit page for Report a Change.
Eligibility and Enrollment	General Requirement	39253	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall prompt consumers who discontinue/terminate enrollment in current benefit year after passive or active renewal to confirm intent to discontinue/terminate enrollment for the next benefit year coverage.
Eligibility and Enrollment	General Requirement	39254	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall generate ad-hoc reports from DW instead of requesting from OBIEE.
Eligibility and Enrollment	General Requirement	39255	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall allow non-Admin user to apply for the current year from open enrollment start date to 12/31 of current benefit year.
Eligibility and Enrollment	General Requirement	39257	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall process the Passive Renewal Simulation prior to Passive Renewals starting in Production to identify unknown issues.
Eligibility and Enrollment	General Requirement	39258	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall not call EDD or FTB at passive renewal when no consent for verification is on file.
Eligibility and Enrollment	General Requirement	39259	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall update the change plan effective date for enrollment extension.
Eligibility and Enrollment	General Requirement	39260	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall display the corresponding dates on the eligibility results page during open enrollment period from the enrollment extension date page.
Eligibility and Enrollment	General Requirement	39261	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall have the functionality for FTR Codes to be configurable so that they can be turned on or off independently of each other.
Eligibility and Enrollment	General Requirement	39262	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall have functionality to update the new Extension page to include -Open Enrollment-Begin and End dates -Renewal Begin and End Dates -Preview Plan-Start Date -RAC-End Date for Prior year -Over finish line-date
Eligibility and Enrollment	General Requirement	39263	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall have a configurable date for the consumer home page based on enrollment extension periods.
Eligibility and Enrollment	General Requirement	39264	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) system shall update the fair share adjustment percentage amount for the benefit year 2019.
Eligibility and Enrollment	General Requirement	39265	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall populate the renewal due date as [Renewal end date - 2 days] if the case is flagged for the last batch sweep at the time that the NOD12 is generated or NOD12 has not been generated and system date is greater than Renewal start date + 30 days.
Eligibility and Enrollment	General Requirement	39280	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall grant AI/AN limited cost sharing for AI/AN members when consent for electronic verification is not on file.
Eligibility and Enrollment	General Requirement	39281	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall request and store the SSA Title II for monthly and annual income and disabled person indicator in RRV batch.
Eligibility and Enrollment	General Requirement	39289	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) system shall systematically verify outstanding verification documents via the DIVS.

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(Extracted from CalHEERS RTM)

Category	Sub Category	Req ID	Requirement
Eligibility and Enrollment	General Requirement	39290	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) system shall verify only documents with a category of 'Manual Verifications' that are from the 'Print / Mail' vendor.
Eligibility and Enrollment	General Requirement	39291	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) system shall systematically verify conditional eligibility verification documents of any category or type if uploaded from the portal.
Eligibility and Enrollment	General Requirement	39292	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) system shall send multiple individuals with multiple outstanding verifications in a single request.
Eligibility and Enrollment	General Requirement	39293	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) system shall define a separate case match rule for each document type.
Eligibility and Enrollment	General Requirement	39294	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) system shall associate the document to the match case.
Eligibility and Enrollment	General Requirement	39295	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) system shall provide case and individual information for the DIVS to verify the supplied documentation.
Eligibility and Enrollment	General Requirement	39296	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) system shall receive a 'Pass' or 'Cannot Verify' response to a request for verification from the DIVS.
Eligibility and Enrollment	General Requirement	39297	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) system shall store a response of 'Cannot Verify' and reason and display on the portal from the DIVS.
Eligibility and Enrollment	General Requirement	39298	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) system shall generate a BPM Manual Verification task if the DIVS returns a 'Cannot Verify' response.
Eligibility and Enrollment	General Requirement	39299	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) system shall store the reason for the failed verification and display on the screen portal.
Eligibility and Enrollment	General Requirement	39300	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) system shall mark the verification as 'Pass' when 'Pass' is sent from the DIVS.
Eligibility and Enrollment	General Requirement	39301	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) system shall store the 'Pass' received from the DIVS.
Eligibility and Enrollment	General Requirement	39302	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) system shall follow all other existing Verification Caching rules when the BRE is triggered.
Eligibility and Enrollment	General Requirement	39305	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) system shall use certificate authentication for the encrypted webservice transactions.
Eligibility and Enrollment	General Requirement	39306	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall receive a search request from DIVS to be utilized to locate Case/Verification Data.
Eligibility and Enrollment	General Requirement	39307	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall return search result to DIVS including relevant case information or a result indicating no case found.
Eligibility and Enrollment	General Requirement	39308	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) system shall receive encrypted web service transaction from DIVS for search request.
Eligibility and Enrollment	General Requirement	39459	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall e-verify \$ 0 (zero) or no value attested income when all of the following responses are received: - SSN is e-verified from SSA, and - SSA Title II Monthly Income Information Indicator is False, and - SSA Title II Annual Income Information Indicator is False, and - IRS response is ""No tax return found"", and - FTB response is ""No Record Found"", and - EDD response is ""No Record Found"".
Eligibility and Enrollment	General Requirement	39465	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall count the taxable portion of the following income types for MAGI Medi-Cal and APTC/CSR determinations: Education scholarships, awards, and fellowship grants used for living expenses.
Eligibility and Enrollment	General Requirement	39526	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall update the messaging in the Shop and Compare pages to include information for State Subsidy.
Eligibility and Enrollment	General Requirement	39527	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall calculate preliminary eligibility results for the State Subsidy in the Shop and Compare tool.
Eligibility and Enrollment	General Requirement	39528	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall display preliminary eligibility results for the State Subsidy in the Shop and Compare tool.
Eligibility and Enrollment	General Requirement	39529	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall freeze the State Subsidy amount for consumers in Carry Forward Status as it currently freezes the APTC amount.
Eligibility and Enrollment	General Requirement	39530	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall use the existing QHP eligibility requirements when determining eligibility for the State Subsidy.
Eligibility and Enrollment	General Requirement	39531	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall require that consumers meet the APTC/CSR eligibility requirements with the exception of FPL levels in order to be eligible for the new State Subsidy.
Eligibility and Enrollment	General Requirement	39532	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall calculate eligibility for the State Subsidy amount based on >200% to <=400% of the Federal Poverty Level (FPL).

Category	Sub Category	Req ID	Requirement
Eligibility and Enrollment	General Requirement	39533	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall calculate eligibility for the State Subsidy amount based on >400% to <=600% of the Federal Poverty Level (FPL).
Eligibility and Enrollment	General Requirement	39534	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall freeze the State Subsidy amount for consumers in QHP Hold as it currently freezes the APTC amount.
Eligibility and Enrollment	General Requirement	39535	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall require that consumers apply for an Insurance Affordability Program (IAP) with a subsidized application in order to be eligible for a State Subsidy.
Eligibility and Enrollment	General Requirement	40896	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall display MCAP phone number on Account Homepage when at least one household member is Pending for MCAP.
Eligibility and Enrollment	General Requirement	41032	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall allow the SCR, CEW, Agent, CEC and PBE to enter or modify the Consumer's designation of an Authorized Representative when the Consumer has or has not created an account.
Eligibility and Enrollment	General Requirement	41378	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall include an Automatic Plan Selection indicator and APS Effective Date at an individual level in Account Transfer to determine whether a consumer meets the criteria for auto-enrollment.
Eligibility and Enrollment	General Requirement	41412	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall update the FPL values for 2022 based on the FPL guidelines received for 2022 from DHCS.
Eligibility and Enrollment	General Requirement	41743	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall have the functionality to determine MAGI-Based Medi-Cal eligibility, based on defined rules from DHCS, for Pre-Affordable Care Act (ACA) Medi-Cal cases for a Pre-ACA annual renewal received from SAWS via eHIT.
Eligibility and Enrollment	General Requirement	41744	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall have the functionality to determine MAGI-Based Medi-Cal eligibility, based on defined rules from DHCS, for Pre-Affordable Care Act (ACA) Medi-Cal members/cases for a Change in Circumstances received from SAWS via eHIT.
Eligibility and Enrollment	General Requirement	41745	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall have the functionality to return eligibility determinations to SAWS via eHit.
Eligibility and Enrollment	General Requirement	41931	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall include a DHCS specific Federal Poverty Levels (FPLs) table.
Eligibility and Enrollment	General Requirement	42004	The Vendor shall update the DHCS specific FPLs table annually as directed by DHCS.
Eligibility and Enrollment	General Requirement	42156	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall insert a skip reason into HBX_ELIG_REDETERM_STAGING table for cases which are skipped from BAT10A (Passive Renewal Eligibility Determination) due to having terminated/canceled enrollments.
Eligibility and Enrollment	General Requirement	42290	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall exclude the Non Hyde Abortion portion of premium from the Benchmark Premium amount when calculating subsidies in anonymous shop and compare.
Eligibility and Enrollment	General Requirement	42461	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall have the functionality to accept negative actions, as defined in the Negative Action design, via eHIT Eligibility Determination Requests (EDRs) from SAWS.
Eligibility and Enrollment	General Requirement	42462	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall have the functionality to deny pending MAGI-Based Medi-Cal applicants with pending eligibility status for which negative actions are received via SAWS EDR transactions.
Eligibility and Enrollment	General Requirement	42463	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall have the functionality to discontinue conditionally eligible or eligible MAGI-Based Medi-Cal beneficiaries for prospective months for which negative actions are received via SAWS EDR transactions.
Eligibility and Enrollment	General Requirement	42464	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall generate a single Denial Notice Of Action (CalNOD02) for a MAGI-Based Medi-Cal applicant with pending eligibility status for which a negative action is received and the individual has been denied.
Eligibility and Enrollment	General Requirement	42465	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall generate a single Discontinuance Notice Of Action (CalNOD02) for conditionally eligible or eligible MAGI-Based Medi-Cal beneficiaries for which a negative action has been processed and the individual has been discontinued.
Eligibility and Enrollment	General Requirement	42466	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall accept the following codes via EDR transactions from SAWS as valid individual-level negative action run reasons for denial of MAGI-Based Medi-Cal applicants with pending eligibility status: 09 - Application Opened in Error CR - Child Applied for Self 10 - Duplicate Application 18 - Written Withdrawal IZ - Receives SSI 16 - Failed to Complete Determination CN - On Aid Another Case 07 - Whereabouts Unknown 85 - Deceased IY - California Residency

Appendix A-4 - SOW Exhibit A - System Requirements Specification
(Extracted from CalHEERS RTM)

Category	Sub Category	Req ID	Requirement
Eligibility and Enrollment			The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall accept the following codes via EDR transactions from SAWS as valid individual-level negative action run reasons for discontinuance of conditionally eligible or eligible MAGI-Based Medi-Cal beneficiaries : KI - Deemed Child - Fam ReApp RD - Failed to Complete Redetermination K4 - Requested Disc. - Written C9 - Stop Aid for Optional Member CH - TMC Report Incomplete CG - TMC Report Not Recvd E4 - Non-Payment of Premium CN - On Aid Another Case 07 - Whereabouts Unknown 85 - Deceased IY - California Residency
	General Requirement	42467	
Eligibility and Enrollment	General Requirement	42468	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall accept CR (Child Applied for Self) via EDR transactions from SAWS as a valid individual-level negative action run reason for denial or discontinuance of all Exchange programs.
Eligibility and Enrollment	General Requirement	42470	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall bypass the 10-day notice period requirement for negative action denials of MAGI-Based Medi-Cal applicants with pending eligibility status.
Eligibility and Enrollment	General Requirement	42471	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall observe a 10-day notice period (10 calendar days from the last day of the current month) prior to discontinuing benefits for a current conditionally eligible or eligible MAGI-Based Medi-Cal beneficiary.
Eligibility and Enrollment	General Requirement	42472	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) system shall process eligibility determination requests as continuing for individuals when the negative action run reason code for the individual is sent after the 10-day notice period cut-off.
Eligibility and Enrollment			The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall not observe a 10-day notice period (10 calendar days from the last day of the current month) prior to discontinuing benefits for a current conditionally eligible or eligible MAGI-Based Medi-Cal beneficiary if one of the following individual level negative action run reason codes is provided for at least one member in the household: 85 - Deceased K4 - Requested Disc. - Written CN - On Aid Another Case 07 - Whereabouts Unknown IY - California Residency
	General Requirement	42473	
Eligibility and Enrollment	General Requirement	42474	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall exclude MAGI-Based Medi-Cal applicants from ongoing CalNOD02 notices after a negative action has been processed for the applicant.
Eligibility and Enrollment	General Requirement	42475	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall exclude conditionally eligible or eligible MAGI-Based Medi-Cal beneficiaries from ongoing CalNOD02 notices after a negative action has been processed for the beneficiary.
Eligibility and Enrollment			The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall continue to generate CalNOD02 notices for conditionally eligible or eligible MAGI-Based Medi-Cal beneficiaries for which: - No negative action has been received or - Their negative action has been cleared
	General Requirement	42476	
Eligibility and Enrollment	General Requirement	42477	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall deny pending MAGI-Based Medi-Cal eligibility or conditional eligibility to 8E, from the requested benefit month forward if the requested benefit month is equal to or after the application month.
Eligibility and Enrollment	General Requirement	42478	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall deny pending MAGI-Based Medi-Cal eligibility or conditional eligibility to 8E, for only the requested benefit month if the requested benefit month is before the application month.
Eligibility and Enrollment	General Requirement	42486	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall evaluate a non-custodial child's eligibility on a non-custodial parent's Insurance Affordability Programs (IAPs) application for APTC only and if determined eligible for APTC/QHP enrollment, enroll the non-custodial child in APTC/QHP.
Eligibility and Enrollment	General Requirement	42487	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall not evaluate a non-custodial child's eligibility on a non-custodial parent's IAPs for Medi-Cal health insurance benefits.
Eligibility and Enrollment	General Requirement	42488	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall deny applicants who receive Medicare for all Covered California Plans.
Eligibility and Enrollment	General Requirement	42633	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall display the question: "Are you expecting any changes to your current health care coverage?" on the Health Care Page during initial Insurance Affordability Programs applications and Report A Change.
Eligibility and Enrollment			The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall display as an option: "I do not qualify for a SSN" as per regulations a. 435.907(h)(1)(i) exception applies to individuals not eligible to receive an SSN. The b. 435.907(h)(1)(ii) exception applies to individuals who do not have an SSN and may only be issued an SSN for a valid non-work reason in accordance with 20 CFR 422.104.
	General Requirement	42634	
Eligibility and Enrollment	General Requirement	42635	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) system shall use taxable income in the calculation for MAGI-Based M/C program eligibility.
Eligibility and Enrollment	General Requirement	42636	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) system shall use taxable income in the calculation for APTC/CSR program eligibility.

Category	Sub Category	Req ID	Requirement
Eligibility and Enrollment	General Requirement	42637	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall update messaging on application income pages to better guide consumers towards accurate completion of these pages.
Eligibility and Enrollment	General Requirement	42638	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall update messaging on application deduction pages to better guide consumers towards accurate completion of these pages.
Eligibility and Enrollment	General Requirement	42639	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) system shall use non-taxable interest income, non-taxable social security benefits and non-taxable foreign earned income in the calculation for APTC/CSR program eligibility.
Eligibility and Enrollment	General Requirement	42640	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall restrict the lump sum frequency to only “Other Income” types.
Eligibility and Enrollment	General Requirement	42641	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall collect projected yearly income data at the person level.
Eligibility and Enrollment	General Requirement	42642	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall use projected yearly income data at the person level in the APTC calculation when projected yearly income data is collected.
Eligibility and Enrollment	General Requirement	42643	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall display "Yes" and "No" radio buttons next to the question "Are you expecting any changes to your current health care coverage?" on the Health Care Page.
Eligibility and Enrollment	General Requirement	42644	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) system shall use allowable deduction types in the calculation for MAGI-Based M/C program eligibility: Alimony Paid Student Loan Interest Other Business expenses of reservists, performing artists, etc. Deductible part of self-employment tax Domestic production activities Educator expenses Health Savings Account Hobby income expenses, or expenses from an activity you did not expect to see a profit IRA deduction Moving expenses Penalty on early withdrawal of savings Rental of personal property expenses Self-employed health insurance deduction Self-employed SEP, Simple, and qualified deduction Tuition and fees paid by individual (not paid by financial aid)
Eligibility and Enrollment	General Requirement	42645	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) system shall use allowable deduction types in the calculation for APTC program eligibility.
Eligibility and Enrollment	General Requirement	42646	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall use projected annual income for the calendar year as the basis of financial eligibility for Medi-Cal beneficiaries. As required by CMS approved MAGI SPA 13-0023.
Eligibility and Enrollment	General Requirement	42647	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall use the projected annual income in all Renewals after the implementation of this functionality.

Category	Sub Category	Req ID	Requirement
Eligibility and Enrollment		42649	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall validate Email with the following rules. Email: - Minimum of 1 character (if required) and maximum of 50 characters - Name - If there is a period, first characters prior to first period character (any combination of) - Underscores - Lower case letters - Upper case letters - Digits 0 through 9 - Hyphens - Rest of name (any combination of) - Periods - Underscores - Lower case letters - Upper case letters - Digits 0 through 9 - Hyphens - @ symbol - Domain name (any combination of) - If there is a period, prior to first period - Lower case letters - Upper case letters - Digits 0 through 9 - Hyphens - After first period (any combination of) - Periods - Lower case letters - Upper case letters - Digits 0 through 9 - Hyphens - Extension (last period precedes extension) - 2 to 4 lower case letters or upper case letters for example ('com', 'net', 'org', etc.)
	General Requirement		
Eligibility and Enrollment		42650	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall validate Address Line 1, Address Line 2 with the following rules. Address Line 1 and Address Line 2 (any combination of): • Minimum of 1 character (if required) and maximum of 50 characters • Digits 0 to 9 • Lower case letters • Upper case letters • Periods • Apostrophes • Hyphens • Commas • Spaces • Forward Slash • Backward Slash • Number Sign (#)
	General Requirement		
Eligibility and Enrollment	General Requirement	42666	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall display the AI/AN-specific income types to AI/AN consumers.
Eligibility and Enrollment	General Requirement	42667	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) system shall not use AI/AN-specific income types in the calculation for MAGI-Based M/C program eligibility.
Eligibility and Enrollment	General Requirement	42668	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) system shall use AI/AN-specific income types in the calculation for APTC program eligibility.
Eligibility and Enrollment	General Requirement	42669	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall project the annual income based on monthly income when projected annual income is not present.
Eligibility and Enrollment	General Requirement	42670	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall use the income as reported and use effective dating to calculate Magi-Medi-Cal eligibility when a change of income is reported or during renewal.

Appendix A-4 - SOW Exhibit A - System Requirements Specification
(Extracted from CalHEERS RTM)

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Category	Sub Category	Req ID	Requirement
Eligibility and Enrollment	General Requirement	42671	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall offer the consumer the opportunity to enter PAI. The PAI when PAI is present when determining Medi-Cal eligibility for both applicants and beneficiaries. As per CMS approved MAGI SPA 13-0023.
Eligibility and Enrollment	General Requirement	42672	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall display "Date of change" with a date field when the "Yes" radio button is selected to the question "Are you expecting any changes to your current health care coverage?"
Eligibility and Enrollment	General Requirement	42673	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall update eHIT schema to SAWS when a consumer reports a future increase or decrease in income.
Eligibility and Enrollment	General Requirement	42674	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall not annualize lump sum income when reported in the month of application or a retro-active month of application.
Eligibility and Enrollment	General Requirement	42675	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall use Lump Sum income when reported in the month of application or in a retro-active month as income only in the month received.
Eligibility and Enrollment	General Requirement	42676	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall display the question "Is this person expected to be required to file taxes?" to all members on the application without any conditions.
Eligibility and Enrollment	General Requirement	42677	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall require all members of the application to complete the question "Is this person expected to be required to file taxes?"
Eligibility and Enrollment	General Requirement	42678	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall display an error message and prevent the applicant from proceeding from the tax filing page when an applicant selects Head of Household as a filing status and claims to be a dependent of another tax payer.
Eligibility and Enrollment	General Requirement	42679	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall prevent married applicants from on spouse selecting married filing jointly as a filing status and the other spouse does not select married filing jointly as their filing status but instead selects a different filing status.
Eligibility and Enrollment	General Requirement	42680	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall display an error message and prevent the applicant from proceeding from the tax filing page when a married applicant selects married filing jointly as a filing status and their spouse does not select married filing jointly as their filing status but instead select a different filing status.
Eligibility and Enrollment	General Requirement	42681	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall require the question "Does this person receive Medicare benefits?" of all applicants regardless if they are requesting assistance for paying for health insurance or requesting unsubsidized health insurance.
Eligibility and Enrollment	General Requirement	42682	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall update the streamlined application by removing the question "Is this person a naturalized citizen.
Eligibility and Enrollment	General Requirement	42683	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall have functionality that prevents actual plan effectuation to occur on a date < / = to the end date entered for "Date of change" next to the question "Are you expecting any changes to your current health care coverage? When "Yes" has been selected and the date of change is entered in the end date field.
Eligibility and Enrollment	General Requirement	42684	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall display a link on the "Get Help with Costs" page to inform a parent of a deemed infant the proper steps to obtain coverage for that child.
Eligibility and Enrollment	General Requirement	42685	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall ask the following questions relating to Employer Sponsored Insurance for subsidy applicants: 1) Name 2) Whether the plan meets minimum value standard 3) How much an employee pays in premiums for the lowest cost plan? 4) How frequently an employee premium is paid on the plan (choose from Weekly, Every 2 weeks, Quarterly, Monthly, Twice a month, Yearly
Eligibility and Enrollment	General Requirement	42686	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall display the following text relating to Employer Sponsored Insurance: "What's the name of the lowest-cost, self-only health plan this employee could enroll in at this job? Consider only those plans that meet the minimum value standard* set by the Federal Patient Protection and Affordable Care Act of 2010. If you're not sure, ask your health insurance issuer."
Eligibility and Enrollment	General Requirement	42687	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall display the following help text relating to Employer Sponsored Insurance: "Minimum value standard means that a plan pays at least 60% of the total cost of plan benefits provided to the employee. (Section 36B(c)(2)(C)(ii) of the Internal Revenue Code of 1986)".
Eligibility and Enrollment	General Requirement	42688	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall not ask for prior year tax filing status information.
Eligibility and Enrollment	General Requirement	42689	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall create a page at the beginning of the single streamlined application flow that displays the first question of the application, do you want help paying for your health insurance?
Eligibility and Enrollment	General Requirement	42690	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall include the functionality to change the application type to either Subsidized or Unsubsidized.
Eligibility and Enrollment	General Requirement	42691	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall Update to a single collection method of Social Security Numbers (SSNs) three connected boxes, first box takes 3 numbers, second box takes 2 numbers, third box takes 4 numbers.
Eligibility and Enrollment	General Requirement	42692	Update to a single collection labeling format for Date of Birth (DOB) collection format to be MM/DD/YYYY.
Eligibility and Enrollment	General Requirement	42693	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall Create links within the Application pages that redirect to specific information dealing with the question(s) on the page, providing greater detail on the nature of the question. These links will be hosted outside of California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) but presented during the application process, allowing for the information to be updated on an as-needed basis based on feedback and other criteria.
Eligibility and Enrollment	General Requirement	42694	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall allow a future date to be entered into the "Date of change" date field next to the question "Are you expecting any changes to your current health care coverage? When "Yes" has been selected.
Eligibility and Enrollment	General Requirement	42695	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall allow a user to enter the Termination Date of their source of MEC.

Appendix A-4 - SOW Exhibit A - System Requirements Specification
(Extracted from CalHEERS RTM)

Category	Sub Category	Req ID	Requirement
Eligibility and Enrollment	General Requirement	42696	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall remove the exemption for a Child under the age of one (1) from providing a social security card (SSN). (435.907(h)(1)(iii) exception applies to individuals who refuse to obtain an SSN because of well-established religious objections.) This would include parents or caretaker relatives who refuse to apply for an infant's SSN because of well-established religious objection.
Eligibility and Enrollment	General Requirement	42697	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall add a reason of - "I have applied for a SSN".
Eligibility and Enrollment	General Requirement	42698	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall display a space for the consumer to enter ATIN.
Eligibility and Enrollment	General Requirement	42699	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall display a space for the consumer to enter the ITIN.
Eligibility and Enrollment	General Requirement	42886	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System must provide the functionality to allow the Service Center Representative (SCR) and County Eligibility Worker (CEW) and/or any Covered CA designated roles to skip mandatory fields in California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) when assisting the Consumer.
Eligibility and Enrollment	General Requirement	42897	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) allow for selection of SEP Reason 'Informed of Penalty'
Eligibility and Enrollment	General Requirement	42935	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall include all individuals from a MAGI-Based Medi-Cal or Mixed Household case on a single Discontinuance or Denial Notice of Action (CALNOD02) for which a change in eligibility has been determined.
Eligibility and Enrollment	General Requirement	42936	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall send a DER with the program eligibility status for the benefit month for which eligibility has been determined.
Eligibility and Enrollment	General Requirement	42937	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall maintain, and continue to apply, individual-level negative action run reason codes received via SAWS EDR for MAGI-Based Medi-Cal individuals until the negative action is removed from the individual.
Eligibility and Enrollment	General Requirement	42938	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall allow County Eligibility Workers (CEWs), and users within the same security group, to remove an existing individual-level negative action run reason code in California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) for individuals with MAGI-Based Medi-Cal.
Eligibility and Enrollment	General Requirement	42939	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall have the functionality to remove an existing individual-level negative action run reason code in California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) when an EDR transaction from SAWS is received with the individual-level negative action run reason code absent from the request.
Eligibility and Enrollment	General Requirement	42940	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall only evaluate eligibility for APTC and CSR programs if a negative action is received from SAWS, and the individual is outside of the income range for Full Scope MAGI-Based Medi-Cal.
Eligibility and Enrollment	General Requirement	42941	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall display messaging to the consumer on the eligibility results page, informing them of their eligibility status and the reason for the negative action.
Eligibility and Enrollment	General Requirement	42942	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) and SAWS shall process eligibility requests (EDR) and responses (DER) to retain the California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) determined future program eligibility status up to high date in both systems for all applicants or beneficiaries on a MAGI-Based Medi-Cal and mixed household case.
Eligibility and Enrollment	General Requirement	42945	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) system shall maintain the existing verification and caching end dates when a negative action has been processed and an individual on the case has been denied or discontinued from MAGI-Based Medi-Cal.
Eligibility and Enrollment	General Requirement	42946	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall display Apply Now to the consumer on the individual landing page when a negative action has been processed and all individuals on the case have been denied or discontinued from MAGI based Medi-Cal
Eligibility and Enrollment	General Requirement	42947	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall display Report a Change to the consumer on the individual landing page when a negative action has been processed and an individual on the case has been denied or discontinued from MAGI based Medi-Cal, but one or more members on the case have an active eligibility determination.
Eligibility and Enrollment	General Requirement	42948	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) system shall generate the CaINOD02 for the benefit month.
Eligibility and Enrollment	General Requirement	42949	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) system shall generate a report which includes Negative Actions sent from SAWS on mixed household cases which include at least one MAGI Medi-Cal consumer.
Eligibility and Enrollment	General Requirement	42950	The CALHEERS System shall have the functionality to process negative action denials and discontinuances for MAGI-Based Medi-Cal applicants and beneficiaries based on program eligibility status.
Eligibility and Enrollment	General Requirement	42951	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall have the functionality to deny MAGI Medi-Cal eligibility for children who are conditionally eligible and granted Accelerated Enrollment aid code 8E.
Eligibility and Enrollment	General Requirement	44523	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall have the functionality to perform an Eligibility Simulation for the State Subsidy Program prior to Renewals start date.
Eligibility and Enrollment	General Requirement	45969	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall close renewal mode and change any in progress RRC to in-progress RAC application and keep the case in RAC mode when a user accesses the Account Home page after submitting renewal application and selecting both Health and Dental plans for the future benefit year.
Eligibility and Enrollment	General Requirement	45970	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall close renewal mode and change any in progress RRC to in-progress RAC application and keep the case in RAC mode when an Admin user accesses the Household Verifications page after submitting renewal application and selecting both Health and Dental plans for the future benefit year.
Eligibility and Enrollment	General Requirement	47134	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall change the Reasonable compatibility % computation for APTC/CAPS/CSR consumers to use the difference between the income amount received from electronic sources and the attested income over the e-source income amount when determining eligibility for APTC/CAPS/CSR.
Eligibility and Enrollment	General Requirement	47135	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall create a new page that allows authorized users to configure reasonable compatibility threshold % and threshold dollar amount.
Eligibility and Enrollment	General Requirement	47136	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall use a configurable % as the threshold for the reasonable compatibility test for income when determining eligibility for APTC/CAPS/CSR consumers.

Appendix A-4 - SOW Exhibit A - System Requirements Specification
(Extracted from CalHEERS RTM)

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Category	Sub Category	Req ID	Requirement
Eligibility and Enrollment	General Requirement	47137	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall make the reasonable compatibility percentage configurable by benefit year for APTC/CAPS/CSR consumers.
Eligibility and Enrollment	General Requirement	47138	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall implement the use of a configurable threshold dollar amount to evaluate reasonable compatibility test for income when determining eligibility for APTC/CAPS/CSR
Eligibility and Enrollment	General Requirement	47139	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall make the reasonable compatibility threshold dollar amount configurable by benefit year for APTC/CAPS/CSR consumers.
Eligibility and Enrollment	General Requirement	47140	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall evaluate a household as reasonably compatible for income for exchange financial assistance programs (APTC/CAPS/CSR) if the income from sources is found to be reasonably compatible by using either the threshold percentage or the threshold dollar amount.
Eligibility and Enrollment	General Requirement	47141	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall evaluate a household member as reasonably compatible for income for exchange financial assistance programs (APTC/CSR) if the response code from IRS is "Return information is unavailable"
Eligibility and Enrollment	General Requirement	47142	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall provide an indicator when Household Income - Subsidy is e-verified as a result of a "Return information is unavailable"
Eligibility and Enrollment	General Requirement	47143	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall create a new SEP configuration page.
Eligibility and Enrollment	General Requirement	47144	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall have capability to make updates to existing SEP reasons on new SEP Configuration page.
Eligibility and Enrollment	General Requirement	47145	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall have capability to enable an existing Placeholder SEP reason on new SEP Configuration page.
Eligibility and Enrollment	General Requirement	47146	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall add configurability in number of days for SEP expiration date for each of the QLE reason.
Eligibility and Enrollment	General Requirement	47147	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) BRE shall calculate the SEP End Date (Plan Selection End Date) using the configurable number of days for the QLE that was evaluated by the BRE run and using the most advantageous SEP End Date (Plan Selection End Date) logic when multiple QLE's are active.
Eligibility and Enrollment	General Requirement	47148	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) portal shall display the appropriate SEP End Date (Plan Selection End Date) by default based on the configurable number of days for the QLE that was evaluated by the BRE run. Impacted Pages: Basic Information – Special Enrollment Page Report a Change – Special Enrollment Page Admin Portal – Change Special Enrollment Period Type Page Admin Portal – Open Plan Shopping Window Page Household Verifications Page
Eligibility and Enrollment	General Requirement	47149	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) portal shall display the appropriate SEP End Date (Plan Selection End Date) based on the QLE that was evaluated by the BRE run and using the most advantageous SEP End Date (Plan Selection End Date) logic when multiple QLE's are active. Impacted Pages: Account Home – Household Summary Page Eligibility Results Summary Page Individual Eligibility Details Page MCT Dashboard
Eligibility and Enrollment	General Requirement	47150	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall remove 60 days static text for SEP days from snippets displayed on California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) portal. Impacted Pages: Basic Information – Special Enrollment Page RAC/Renewal – Special Enrollment Page Account Home – Important Dates Section Account Home - Household Summary Section Individual Eligibility Details Page Plan Selection Not Available Modal
Eligibility and Enrollment	General Requirement	47151	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall update the functionality of "None of the Above (Continue to review my application for Medi-Cal or MCAP)" QLE reason to have 0 days for SEP Expiration Date.
Eligibility and Enrollment	General Requirement	49114	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall trigger the Automatic Plan Selection (APS) logic, and the downstream processes for consumers who transitioned from Medi-Cal/MCAP/CCHIP to Covered CA and meet all the following criteria: - Consumer is not eligible to Procedural Discontinuance APS - In a subsequent redetermination of eligibility, the transition individual becomes Eligible or Conditionally Eligible to APTC - The transition individual becomes Eligible or Conditionally Eligible to APTC prior to the end of the configurable time frame.

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(Extracted from CalHEERS RTM)

Category	Sub Category	Req ID	Requirement
Eligibility and Enrollment	General Requirement	49115	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall create a new configurable value which will be used to determine the 'MCT Unsub to APS' End Date for consumers to gain APTC eligibility after the Unsubsidized CCP transition.
Eligibility and Enrollment	General Requirement	49116	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall assign an indicator for consumers that are transitioning from MAGI Medi-CAL/MCAP/CCHIP to Unsubsidized CCP and the following is applicable to the consumer: - Consumer is not eligible to Procedural Discontinuance APS
Eligibility and Enrollment	General Requirement	49117	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall update the 'MCT Unsub to APS' Flag from "Y" to "E" for cases/individuals that were identified as candidates for 'MCT Unsub to APS', as soon as plan selection occurs, which can be either manual plan selection or auto-plan selection for any benefit year.
Eligibility and Enrollment	General Requirement	49118	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall remove consumer's eligibility for 'MCT Unsub to APS' functionality if they become eligible to Manual APS Process 1 (MAPS1), Process 2 (MAPS2), or Process 3 (MAPS).
Eligibility and Enrollment	Notices		
Eligibility and Enrollment	Notices	37906	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) system shall add a snippets to the Eligibility Results page and to the ineligibility notice due to failure to file federal taxes/reconcile.
Eligibility and Enrollment	Notices	38169	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall generate an informational notice with new snippets for an APTC/CSR/CCP consumer in a "Carry Forward" status for all MAGI Medi-Cal IAP cases when at least one member of a household is in APTC/CSR/CCP and transitioning through "Carry Forward".
Eligibility and Enrollment	Notices	38170	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall suppress the NOD01 if the entire household is in a "Carry Forward" Status.
Eligibility and Enrollment	Notices	38171	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall update NOD01 Snippets addressing MAGI Medi-Cal to APTC/CSR/CCP transitions.
Eligibility and Enrollment	Notices	38172	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall create new NOD01 Snippets addressing MAGI Medi-Cal to APTC/CSR/CCP transitions.
Eligibility and Enrollment	Notices	38173	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall update NOD01 Snippets to include updated advocate language.
Eligibility and Enrollment	Notices	38174	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall generate an NODO1 with IAP transition specific snippets when the "Carry Forward" ends.
Eligibility and Enrollment	Notices	38175	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall generate an NODO1 with IAP transition specific snippets when an individual is discontinued and disenrolled (when applicable) after the Carry Forward period ends by being determined eligible or conditionally eligible for MAGI Medi-Cal.
Eligibility and Enrollment	Notices	38178	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall generate a NODO1 with new snippets for an APTC/CSR/CCP consumer in a "Carry Forward" status for all MAGI Medi-Cal IAP cases in which at least one member of the household is in MCAP or CCHIP.
Eligibility and Enrollment	Notices	38256	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall generate and send verification reminder notices to conditionally eligible consumers at configurable intervals during the reasonable opportunity expiration process.
Eligibility and Enrollment	Notices	38257	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall generate and send eligibility discontinuance notices to consumers that have been discontinued during the reasonable opportunity expiration process.
Eligibility and Enrollment	Notices	38328	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) system shall map "About Special Enrollment Periods" snippet (ID 328) at the household/case level instead of mapping at the primary contact level.
Eligibility and Enrollment	Notices	38346	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) system shall notify consumers of their projected eligibility in the notice of annual enrollment. (Note: This requirement applies to CCP/APTC/CSR programs only)
Eligibility and Enrollment	Notices	38462	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall generate a notice to employers in the following conditions: • If all mandatory employer information is available, and • When a consumer has an Initial determination of eligibility for APTC and is in an (Effectuated) Enrolled status with active employer income, or • When a consumer renews for the next benefit year and is eligible for APTC and is in an (Effectuated) Enrolled status and with active employer income, or • When a consumer, who is eligible for APTC and is in an (Effectuated) Enrolled status, reports a new current employer, or • When a consumer, who is eligible for APTC and is in an (Effectuated) Enrolled status, updates employer information and an employer notice has not been generated in the benefit year.
Eligibility and Enrollment	Notices	38463	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall upload a copy of the employer notice to the consumer's Documents and Correspondence page without triggering the secure mailbox notification to the consumer.
Eligibility and Enrollment	Notices	38464	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall add a new reason snippet for ineligibility to APTC/CCP/CSR programs during intake, or add a person during Report A Change, or add a person during Renewal, based on attestation to Medicare enrollment.
Eligibility and Enrollment	Notices	38521	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall add a new reason snippet to CalNOD01 for a consumer who is a new applicant and reports a lump sum income amount, which makes the consumer MAGI MC Ineligible in the application month and MAGI MC EL, CE or PE in the following month in order to inform the consumer of the current month Medi-Cal denial and following month Medi-Cal potential eligibility.
Eligibility and Enrollment	Notices	38522	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall update the appeals language on the NOD01 notice.

Appendix A-4 - SOW Exhibit A - System Requirements Specification
(Extracted from CalHEERS RTM)

Category	Sub Category	Req ID	Requirement
Eligibility and Enrollment	Notices	38523	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall remove duplicate text from snippet 165 that already exists in snippet 328.
Eligibility and Enrollment	Notices	38533	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall continue to generate Babel page for English NOD01.
Eligibility and Enrollment	Notices	38534	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall generate NOD01 according to Language Preference (Written) as noted in California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) Portal.
Eligibility and Enrollment	Notices	38611	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall generate an NOD01a/b to households when all members are ineligible to APTC, CSR, CCP, MCAP, CCHIP and MAGI M/C from the California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) access channel.
Eligibility and Enrollment	Notices	38612	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall generate an NOD01a/b to households when at least one of the household members are ineligible to APTC, CSR, CCP, MCAP ,CCHIP and MAGI M/C, and at least one of the household members, on the same application, are eligible or conditionally eligible or pending eligible to MAGI M/C regardless of access channel.
Eligibility and Enrollment	Notices	38613	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall generate an NOD01c to households when all members are ineligible to APTC, CSR, CCP, MCAP, CCHIP and MAGI M/C from the California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) access channel.
Eligibility and Enrollment	Notices	38614	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall generate an NOD01c when at least one of the household members are ineligible to APTC, CSR, CCP, MCAP, CCHIP and MAGI M/C and at least one of the household members, on the same application, are eligible or conditionally eligible or pending eligible to MAGI M/C from the California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) access channel.
Eligibility and Enrollment	Notices	38615	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall generate an NOD01a/b to households when all applying members are ineligible to APTC, CSR, CCP, MCAP, CCHIP and MAGI M/C from the SAWS access channel.
Eligibility and Enrollment	Notices	38616	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall generate an NOD01a/b to households when at least one of the applying household members are ineligible to APTC, CSR, CCP, MCAP, CCHIP and MAGI M/C, and at least one of the household members, on the same application, are eligible or conditionally eligible or pending eligible to MAGI M/C from the SAWS access channel.
Eligibility and Enrollment	Notices	38617	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall generate an NOD01c to households when all applying members are ineligible to APTC, CSR, CCP, MCAP, CCHIP and MAGI M/C from the SAWS access channel.
Eligibility and Enrollment	Notices	38618	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall generate an NOD01c when at least one of the applying household members are ineligible to APTC, CSR, CCP, MCAP, CCHIP and MAGI M/C and at least one of the household members, on the same application, are eligible or conditionally eligible or pending eligible to MAGI M/C from the SAWS access channel.
Eligibility and Enrollment	Notices	38623	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall not generate an NOD01a/b to households when all members are found ineligible to APTC, CSR, CCP, MCAP ,CCHIP and found eligible or conditionally eligible or pending eligible to MAGI M/C when an eHIT an eligibility determination is received via the SAWS access channel.
Eligibility and Enrollment	Notices	38624	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall not generate an NOD01c to households when all members are ineligible to APTC, CSR, CCP, MCAP ,CCHIP and all members are eligible or conditionally eligible or pending eligible to MAGI M/C when an eHIT an eligibility determination is received via the SAWS access channel.
Eligibility and Enrollment	Notices	38625	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall generate a notice to employers in the following conditions (NOD65): • If all mandatory employer information is available, and • When a consumer has an Initial eligibility determination of eligible or conditionally eligible for APTC and is in an (Effectuated) Enrolled status with active employer income, or • When a consumer renews for the next benefit year and is eligible or conditionally eligible for APTC and is in an (Effectuated) Enrolled status and with active employer income, or • When a consumer, who is eligible or conditionally eligible for APTC and is in an (Effectuated) Enrolled status, reports a new current employer, or • When a consumer, who is eligible for or conditionally eligible APTC and is in an (Effectuated) Enrolled status, updates employer information and an employer notice has not been generated in the benefit year.
Eligibility and Enrollment	Notices	38626	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall update the text of snippets 176, 373, 378, 444, 720, 741, 763 and 764 on CalNOD01.
Eligibility and Enrollment	Notices	38627	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall update the text of snippets 811 on CalNOD03.
Eligibility and Enrollment	Notices	38628	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall resolve defects: SIR 47181, SIR 78467.
Eligibility and Enrollment	Notices	38629	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall update the NOD03 triggering conditions to not generate if a consumer has not picked a plan by the QLE Expiration date during SEP.
Eligibility and Enrollment	Notices	38630	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall update the NOD03 triggering conditions to not generate if a consumer has not picked a plan by January 31st during OEP.

Category	Sub Category	Req ID	Requirement
Eligibility and Enrollment	Notices	38639	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall produce NOD01 with updated FTI snippets in the following languages: - Arabic - Farsi - Russian - Tagalog - Armenian - Khmer - Chinese - Vietnamese - Korean
Eligibility and Enrollment	Notices	38690	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) system shall provide the technical framework to support agile updates to notice snippet language.
Eligibility and Enrollment	Notices	38714	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall generate a NOD01 ab/c when an E-HIT EDR is received from the SAWS access channel and at least one consumer is Discontinued from CCP, APTC, CSR, MCAP or CCHIP.
Eligibility and Enrollment	Notices	38715	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall update the NOD01 ab/c triggering conditions for CFS Lift.
Eligibility and Enrollment	Notices	38717	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) system shall create new CCHIP eligibility portal snippets.
Eligibility and Enrollment	Notices	38719	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) system shall suppress NOD01 snippet 326 when the consumer is Eligible or Conditionally Eligible for the CCHIP program.
Eligibility and Enrollment	Notices	38720	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) system shall suppress NOD01 snippet 325 when the consumer is Eligible or Conditionally Eligible for the CCHIP program.
Eligibility and Enrollment	Notices	38721	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) system shall suppress NOD01 snippet 382 when the consumer is Eligible or Conditionally Eligible for the CCHIP program and there are no other applying household members.
Eligibility and Enrollment	Notices	38722	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) system shall suppress NOD01 snippet 721 when the consumer is Eligible or Conditionally Eligible for the CCHIP program and there are no other applying household members.
Eligibility and Enrollment	Notices	38723	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall update the triggering conditions for existing reason snippets on CalNOD01 when an admin fails a verification.
Eligibility and Enrollment	Notices	38724	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall resolve defects: SIRs 60552, 62658, 79873.
Eligibility and Enrollment	Notices	38725	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall update Footer Snippets 166 (verbiage and trigger), 330 (trigger), 354, 381 (trigger), 382 (trigger) so the Dynamic Date variables provide correct "Pay by" dates and resolved SIR 87590.
Eligibility and Enrollment	Notices	38990	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) system shall generate new reason snippets on the CalNOD01 when a consumer is Ineligible or Discontinued due to Admin Verification fail or system determination.
Eligibility and Enrollment	Notices	38991	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) system shall update snippet 330, snippet 381, and snippet 828 (previously snippet 166) with new verbiage.
Eligibility and Enrollment	Notices	38992	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) system shall move Snippet 121 (How to Turn in Your Information) from its current location in the NOD01abc to above Snippet 182 "We Need Proof You Do Not Have Other Coverage."
Eligibility and Enrollment	Notices	38993	"The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall generate the NOD03 in the following languages: - English, Spanish, Chinese, Vietnamese, Russian, Tagalog, Khmer/Cambodian, Arabic, Farsi, Korean, Hmong, Armenian"
Eligibility and Enrollment	Notices	39277	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall simulate modified trigger conditions of NOD01 to identify how daily NOD01 volumes are impact compared to current NOD01 trigger conditions.
Eligibility and Enrollment	Notices	39971	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall generate a new notice NOD62C, which will provide instructions for the FTB Form 3895 - Original and will include a description of: • Why the consumer is getting the notice • How Covered CA calculates financial assistance • How to obtain tax filing help California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall include the NOD62C notice in the same envelope as FTB Form 3895 - Original.
Eligibility and Enrollment	Notices	39972	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall generate a new notice NOD62D, which will provide instructions for the FTB Form 3895 - Voided/Corrected and will include a description of: • Why the consumer is getting the notice • How Covered CA calculates financial assistance • How to obtain tax filing help California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall include the NOD62D notice in the same envelope as FTB Form 3895 - Voided/Corrected.

Appendix A-4 - SOW Exhibit A - System Requirements Specification
(Extracted from CalHEERS RTM)

Category	Sub Category	Req ID	Requirement
Eligibility and Enrollment	Notices	39973	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall use the data elements defined in the FTB interface to print on the notice "FTB Form 3895 Original/Voided or Corrected".
Eligibility and Enrollment	Notices	39974	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall send consumer information on FTB Form 3895 as defined by FTB guidelines, which includes: • Recipient information (name, address, marketplace info, policy number, etc.) • Covered individuals (individuals covered, SSN, DOB, coverage start/end date) • Coverage information (premium information per month, etc.)
Eligibility and Enrollment	Notices	39975	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall populate FTB Form 3895 with the monthly advance payment of California premium subsidy.
Eligibility and Enrollment	Notices	39976	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall populate FTB Form 3895 with the Second Lowest Cost Silver Plan (SLCSP) for every month of enrollment regardless of receipt of subsidy.
Eligibility and Enrollment	Notices	39977	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall populate the "Repayment Cap May Not Apply" Checkbox on the 3895 Form only if the tax household attested to income that was over 400% FPL for the entire benefit year that they were enrolled with CCA.
Eligibility and Enrollment	Notices	39978	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall generate the NOD62c and NOD62d notices in the top 5 languages (English, Spanish, Chinese, Vietnamese, and Korean).
Eligibility and Enrollment	Notices	39979	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall generate, at the end of the tax year, FTB Form 3895 that lists each individual (reflected as 'Recipient' on the form) who purchased a policy through the Covered CA Marketplace regardless if financial assistance was accepted; there will be one (1) form per policy. If multiple individuals are enrolled in a single qualified health plan (QHP), a single State Form 3895 must be distributed to the Primary Tax Filer or Other Relevant Adult.
Eligibility and Enrollment	Notices	39980	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall, when generating the State Form 3895 Health Insurance Marketplace Statement, use all known individual information and include 100% of records for all policies purchased through the CA Marketplace. For example, if State Form 3895 is being generated in January 2021, then all individual data from calendar year 2020 will be used for its creation.
Eligibility and Enrollment	Notices	39981	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall make available, on or before January 31st of each calendar year beginning 2021 and every year thereafter, for distribution to the Tax Filer, or Other Relevant Adult the FTB Form 3895 in the consumers Documents and Correspondence page and if applicable their Secure Mailbox, based on the following delivery method: For consumers who have opted to receive their correspondence by email, a hardcopy of the FTB Form 3895. For consumers who have opted to receive their correspondence by email, a copy of the FTB Form 3895 into their Secure mailbox will trigger an email notification.
Eligibility and Enrollment	Notices	39982	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall clearly indicate 'corrected' or 'void' on the FTB Form 3895 if the form is corrected or voided.
Eligibility and Enrollment	Notices	39983	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall display and allow consumers to print the FTB Form 3895 through their Docs and Correspondences and Secure Mailbox.
Eligibility and Enrollment	Notices	39984	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall generate, on a bi-weekly basis (two times in a 7 calendar day range), corrected or voided version of the FTB Form 3895 when a data change has occurred.
Eligibility and Enrollment	Notices	39985	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall not generate a 3895 correction (NOD62d), for a given Marketplace Assigned Policy ID, after an original 3895 (NOD62c) has been generated when there is only a change of enrollment status, there is no change to the benefit end date(s), and no changes to demographic or enrollment / household information.
Eligibility and Enrollment	Notices	39986	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall generate CalNOD62C notices labeled "{Tax Year} California Tax Form (3895) - Original". "Tax Year" is a variable and shall populate with the applicable tax year for which the Form 3895 is being generated (2020 or later).
Eligibility and Enrollment	Notices	39987	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall generate CalNOD62d notices labeled "{Tax Year} California Tax Form (3895) - Revised". "Tax Year" is a variable and shall populate with the applicable tax year for which the Form 3895 is being generated (2020 or later).
Eligibility and Enrollment	Notices	39988	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall be able to accurately populate data from the staging table into the 3895 form.
Eligibility and Enrollment	Notices	39989	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall not generate a 3895 form for enrollment in catastrophic plans.
Eligibility and Enrollment	Notices	39990	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall not generate, mail, or post to a member's Documents & Correspondence page or secure mailbox the CalNOD62C or CalNOD62D for a enrollment in a catastrophic plan.
Eligibility and Enrollment	Notices	39991	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall dynamically populate the tax year for tax year 2020 and beyond for Form FTB 3895 - Original and notice -NOD62C.
Eligibility and Enrollment	Notices	39992	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall merge the NOD62c notice with the applicable Form FTB 3895 - Original before uploading to the consumer's Documents & Correspondence page, mailing or e-mailing (uploading to Secure Mailbox).
Eligibility and Enrollment	Notices	39993	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall dynamically populate the tax year for tax year 2020 and beyond for Form FTB 3895 - Revised and notice -NOD62D.
Eligibility and Enrollment	Notices	39994	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall merge the NOD62d notice with the applicable Form FTB 3895 - Revised before uploading to the consumer's Documents & Correspondence page, mailing or e-mailing (uploading to Secure Mailbox).
Eligibility and Enrollment	Notices	39995	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall be able to identify and capture (log) any system errors preventing the generation of all print vendor State Form 3895 Health Insurance Marketplace Statement files.
Eligibility and Enrollment	Notices	39996	CaHEERS shall generate an extract file containing either the original or corrected/voided State Form 3895 Health Insurance Marketplace Statement along with the applicable NOD62C or NOD62D and form instructions before securely transmitting to the print vendor.
Eligibility and Enrollment	Notices	39997	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall accept and process the confirmation of transmission success or failure response, and be able to resend the print file to the print vendor when needed.

Category	Sub Category	Req ID	Requirement
Eligibility and Enrollment	Notices	39998	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall capture State Form 3895 file processing discrepancies to denote which 3895 forms where not processed or distributed by the print vendor and the discrepancy reason.
Eligibility and Enrollment	Notices	39999	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall have the ability to resend to the consumer State Form 3895 Health Insurance Marketplace Statement(s) without being required to regenerate all annual 3895 forms.
Eligibility and Enrollment	Notices	40000	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall create a new 'Document Category' of "Tax Form" for State Form 3895.
Eligibility and Enrollment	Notices	40001	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall work with the print vendor to ensure all envelopes that will be used to mail the CalNOD62C and CalNOD62D notices, regardless of the notice print language, will display a Covered CA defined message and/or image in the English, Spanish, Chinese, Vietnamese, and Korean languages on the address facing side of the envelope.
Eligibility and Enrollment	Notices	40043	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall provide notices in the Medi-Cal Managed Care Threshold languages. As of June 2016 those languages are: 01. English 02. Spanish 03. Arabic 04. Armenian 05. Chinese 06. Farsi 07. Hmong 08. Khmer 09. Korean 10. Russian 11. Tagalog 12. Vietnamese
Eligibility and Enrollment	Notices	40562	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall implement the functionality to determine whether to generate a CalNOD01 (ab)/c for cases that ran eligibility on a day by comparing the latest eligibility results from the day to the last generated NOD01 or a NOD01 that is queued to be generated, AND at least one of the following factors have changed for Covered California (APTC/CSR/CAPS/CCP) individuals: * Eligibility status * Aid code * Financial Subsidy Amount * At least one household member moves into Carry Forward status * Add a new household member * At least one household member moves into QHP Hold status
Eligibility and Enrollment	Notices	40563	The duplicate check comparison will be between the last BRE run of the day that is high end dated, if it meets the driving query trigger conditions, and the last notice generated for the current benefit year.
Eligibility and Enrollment	Notices	40564	While determining the latest eligibility results from the day, California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall consider the high dated eligibility results for the applicable benefit year.
Eligibility and Enrollment	Notices	40565	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall generate 2 NOD01s for the same case in the same day if additional changes reported meets the trigger and duplicate condition check for Exchange or MAGI Medi-Cal or MCAP or CCHIP benefits after Carry Forward (CFS) ends. The duplicate check will be between the Carry Forward Lift BRE run and the subsequent re-determination(s) for that day.
Eligibility and Enrollment	Notices	40566	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall implement the functionality to determine whether to generate a CalNOD01 (ab)/c for cases that ran eligibility on a day by comparing the latest eligibility results from the day to the last generated NOD01 or a NOD01 that is queued to be generated, AND at least one of the following factors have changed for MAGI Medi-Cal individuals: * Individual transitioned to/from MAGI Medi-Cal to Exchange benefits (APTC/CSR/CAPS/CCP) or CCHIP or MCAP * Individual discontinued from MAGI Medi-Cal and not eligible or discontinued for Covered California (APTC/CSR/CAPS/CCP), CCHIP or MCAP benefits * Add a new household member
Eligibility and Enrollment	Notices	40567	The duplicate check comparison will be between the last BRE run of the day that is high end dated, if it meets the driving query trigger conditions, and the last notice generated for the current benefit year.
Eligibility and Enrollment	Notices	40568	While determining the latest eligibility results from the day, California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall consider the high dated eligibility results for the applicable benefit year.
Eligibility and Enrollment	Notices	40569	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall implement the functionality to determine whether to generate a CalNOD01 (ab)/c for cases that ran eligibility on a day by comparing the latest eligibility results from the day to the last generated NOD01 or a NOD01 that is queued to be generated, AND at least one of the following factors have changed for MCAP/CCHIP individuals: * Individual transitioned to MAGI Medi-Cal or Exchange benefits (APTC/CSR/CAPS/CCP) * Individual discontinued from CCHIP/MCAP and not eligible for Covered California (APTC/CSR/CAPS/CCP) and MAGI Medi-Cal benefits * Add a new household member * Individuals are renewed for CCHIP

Appendix A-4 - SOW Exhibit A - System Requirements Specification
(Extracted from CalHEERS RTM)

Category	Sub Category	Req ID	Requirement
Eligibility and Enrollment	Notices	40570	The duplicate check comparison will be between the last BRE run of the day that is high end dated, if it meets the driving query trigger conditions, and the last notice generated for the current benefit year.
Eligibility and Enrollment	Notices	40571	While determining the latest eligibility results from the day, California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall consider the high dated eligibility results for the applicable benefit year.
Eligibility and Enrollment	Notices	40580	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall generate NOD01 ab/c for any benefit year if at least one person on the case meets both the trigger conditions for NOD01 generation and the duplicate check.
Eligibility and Enrollment	Notices	40581	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall hold the generation of the notice for a configurable amount of time.
Eligibility and Enrollment	Notices	40582	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall generate all the notices that are placed in queue for generation during the hold time once the configuration setting is reset to default setting.
Eligibility and Enrollment	Notices	40583	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall make the determination to generate the NOD01 (ab)/c if the first eligibility run for the case on the eligibility run date was an initial eligibility run, and the final eligibility determination for the eligibility run date is one of the following (Intake case with multiple runs in the same day as Intake): * Eligible/Conditionally Eligible/Ineligible/Pending/Discontinue for MAGI Medi-Cal * During Open Enrollment, the initial eligibility run determines at least one individuals in the household MAGI Medi-Cal (EL, PE or CE) for the months of November and December of the current benefit year (due to RRE functionality). * All members of a household ineligible to APTC, California Premium Subsidy, CSR, CCP, MCAP, CCHIP and MAGI Medi-Cal * At least one member of a household ineligible to APTC, California Premium Subsidy, CSR, CCP, MCAP, CCHIP and MAGI Medi-Cal and at least one member, on the same application, is eligible, conditionally eligible, or pending eligible to MAGI Medi-Cal * A pregnant woman is either Eligible, or Pending Eligible, or Ineligible for MCAP * Eligible / Ineligible / Conditionally eligible / Discontinue for APTC/California Premium Subsidy/CSR/CCP * Eligible / Conditionally Eligible / Discontinue for CCHIP * Conditionally Eligible for the Former Foster Youth Program (4M) AND The source is California Healthcare Eligibility, Enrollment and Retention System (CalHEERS)
Eligibility and Enrollment	Notices	40584	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall make the determination to generate the NOD01 (ab) during auto or manual renewal run when Individual opts to renew or takes no action within 30 days of Renewal Period beginning and the final eligibility determination for an individual for the eligibility run date is one of the following: * Eligible/Conditionally Eligible for APTC/California Premium Subsidy/CSR * Eligible/Pending Eligible for MCAP * Eligible/Conditionally Eligible for CCHIP * Eligible/Conditionally Eligible for any Covered California Plan (subsidized application or unsubsidized application) * All members of a household is ineligible to APTC, California Premium Subsidy, CSR, CCP, MCAP, CCHIP and MAGI Medi-Cal OR * At least one member of a household is ineligible to APTC, California Premium Subsidy, CSR, CCP, MCAP, CCHIP and MAGI Medi-Cal and at least one member, on the same application, is eligible, conditionally eligible, or pending eligible to MAGI Medi-Cal * 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” and there is a change to Covered CA eligibility for other members in the case AND The source is California Healthcare Eligibility, Enrollment and Retention System (CalHEERS)
Eligibility and Enrollment	Notices	40585	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall make the determination to generate the NOD01c run if the eligibility run(s) for the case on the eligibility run date is for re-evaluation/redetermination, and the final eligibility determination for the eligibility run date is one of the following: * Eligible/Conditionally Eligible/Ineligible/Pending/Discontinue for MAGI Medi-Cal * All members of a household is ineligible to APTC, California Premium Subsidy, CSR, CCP, MCAP, CCHIP and MAGI Medi-Cal * At least one member of a household is ineligible to APTC, California Premium Subsidy, CSR, CCP, MCAP, CCHIP and MAGI Medi-Cal and at least one member, on the same application, is eligible, conditionally eligible, or pending eligible to MAGI Medi-Cal * Eligibility determination of pregnant woman is Eligible for MCAP * Eligible / Conditionally Eligible / Discontinue for CCHIP * Eligible / Ineligible / Conditionally Eligible / Discontinue for APTC/California Premium Subsidy/CSR/CCP * 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” and there is a change to Covered CA eligibility for other members in the case AND The source is California Healthcare Eligibility, Enrollment and Retention System (CalHEERS)

Category	Sub Category	Req ID	Requirement
Eligibility and Enrollment	Notices	40586	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall make the determination to generate the NOD01 (ab)/c if an eHIT EDR is received from the SAWS access channel and the Run reason is not Rescind, Negative Action, Retro, Cola or Periodic Reverification, AND one of the following conditions apply: * Households with 1 or more members who are eligible/conditionally eligible/discontinued for CCP, APTC, California Premium Subsidy, CSR, MCAP, CCHIP programs * At least one applying member in a household is ineligible for all of the following: CCP, APTC, California Premium Subsidy, CSR, MCAP, CCHIP and MAGI Medi-Cal AND The eligibility benefit month is greater than or equal to the eligibility run month * Results in a change of eligibility to CCP, APTC, California Premium Subsidy, CSR for at least 1 member of the household from the previously sent or queued to be sent NOD01. * 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” and there is a change to Covered CA eligibility for other members in the case
Eligibility and Enrollment	Notices	40587	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall make the determination to generate NOD01c for current benefit month during re-evaluation/redetermination, when eHIT EDRs are received from a SAWS access channel for Mixed Eligibility Household, if only one person exists in a household and also has dual eligibility (eligible or conditionally eligible for CCP and eligible or potential/pending eligible for Medi-Cal programs).
Eligibility and Enrollment	Notices	40588	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall make the determination to skip the NOD01 (ab) during initial eligibility run when any one of the following conditions apply: - A case is closed for being a duplicate under CR 52314, - The application type is State MCIEP - All members in the case are undetermined for APTC/CSR/CAPS/CCP and ineligible for MAGI Medi-Cal, MCAP and CCHIP for the current year. This condition is applicable to current year only.
Eligibility and Enrollment	Notices	40589	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall make the determination to skip the NOD01 (ab) during auto or manual renewal run for current or future year when one of the following conditions apply: * A case is closed for being a duplicate under CR 52314, * All household members are in Carry Forward Status (CFS) * The application type is State MCIEP * New members are added during the Renewal run, unless the new member(s) are determined MAGI Medi-Cal, MCAP or CCHIP (EL, PE, or CE) for the months of November and December of the current benefit year (due to RRE functionality). This skip condition is applicable to current year only. * One or more members in the mixed household case are subject to “Eligibility Review” and the potential eligibility status for MAGI Medi-Cal is “Discontinued” and there are no changes to Covered CA eligibility for other members in the case. This condition is applicable to current year only.
Eligibility and Enrollment	Notices	40590	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall make the determination to skip the NOD01c during re-evaluation/redetermination run when one of the following conditions apply: * A case is closed for being a duplicate under CR 52314; * All household members are in Carry Forward Status (CFS) * The application type is State MCIEP *All members in the case are subject to “Eligibility Review” and the potential eligibility status for MAGI Medi-Cal for all members is Discontinued [From Medi-Cal] and the member is not Eligible, Conditionally Eligible, or Discontinued for Covered CA programs. * One or more members in the mixed household case are subject to “Eligibility Review” and the potential eligibility status for MAGI Medi-Cal is “Discontinued” and there are no changes to Covered CA eligibility for other members in the case. * New members are added during a Report a Change for the future year after Renewal, unless the new member(s) are determined MAGI Medi-Cal, MCAP or CCHIP (EL, PE, or CE) for the months of November and December of the current benefit year (due to RRE functionality). This skip condition is applicable to current year only.
Eligibility and Enrollment	Notices	40707	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall not display State Subsidy snippets in NOD01 ab/c when the configuration for State Subsidy is turned OFF.
Eligibility and Enrollment	Notices	43101	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) system shall Not generate, mail, or post to a member's secure mailbox the CalNOD62-A or CalNOD62-B (Form 1095-A) for Exchange members who are enrolled in a catastrophic plan.
Eligibility and Enrollment	Notices	43243	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) system shall maintain the ability to generate CalNOD02 notices for eligibility determinations created prior to California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) Release 15.7, using the forms and generation requirements established prior to Release 15.7.
Eligibility and Enrollment	Notices	43261	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall notice consumer in regards to their option to keep MCAP enrollment when consumer is granted MAGI Medi-Cal after a change has been reported using NOD02.
Eligibility and Enrollment	Notices	43262	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) system shall use the current NOD01 notice to notify eligibility determination for pregnant women who are found Eligible, Pending Eligible or Ineligible for MCAP program.
Eligibility and Enrollment	Notices	43273	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall not display MCAP snippets in NOD01ab and NOD01c whenever a pregnant woman is determined to be eligible for MAGI Medi-Cal.
Eligibility and Enrollment	Notices	43296	Modify Snippet 354 in NOD01a eligibility determination notice to map open enrollment start date and end date dynamically based on the benefit year.
Eligibility and Enrollment	Notices	43330	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall generate a pre-notice for childre who are going to age out from CCHIP program 60 days prior to the end of the month of their 19th birthday.
Eligibility and Enrollment	Notices	43342	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall generate and send CCHIP discontinuance notice to CCHIP consumers under all discontinuance reasons.
Eligibility and Enrollment	Notices	43370	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) system shall use the current NOD01 notice to notify eligibility determination for children who are found Eligible or Conditionally Eligible for CCHIP program.

Appendix A-4 - SOW Exhibit A - System Requirements Specification
(Extracted from CalHEERS RTM)

OTSI CalHEERS RFP #73040873 Addendum 1
October 31, 2025

Category	Sub Category	Req ID	Requirement
Eligibility and Enrollment	Notices	43376	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall send a notice to the CCHIP consumers once renewal determination has been automatically established by California Healthcare Eligibility, Enrollment and Retention System (CalHEERS).
Eligibility and Enrollment	Notices	43387	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System must generate and mail a notice to inform qualified individuals of their decision to receive notices electronically. With the new “electronic preference,” the Consumers will no longer receive paper mail from the system. This notice must generate in the Consumer's preferred language.
Eligibility and Enrollment	Notices	43388	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall provide the functionality to issue an electronic notice to inform qualified individuals of their decision to receive notices electronically. With the new “electronic preference,” the Consumers will no longer receive paper mail from the system. This notice must generate in the Consumer's preferred language. This notice would only be generated for Consumers who have created a California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) Account.
Eligibility and Enrollment	Notices	43389	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System must generate and mail a notice to the Consumer indicating that their email has failed.
Eligibility and Enrollment	Notices	43390	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall provide the functionality to mail the paper copy of the originally generate notice to the Consumer when the Consumer's email fails.
Eligibility and Enrollment	Notices	44495	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall generate a Cal NOD01c whenever a CFS flag is present on an EDR.
Eligibility and Enrollment	Notices	45759	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall ensure the 1095/3895 process does not error during staging when a primary tax claimer for the unsubsidized application is no longer a member of the household.
Eligibility and Enrollment	Notices	46263	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall allow specific admin users to attach Supplement Notice insert across any category (NOD01AB or NOD01C) for specific case list
Eligibility and Enrollment	Notices	46273	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall allow specific admin users to upload up to 2 scanned image(s) of the content per language for the Admin notice for the applicable case lists - One for the Front page and second for Back portion of First page .
Eligibility and Enrollment	Notices	46280	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall allow specific admin users to generate Admin Notice for specific case list
Eligibility and Enrollment	Notices	46588	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall allow specific admin users to Hold Notices across any category for specific case list
Eligibility and Enrollment	Notices	46589	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall be able to generate NOD01 with a dynamic box snippet that can be configured ON/OFF
Eligibility and Enrollment	Notices	46590	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall allow specific admin users to enter box snippet content in English and Spanish languages.
Eligibility and Enrollment	Notices	46591	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall set a dynamic box outline across the box snippet content
Eligibility and Enrollment	Notices	46592	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall place the box snippet under intro section for generated NOD01
Eligibility and Enrollment	Notices	46593	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall continue to generate the box snippet for configured case list if a case generates multiple NOD01 instances until the Box snippet configuration is turned OFF
Eligibility and Enrollment	Notices	46594	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall allow specific admin users to generate box snippet for specific case list
Eligibility and Enrollment	Notices	46595	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall develop a process where any active notices can be suppressed for the provided list of cases.
Eligibility and Enrollment	Notices	46597	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall allow specific admin users to SUPRESS Notices across any category for specific case list
Eligibility and Enrollment	Notices	47115	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall update the date variable in snippet 808, 778, and 779.
Eligibility and Enrollment	Notices	47116	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall update the text and trigger of snippet 907 and 909 in the NOD03.
Eligibility and Enrollment	Notices	47117	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall update the text and trigger of snippet 890 and 891 in the NOD01ab/c/T.
Eligibility and Enrollment	Notices	47118	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall update the triggering conditions of 9 snippets to populate in ROP - 356, 787, 875, 222, 151, 224, 216, 219, and 835.
Eligibility and Enrollment	Notices	47119	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall create one new snippet for consumers who are transitioning from Medi-Cal to CCA, have a negative action or non-compliance reason and they are eligible for only unsubsidized CCP and are still within MAGI FPL range.
Eligibility and Enrollment	Notices	47120	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall update NOD01 snippet 900, NOD01T snippets 3007 and 3008, and NOD74 to populate the appropriate SEP End Date/Choose Plan by Date based on getAPI from PCAP and update the text of snippet 321 to remove reference to the static 60 day SEP period.
Eligibility and Enrollment	Notices	47121	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall update the NOD01abc trigger/duplicate check rule to allow NOD01abc to generate when an initial non-applying member is changed to applying but results in no change to overall household eligibility.
Eligibility and Enrollment	Notices	47122	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall create two new eligibility snippets for Manual APS consumers in MAPS Process 1 or 2.
Eligibility and Enrollment	Notices	47123	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall create one new NOD01ab/c flier for Manual APS consumers in MAPS Process 2.

Appendix A-4 - SOW Exhibit A - System Requirements Specification
(Extracted from CalHEERS RTM)

Category	Sub Category	Req ID	Requirement
Eligibility and Enrollment	Notices	47124	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall create a modified version of the NOD01T which will be called CalNOD01x and will be sent to Manual APS consumers in MAPS Process 3.
Eligibility and Enrollment	Notices	47125	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall create four new CalNOD01x intro snippets.
Eligibility and Enrollment	Notices	47126	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall create a modified version of the enrollment table to show the APS lite enrollment and premium information in the CalNOD01x.
Eligibility and Enrollment	Notices	47127	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall create five new CalNOD01x MAPS color fliers.
Eligibility and Enrollment	Notices	47128	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall trigger an enroller portal alert when CalNOD01x is generated.
Eligibility and Enrollment	Notices	47129	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall expand the Admin Notice Portal functionality to include CalNOD01x for the Notice Insert, Hold, Suppress, and Box Snippet functionalities.
Eligibility and Enrollment	Notices	47130	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall always print and mail the CalNOD01x regardless of the consumer's preferred method of communication.
Eligibility and Enrollment	Notices	47131	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall send the CalNOD01x in the same envelope type as CalNOD01T
Eligibility and Enrollment	Notices	47132	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall send CalNOD01T to Procedural Denial consumers who are redetermined EL/CE to APTC and go through APS logic
Eligibility and Enrollment	Notices	48040	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall generate a new notice with MAGI Medi-Cal Denial Snippets for consumers ineligible to MAGI Medi-Cal due to being over MAGI income limits from prior benefit month transactions received where: -The transaction is an intake EDR OR - The transaction is an EDR adding a new member applying for MAGI Medi-Cal and new member is ineligible OR -The transaction is for a consumer who was initially "Conditionally Eligible / Pending" for MAGI Medi-Cal AE and was later ineligible
Eligibility and Enrollment	Notices	48041	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall trigger NOD01ab/c/t and NOD03 and and relevant ROP and Proof Chart snippets based on Manual Trigger ROP
Eligibility and Enrollment	Notices	48042	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall create a new snippet for the NOD01ab/c/T to populate for consumers who may be eligible to terminate their CCA Enrollmentat the end of the current month when their plan ends at the end of the following month.
Eligibility and Enrollment	Notices	48043	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall add new discontinuance notice snippets for the following verification attributes: MEC, SSN, AI/AN
Eligibility and Enrollment	Notices	48044	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall create a new notice for consumers who are turning 65 or over 65 and enrolled in a health plan.
Eligibility and Enrollment	Notices	48045	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall add the new notice for consumers who are turning 65 or over 65 to the Admin Notice Portal screen for notice insert, hold, and suppress functionalities.
Eligibility and Enrollment	Notices	48046	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall trigger an enroller portal alert for the new notice for consumers who are turning 65 or over 65
Eligibility and Enrollment	Notices	48047	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall create a new notice for consumers with online accounts that have less than 30 days before becoming dormant.
Eligibility and Enrollment	Notices	48048	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall add the new notice for consumers whose account is being disabled in 30 days to the Admin Notice Portal screen for notice insert, hold, and suppress functionalities.
Eligibility and Enrollment	Notices	48049	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall update the Hindi word for "Amount" in Snippet 923 in NOD01ab/c Hindi notice
Eligibility and Enrollment	Notices	48050	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall generate NOD01ab/c/t when the NOD01ab/c/t notice is triggered and a subsequent prior benefit month transaction is received but the notice trigger is not nullified at the end of the day.
Eligibility and Enrollment	Notices	48051	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall create a new notice for consumers who had NOD01 suppressed due to CR 236884 NOD01 Suppression.
Eligibility and Enrollment	Notices	48052	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall add the new notice for consumers who had NOD01 suppressed due to CR 236884 to the Admin Notice Portal screen for notice insert, hold, and suppress functionalities.
Eligibility and Enrollment	Notices	48053	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall trigger an enroller portal alert for the new notice for consumers who had NOD01 suppressed due to CR 236884 NOD01 Suppression.
Eligibility and Enrollment	Notices	48054	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall add new snippets for NOD01 and make updates to existing snippets for ESI Family Glitch Fix
Eligibility and Enrollment	Notices	48055	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall update the existing or add a new proof chart snippet for SSN Unknown pending verification
Eligibility and Enrollment	Notices	48056	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall update the Sacramento County phone number in the Notices

Appendix A-4 - SOW Exhibit A - System Requirements Specification
(Extracted from CalHEERS RTM)

Category	Sub Category	Req ID	Requirement
Eligibility and Enrollment	Notices	48057	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall update the existing NOD01AB/C/T and NOD03 proof chart snippets to display the ROP Expiration date as per the new configuration page, and in NOD01ab/c snippet 805 to populate the least of the ROP Expired dates across all attributes where each verification attribute is set with a different ROP Number of Days under new configuration page.
Eligibility and Enrollment	Notices	48461	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall update the NOD12e trigger condition to 1) generate for unsubsidized consumers and 2) not generate for non-applying consumers and for consumers who applied during OE.
Eligibility and Enrollment	Notices	48462	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall make updates to the NOD12a, d and e templates.
Eligibility and Enrollment	Notices	48463	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall update the NOD12d and e to include snippet NOD12_09 Online Access Code variable.
Eligibility and Enrollment	Notices	48464	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall update the NOD12a trigger condition to remove the suppression for the APS population and add a new snippet for this population in the NOD12a
Eligibility and Enrollment	Notices	48465	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall update the placement of snippet 839.
Eligibility and Enrollment	Notices	48466	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall update the MAPS and SB260 fliers to dynamically populate the plan level and dollar amounts.
Eligibility and Enrollment	Notices	48467	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall make updates to the content and trigger of the NOD38 Failure to Reconcile notice
Eligibility and Enrollment	Notices	48468	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall create a new failure to reconcile warning notice
Eligibility and Enrollment	Notices	48469	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall add the new failure to reconcile warning notice to the Admin Notice Portal screen for notice insert, hold, and suppress functionalities.
Eligibility and Enrollment	Notices	48470	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall update NOD01 snippet 373 to include the IRS code 011 in the triggering condition.
Eligibility and Enrollment	Notices	48471	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall update the CalNOD01 snippet 829 and 805 to include the regulations.
Eligibility and Enrollment	Notices	48472	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall add 2 new notice fliers to the NOD01 for consumers who are successfully renewed into a Silver plan as a part of the affordability crosswalk batch.
Eligibility and Enrollment	Notices	48473	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall add a new notice flier to the NOD01 for consumers who are not successfully renewed into a Silver plan as a part of the affordability crosswalk batch.
Eligibility and Enrollment	Notices	48474	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall generate NOD01 for individuals granted eligibility to Accelerated Enrollment from a prior benefit month intake or RAC transaction from the SAWS Access Channel and that transaction meets all other NOD01 triggering conditions.
Eligibility and Enrollment	Notices	48475	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall add CalNOD77 to the Admin Notice Portal screen for notice insert, hold, and suppress functionalities.
Eligibility and Enrollment	Notices	48476	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall create a snippet for the NOD01 for consumers over the MAGI income limits who have a negative action, and that negative action is configured "OFF."
Eligibility and Enrollment	Notices	48477	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall update the address block for the NOD38a and NOD38b to address to the primary tax filer
Eligibility and Enrollment	Notices	48659	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall update the NOD03 template.
Eligibility and Enrollment	Notices	48660	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall update the NOD62a & b templates.
Eligibility and Enrollment	Notices	48661	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall populate the primary tax filer's name with appropriate spaces in the NOD62a & b in the address block and salutation line of these notices.
Eligibility and Enrollment	Notices	48662	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall add the 2024 IRS 1095A tax form to NOD62a & b
Eligibility and Enrollment	Notices	48663	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall update the formatting in the enrollment summary in the NOD69 and snippets 923, 3006, 3041.
Eligibility and Enrollment	Notices	48664	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall create a new notice for consumers whose reported strike has ended.
Eligibility and Enrollment	Notices	48665	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall add the new SLS notice to the Admin Notice Portal screen for notice insert, hold, and suppress functionalities.
Eligibility and Enrollment	Notices	48666	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall trigger an enroller portal alert for the new SLS notice
Eligibility and Enrollment	Notices	48667	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall update the SLS "yellow alert" on the Account Home screen to continue displaying as long as the household is EL/CE to SLS.
Eligibility and Enrollment	Notices	48668	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall generate Admin Notices for Inactive cases or cases with terminated applications.

Appendix A-4 - SOW Exhibit A - System Requirements Specification
(Extracted from CalHEERS RTM)

Category	Sub Category	Req ID	Requirement
Eligibility and Enrollment	Notices	48669	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall update the proof chart for snippet 885 and snippet 165.
Eligibility and Enrollment	Notices	48670	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall create a new notice for consumers who are enrolled in a health plan and who reported SSDI income.
Eligibility and Enrollment	Notices	48671	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall add the new notice for consumers who report SSDI income to the Admin Notice Portal screen for notice insert, hold, and suppress functionalities.
Eligibility and Enrollment	Notices	48672	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall trigger an enroller portal alert for the new SSDI income notice.
Eligibility and Enrollment	Notices	48719	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall update the trigger condition for snippet 835.
Eligibility and Enrollment	Notices	48720	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall update the text of snippet 3014.
Eligibility and Enrollment	Notices	48721	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall create a new notice for households with an enrolled over age dependent.
Eligibility and Enrollment	Notices	48722	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall add the new notice households with an enrolled over age dependent to the Admin Notice Portal screen for notice insert, hold, and suppress functionalities.
Eligibility and Enrollment	Notices	48723	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall trigger an enroller portal alert for the new OAD notice
Eligibility and Enrollment	Notices	48724	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall create 3 new plan removal notices that will be sent to consumers when their plan is no longer available for the next benefit year.
Eligibility and Enrollment	Notices	48725	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall add the new Plan Removal notices to the Admin Notice Portal screen for notice insert, hold, and suppress functionalities.
Eligibility and Enrollment	Notices	48726	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall trigger an enroller portal alert for the new plan removal notices
Eligibility and Enrollment	Notices	48727	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall update NOD01 snippet 219.
Eligibility and Enrollment	Notices	48728	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall update the contact information list for snippet 948.
Eligibility and Enrollment	Notices	48729	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall add a new NOD01 snippet for consumers who are discontinued from Covered California when they choose to switch to MCAP.
Eligibility and Enrollment	Notices	48730	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall update the NOD01 snippets with the county contact phone number variable to populate based on the individuals county of residence or if the individual lives out of state, the snippet should be suppressed
Eligibility and Enrollment	Notices	48731	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall update the NOD01 CCHIP snippets to populate a generic CCHIP phone number for the CCHIP phone number variable
Eligibility and Enrollment	Notices	48732	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall make updates to NOD00 and the Intro page in NOD01 snippet table to keep the terminology consistent.
Eligibility and Enrollment	Notices	48733	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall create 1 new snippet in NOD01 and 1 new snippet in NOD69 for consumers who have their enrollment updated by the region bot
Eligibility and Enrollment	Notices	48734	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall move the placement of all three new ROP snippets Snippets 958 (MEC), 959 (AI/AN), and 960 (SSN) up in the snippet order, to populate 2nd in the snippet flow.
Eligibility and Enrollment	Notices	49121	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall trigger Carry Forward Information CalNOD64 when: An individual on the case is enrolled in a health plan, and during a RAC or Renewal transaction, individual is placed in Carry Forward Status with MAGI Medi-Cal eligibility as Awaiting Review.
Eligibility and Enrollment	Notices	49122	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall update the template for the CalNOD64: Carry Forward Status Informational Notice
Eligibility and Enrollment	Notices	49123	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall allow SCR admin users to choose mail as communication method irrespective of consumers preferred communication method while reprinting any notices.
Eligibility and Enrollment	Notices	49124	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall update the MAGI Medi-Cal snippet in NOD03 to include language for MCAP and CCHIP consumers.
Eligibility and Enrollment	Notices	49125	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall create new snippets for the 1557 and Babel pages that will apply to all notice templates.
Eligibility and Enrollment	Notices	49126	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall update the template for the CalNOD11A: Consent Notice
Eligibility and Enrollment	Notices	49127	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall update the template for the CalNOD69: Plan Selection Summary Notice
Eligibility and Enrollment	Notices	49128	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall update the text of snippet 365

Category	Sub Category	Req ID	Requirement
Eligibility and Enrollment	Notices	49129	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall send the NOD01 when Carry Forward has been lifted from a prior benefit month high dated disposition or EDR
Eligibility and Enrollment	Notices	49130	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall trigger NOD01 when an individual's CFS is lifted from a current/future benefit month transaction with a high dated disposition or EDR
Eligibility and Enrollment	Notices	49131	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall add one new proof chart snippet for REX in NOD01
Eligibility and Enrollment	Notices	49132	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) to update the MCAP snippets to trigger when consumer is MCAP Conditionally Eligible
Eligibility and Enrollment	Notices	49133	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) to update the appeals language for the Hmong Translation in NOD01 snippet 260
Eligibility and Enrollment	Notices	49394	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall update the language of the Reprint Modal
Eligibility and Enrollment	Notices	49395	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall remove the odd/even page requirement for the Section 1557 and Babel Page from CalNOD38b
Eligibility and Enrollment	Notices	49396	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall trigger NOD01 when an admin sets the CFS override flag and an individual's CFS is lifted from a subsequent RAC transaction
Eligibility and Enrollment	Notices	49397	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall add one new proof chart snippet for REX in NOD03
Eligibility and Enrollment	Notices	49440	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall update NOD01 suppression logic (From CR 236884) to include disposition transactions.
Eligibility and Enrollment	Notices	49441	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall update the CalNOD80 FDD to match the update being made to the NOD01 suppression logic (From CR 236884) to include disposition transactions.
Eligibility and Enrollment	Notices	49442	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall update the NOD01T trigger conditions to trigger for consumers that qualify for “MCT to Unsub APS” and all other NOD01T conditions are met
Eligibility and Enrollment	Notices	49443	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall update the SSN proof chart snippet to populate regardless of citizenship status.
Eligibility and Enrollment	Other Health Services		
Eligibility and Enrollment	Other Health Services	42521	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall provide the functionality to screen for potential eligibility for non-MAGI Medi-Cal
Eligibility and Enrollment	Other Health Services	42525	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall provide the functionality to send and receive application, case Data, and documentation to/from SAWS for non-MAGI Medi-Cal.
Eligibility and Enrollment	Other Health Services	42526	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall provide the functionality to Interface with SAWS to accept the the disposition of non-MAGI eligibility determination.
Eligibility and Enrollment	Other Health Services	42527	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall provide the functionality to keep households that contain MAGI and non-MAGI members as a unified case in the member account features.
Eligibility and Enrollment	Other Health Services	42547	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall collect and send the application Data to the appropriate System of record to complete the application process for Other Heath Services programs not within California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) scope.
Eligibility and Enrollment	Other Non-Health Services		
Eligibility and Enrollment	Other Non-Health Services	37950	"California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall pre-screen applicants to identify if a member has MAGI Medi-Cal Income a.) less than or equal to 200% or b.) greater than 200% of the Federal Poverty Level (FPL) based on their household size. "
Eligibility and Enrollment	Other Non-Health Services	37951	"The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) system must provide the functionality to display the ""Additional Benefit Options"" page when a member of the application has been screened as having their MAGI Medi-Cal Income greater than 200% FPL. "
Eligibility and Enrollment	Other Non-Health Services	37952	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) system must provide the functionality to display the ""Additional Benefit Options"" page with the inclusion of conditional text encouraging the User to apply for additional programs when a member of the application has been screened as having their MAGI Medi-Cal Income less than or equal to 200% FPL.
Eligibility and Enrollment	Other Non-Health Services	37953	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall provide the User with the ability to apply for CalWORKs/CalFresh via www.benefitscal.org/CH from the "Additional Benefit Options" page.

Category	Sub Category	Req ID	Requirement
Eligibility and Enrollment	Other Non-Health Services	37954	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall provide adequate messaging on the "Additional Benefit Options" page.
Eligibility and Enrollment	Other Non-Health Services	37955	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall add a new Apply Now button at the bottom of the "Additional Benefit Options" page, which will both trigger eHIT for sending the applicant's information to SAWS when the checkbox for CalFresh or CalWORKs is selected and launch a new child window that allows the User to complete their CalWORKs/CalFresh application via www.benefitscal.org/CH .
Eligibility and Enrollment	Other Non-Health Services	37956	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall provide a pop-up window with messaging to: a.) encourage the consumer to complete the plan selection process for their current application and b.) instruct the consumer on how to apply for additional benefits.
Eligibility and Enrollment	Other Non-Health Services	37957	Covered California shall report the number of applicants who have selected to go to www.benefitscal.org/CH broken down by which program(s) they are sharing their information with and whether they a.) less than or equal to 200% or b.) greater than 200% of the Federal Poverty Level (FPL) based on their household size.
Eligibility and Enrollment	Other Non-Health Services	37958	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall update the "Referral to Other Programs" label to: "Additional Benefit Options" on the Eligibility Results pages.
Eligibility and Enrollment	Other Non-Health Services	42566	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall provide the functionality to notify the applicant that they may be eligible for other State programs and directing them to the appropriate links (e.g., CalWORKs and CalFresh)
Eligibility and Enrollment	Other Non-Health Services	42601	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall collect and send the basic application Data for non-health services programs, along with any documents provided by the applicant, to the System of record for that program to complete the application process.
Eligibility and Enrollment	Provider/Plan Directory		
Eligibility and Enrollment	Provider/Plan Directory	37930	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall include and keep current a centralized Provider Directory database that contains consumer-centric information on providers (i.e., independent clinicians, medical groups, dentists, specialists, and other health plan-specific providers) in a plan's geographic coverage area Key functionality of the centralized Provider Directory database includes, but is not limited to, compiling and presenting information on: B) Provider their being in or out of network on respective plans or products C) Provider's acceptance of new patients D) Language(s) spoken by the provider E) The Vendor is encouraged to recommend other elements to be presented as part of the centralized Provider Directory.
Eligibility and Enrollment	Renewal		
Eligibility and Enrollment	Renewal	38191	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall provide the functionality to automatically process annual eligibility redetermination based on self attested data and 2014 FPL tables.
Eligibility and Enrollment	Renewal	38206	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall provide the functionality to receive and process eligibility criteria, either from the consumer or SAWS.
Eligibility and Enrollment	Renewal	38207	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall provide the functionality to send a task to the service center queue to process data or information received from a system and/or a consumer to assess for a change in eligibility.
Eligibility and Enrollment	Renewal	38208	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall provide the functionality to sort by zip code, batch and print renewal forms and correspondence.
Eligibility and Enrollment	Renewal	38209	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall provide the functionality to determine available plans and allow enrollee to change plans during the renewal period as specified by the Exchange.
Eligibility and Enrollment	Renewal	38212	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall provide an automated workflow to generate tasks and assign to Service Center queue. (Note: This requirement applies to CCP/APTC/CSR programs only)
Eligibility and Enrollment	Renewal	38278	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall provide the functionality to process individual disenrollment due to change in circumstance (e.g., moved to SHOP or Employer coverage) or non-payment of premium.
Eligibility and Enrollment	Renewal	38336	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall provide the functionality to obtain verification data (only what is necessary e.g., income, incarceration, residency) in advance of annual renewal.
Eligibility and Enrollment	Renewal	38337	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall provide the functionality to issue a notice of annual enrollment period via mail to current enrollees.

Appendix A-4 - SOW Exhibit A - System Requirements Specification
(Extracted from CalHEERS RTM)

Category	Sub Category	Req ID	Requirement
Eligibility and Enrollment	Renewal	38345	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall provide the functionality to issue a notice of annual enrollment period to current enrollees, based on preferences (e.g., mail, email, phone) which includes pre-populated data. (Note: This requirement applies to CCP/APTC/CSR programs only)
Eligibility and Enrollment	Renewal	38411	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall provide the functionality to produce written notification / request for individuals to verify key eligibility factors (e.g., income, household composition, residency, etc.) for the purposes of annual eligibility redetermination or enrollment renewal and report changes if necessary.
Eligibility and Enrollment	Renewal	38412	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall provide the functionality to process individual responses to initiate eligibility redetermination process if necessary.
Eligibility and Enrollment	Renewal	38455	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall provide the functionality to notify enrollees of disenrollment due to change in eligibility criteria. The notice is to include the reasons for ineligibility, the effective date, and a toll free number for customer service.
Eligibility and Enrollment	Renewal	44478	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall provide the functionality for enrollees to transfer to another QHP and / or stand-alone dental plan outside the annual renewal period based on certain qualifying events that change availability of plans (move to new location, decertification of a plan, etc.).
Eligibility and Enrollment	Reports		
Eligibility and Enrollment	Reports	38176	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall generate a report(s) based on a monthly calendar basis with all consumers/beneficiaries that have transitioned from APTC to MC (pending, eligible, conditionally eligible status identified by unique transition indicators) and from MC to APTC (discontinued, denied, ineligible status identified by an unique transition indicator).
Eligibility and Enrollment	Reports	38179	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall generate a report of cases for which members have been determined program ineligible for APTC/CSR/CCP via SAWS (eHIT) where members of the case remain program eligible for APTC/CSR/CCP and need to re-select a plan on the following frequency: Covered CA: Daily DHCS: Monthly
Eligibility and Enrollment	Reports	38180	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall generate a report of cases for which members have been determined program ineligible for MAGI M/C and APTC/CSR/CCP eligible or conditionally eligible via SAWS (eHIT) and need to select a plan on the following frequency: Covered CA: Daily DHCS: Monthly
Eligibility and Enrollment	Reports	38473	Update the existing ESI Employer Notices Extract (WKPG 68880) to add employer address information and update/add-to project documentation.
Eligibility and Enrollment	Reports	43100	When reporting monthly and yearly 1095-A electronic information to the IRS, the California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) system shall exclude catastrophic plans.
Eligibility and Enrollment	Reports	43107	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall report additional employer information on the 1095 report.
Eligibility and Enrollment	Verify Application Information		
Eligibility and Enrollment	Verify Application Information	38068	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall have the functionality to validate an application submission to a valid USPS address, including correct zip code and county. This validation will include determining the correct zip code without allowing the consumer to change.
Eligibility and Enrollment	Verify Application Information	38069	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall notify the consumer if their input address is not valid and allow correction.
Eligibility and Enrollment	Verify Application Information	38252	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall not take action on a consumer's eligibility or enrollment if the electronic data source responsible for the verification inconsistency is not available for re-verification at the end of the reasonable opportunity period.
Eligibility and Enrollment	Verify Application Information	40723	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall notify consumers of SSN verification failures and present them with an opportunity to correct the data during the application flow
Eligibility and Enrollment	Verify Application Information	40950	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall use the following income hierarchy during ROP Eligibility re-determination when income verifications results are inconsistent and income from electronic sources will be used to determine eligibility. 1. IRS and SSA 2. EDD and SSA 3. VCI and SSA 4. FTB and SSA 5. SSA
Eligibility and Enrollment	Verify Application Information	42283	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall provide the functionality to verify applicant citizenship or status as a national or lawful presence, and income in real-time via external interface with the Federal Data Services Hub.
Eligibility and Enrollment	Verify Application Information	42284	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) system shall not verify citizenship if the applicant does not attest to US Citizenship.
Eligibility and Enrollment	Verify Application Information	42285	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) system shall not verify citizenship if the applicant indicates they are not applying for benefits.
Eligibility and Enrollment	Verify Application Information	42286	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) system shall not verify citizenship if the applicant has already verified citizenship previously.

Category	Sub Category	Req ID	Requirement
Eligibility and Enrollment	Verify Application Information	42287	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) system shall verify citizenship if the applicant attests to citizenship and is applying for benefits and has not had citizenship verified previously, including if the applicant reports a change from non-citizen to citizen.
Eligibility and Enrollment	Verify Application Information	42288	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) system shall verify immigration status if the applicant claims eligible immigration status and provides immigration document details to verify, including reporting a change in their immigration status or documentation.
Eligibility and Enrollment	Verify Application Information	42406	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall provide the functionality to verify residency, incarceration in real-time via external interface with various State Systems and/or federal Systems.
Eligibility and Enrollment	Verify Application Information	42407	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) system shall not verify incarceration if the applicant indicates they are not applying for benefits.
Eligibility and Enrollment	Verify Application Information	42456	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall provide the functionality to perform all verifications as described in the Data Verification Plan. (e.g. minimum essential coverage).
Eligibility and Enrollment	Verify Application Information	42457	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall provide the functionality to automatically notify online in real-time if the individual will need to provide additional verification of income, citizenship or lawful presence.
Eligibility and Enrollment	Verify Application Information	42484	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall provide the functionality to track the status of citizenship or lawful presence verification.
Eligibility and Enrollment	Verify Application Information	42491	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall provide the functionality to verify in real-time whether an individual is already eligible and receiving benefits for subsidized healthcare via MEDS interface.
Eligibility and Enrollment	Verify Application Information	42507	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall provide the functionality to notify the individual of all verified information in real-time via the Web Portal.
Eligibility and Enrollment	Verify Application Information	43286	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall implement the Federal HUB Renewal and Redetermination Verification (RRV) service for California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) initiated, passive auto renewals.
Eligibility and Enrollment	Verify Application Information	43287	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall modify the renewal verification plan to only include re-verification of SSN, death and income for California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) initiated, passive auto renewals.
Eligibility and Enrollment	Verify Application Information	43288	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall modify the existing real time income verification service to store response data in a structured column format, for future reporting enhancements.
Eligibility and Enrollment	Verify Application Information	43289	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall have the ability to re-process consumers through the RRV service as part of a technical or business exception process.
Eligibility and Enrollment	Verify Application Information	43377	"The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall re-verify ALL of the following verifications at renewals: - Lawful presence - income reasonable compatibility - incarceration status - deceased status - MEC"
Eligibility and Enrollment	Web Portal Online Help		
Eligibility and Enrollment	Web Portal Online Help	38329	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) system shall display a popup modal window when a consumer clicks on any Plan Preview link.
Enrollment			
Enrollment	Alerts and Notices		
Enrollment	Alerts and Notices	40797	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall notify the Enroller (Agency Manager, Agent, Entity Manager, and Assister/CEC) that their Consumer has received a notice or snippet part of a notice that could require some action.
Enrollment	Alerts and Notices	40798	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall provide a daily summary notice outlining notification topics to the enroller
Enrollment	Alerts and Notices	40799	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall retain the notification excel sheet files in AWS for 90 days
Enrollment	Alerts and Notices	41219	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall proactively notify Enrollers (Agency Manager, Agent, Entity Manager, and Assister/CEC) on 08/01, 09/01, 10/01 with a list of Consumers 'Consent Valid Thru' will expire in the current benefit year.
Enrollment	Alerts and Notices	41220	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall notify the Enroller (Agency Manager, Agent, Entity Manager, and Assister/CEC) when there's an alert on Consumer's portal.
Enrollment	Alerts and Notices	41221	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall send Enroller Portal Alerts information to Salesforce in the Agent / Assister Search Response
Enrollment	Alerts and Notices	41222	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall add a new "Enroller Portal Alerts Sheet Download Link" data element to the Agent / Assister Search Response that a Service Center Representative shall be able to access using their California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) login credentials to download the Enroller Portal Alerts excel file.
Enrollment	Alerts and Notices	41223	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall enhance export book of business (All Agents/CEC) (Agency Manager, Entity Manager). Remove Attributes: 1. Consent Received Date 2. Consent Duration Add Attribute: 1. Consent Valid Through Coverage Year Report

Category	Sub Category	Req ID	Requirement
Enrollment	Alerts and Notices	41224	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall enhance export book of business columns for Enroller (Agency Manager, Agent, Entity, CEC).
			Remove Attributes: 1. Consent Received Date 2. Consent Duration Add Attribute: 1. Consent Valid Through Coverage Year Report
Enrollment	Assister Management		
Enrollment	Assister Management	39650	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) Issuer Enrollment Portal shall allow the Issuer Representative to search for enrollments by an agency Federal Tax ID.
Enrollment	Assister Management	39651	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) Issuer Enrollment Portal shall allow the Issuer Representative to export the results; the results spreadsheet shall include the delegation information for the enrollment (Agent's name,Agency Federal Tax ID', License Number, Delegation Start Date, Delegation End Date).
Enrollment	Assister Management	39654	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) Issuer Enrollment Portal shall display the active delegation information (Agent's name,Agency Federal Tax ID', and License Number) associated with an enrollment record when an enrollment is selected for viewing.
Enrollment	Assister Management	39663	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall capture and store the delegation history for each household case regardless of programs and enrollment status.
Enrollment	Assister Management	39664	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall capture, store, and display the date when delegation was added, changed, and removed for each household case.
Enrollment	Assister Management	39665	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall capture and, store, and display who changed the delegation for each household case.
Enrollment	Assister Management	39666	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall allow the user to refine transactions to display.
Enrollment	Assister Management	39667	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall display all delegation history transactions to Service Center Representatives and Consumers.
Enrollment	Assister Management	39668	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall display delegation history limited to the brokers at their agency only for Agency Managers and Approved Admin Staff.
Enrollment	Assister Management	39669	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall display delegation history limited to his/her own book of business only for Certified Insurance Agent.
Enrollment	Assister Management	39670	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall display delegation history limited to his/her own book of business only for Certified Enrollment Counselor.
Enrollment	Assister Management	39671	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall store delegation history in the DW and accessible in DM.
Enrollment	Assister Management	39672	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall display consumer enrollment history, premium history, enrollee data for Certified Insurance Agents.
Enrollment	Assister Management	39673	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) Issuer Enrollment Portal shall display Delegation History for an enrollment; the history shall include Agent's name,Agency Federal Tax ID', License Number, Delegation Start Date, Delegation End Date.
Enrollment	Assister Management	39690	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall display consumer enrollment history, premium history, enrollee data for Certified Enrollment Counselors, Plan Base Enrollers.
Enrollment	Assister Management	39691	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall display consumer enrollment history, premium history, enrollee data for Approved Admin Staff.
Enrollment	Case Management		
Enrollment	Case Management	41815	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) Health Plan Compare screen shall include and display the following summary for each health plan selected for comparison: 1. Provider name and logo 2. Health Plan name (metal tier, plan type) hyperlink 3. Health Plan description as a banner (metal tier, plan type, CSR if it applies) 4. Monthly premium amount 5. Monthly savings amount 6. Monthly savings details 7. Add to cart button
Enrollment	Custom Grouping Rules		
Enrollment	Custom Grouping Rules	42071	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall allow the user to provide the following health care needs information, this information will be utilized by the system to find and sort plan options for the household. 1. Preferred Providers (Doctors, Hospitals, Dentists) 2. Medical service needs (Number of Doctors visits, type of treatment etc.) 3. Prescription usage (Number of prescriptions, Low or High cost drug usage)
Enrollment			California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall allow a user to search their preferred health care providers.
Enrollment	Custom Grouping Rules	42073	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall display a warning message when a user enters a ZIP code outside of the State of California.
Enrollment	Custom Grouping Rules	42074	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall allow a user to select their preferred health care providers.
Enrollment	Custom Grouping Rules	42075	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall display the following information for the preferred provider selected: 1. Provider type 2. Provider name 3. Provider specialty description 4. Provider address

Category	Sub Category	Req ID	Requirement
Enrollment	Custom Grouping Rules	42076	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall include and display the following functionalities for the preferred health provider selection page: 1. Main section header 2. Section description 3. Introductory provider directory text 4. Forward navigation 5. Back navigation to Dashboard for authenticated user 6. Back navigation to Shop and Compare for anonymous user
Enrollment	Custom Grouping Rules	42089	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) should allow a user to select their expected medical services need during the coverage year.
Enrollment	Custom Grouping Rules	42090	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall include and display the following functionalities for the medical services usage screen: 1. Main section header 2. Section description 3. Forward navigation 4. Back navigation 5. Display Back to Shop and Compare button for anonymous user 6. Display Back to Dashboard button for authenticated user
Enrollment	Custom Grouping Rules	42091	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall allow a user to select their expected prescriptions need for the coverage year.
Enrollment	Custom Grouping Rules	42092	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall include and display the following functionalities for the prescription usage screen: 1. Main section header 2. Section description 3. Forward navigation 4. Back navigation 5. Display Back to Shop and Compare button for anonymous user 6. Display Back to Dashboard button for authenticated user
Enrollment	Custom Grouping Rules	42095	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall allow a user to sort the health plans returned for a user by the following on health plan shopping page: 1. Total cost estimate amount 2. Monthly premium 3. Preferred providers
Enrollment	Disenrollment		
Enrollment	Disenrollment	38270	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall terminate and re-enroll the consumer's insurance policy under the following outcomes from reasonable opportunity period processing: If the subscriber is discontinued and there is at least one active member remaining on the policy
Enrollment	Disenrollment	41993	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) enrollment module shall include all functional changes documented CR 177296 - Moving Off Exchange Enrollments to California Healthcare Eligibility, Enrollment and Retention System (CalHEERS).
Enrollment	Disenrollment	41995	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) enrollment module shall include all functional changes documented CR 176483 - \$0 Premium Bill.
Enrollment	Disenrollment	41996	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) enrollment module shall include all functional changes documented CR 189423 - Add a Carrier Link to Enrollment Dashboard.
Enrollment	Disenrollment	41998	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) enrollment module shall include all functional changes documented CR 1880309 - Exchange Eligibility Dating.
Enrollment	Disenrollment	42003	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) enrollment module shall include all functional changes documented CR 170285 - System Design and Code Small Change Enhancements.
Enrollment	Disenrollment	42093	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall include the following functionalities for each of the health plans returned for the user in the health plan shopping page: 1. Calculate total cost estimate amount 2. Determined total cost estimate range (Lower, Average, and Higher)
Enrollment	Disenrollment	42094	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall adjust the total cost estimate amount to account for the number of months the consumer needs coverage.
Enrollment	Disenrollment	42096	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) enrollment module shall accept and process the existing QLE reason provided by business rules engine.
Enrollment	Disenrollment	42097	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall determine the earliest coverage start date based on the SEP details received from the business rules engine.
Enrollment	EDI Validations		
Enrollment	EDI Validations	41658	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall display a loading screen/indicator until the plans are ready to be displayed based on the user inputs.
Enrollment	EDI Validations	41659	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall provide users with navigation options to guide user back to the user preferences and/or Shop and Compare page.
Enrollment	EDI Validations	41660	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) - Shopping Screen shall have functionality to navigate between Health Plan Summary and Dental Plan Summary screens to allow users to choose between varying types of plan selections: 1. Type (Health Plans) 2. Type (Dental Plans)

Category	Sub Category	Req ID	Requirement
Enrollment	EDI Validations	41661	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) - Health Plan Shopping Screen shall display following details regarding the user based on the data collected on the Shop & Compare and user preference pages. 1. Estimated Monthly Savings (per month basis) 2. Number of Members shopping in the Household 3. Coverage Start Date 4. ZipCode
Enrollment	EDI Validations	41662	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) - Health Plan Shopping Screen shall display the breakdown of 'Estimated Monthly Savings'
Enrollment	EDI Validations	41663	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) - Health Plan Shopping Screen shall display Cost-Sharing Reduction (CSR) Header with CSR Icon.
Enrollment	EDI Validations	41664	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) - Health Plan Shopping Screen shall allow user to access the definition of CSR to understand Cost-Sharing Reduction.
Enrollment	EDI Validations	41665	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) - Health Plan Shopping Screen shall display pagination for pages available to user for Health Plan Shopping.
Enrollment	EDI Validations	41666	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) - Health Plan Shopping Screen shall display count of items added to the shopping cart
Enrollment	EDI Validations	41667	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) - Health Plan Shopping Screen shall display 'Benefits Summary Disclaimer' details.
Enrollment	EDI Validations	41668	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) - Health Plan Shopping Screen shall display a disclaimer regarding the source of quality ratings details
Enrollment	EDI Validations	41669	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) - Health Plan Shopping Screen shall have functionality to sort Health Plans based on the following sorting categories: 1. Total Expense Estimate 2. Monthly Premium (low to high) 3. Preferred Doctor or Provider
Enrollment	EDI Validations	41670	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) - Health Plan Shopping Screen shall have the functionality to guide users to filter Health Plans based on the following data categories: 1. Plan Type 2. Plan Features 3. Metal Tier 4. Yearly Deductible 5. Companies 6. Quality Rating
Enrollment	EDI Validations	41671	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) - Health Plan Shopping Screen shall allow users to filter based on the Plan Type which includes following: 1. HMO 2. EPO 3. PPO
Enrollment	EDI Validations	41672	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) - Health Plan Shopping Screen shall allow user to filter based on Plan Features which includes following: 1. Cost-Sharing Reductions (CSR) 2. Health Savings Account (HSA)
Enrollment	EDI Validations	41673	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) - Health Plan Shopping Screen shall allow user to filter based on Metal Tier which includes following: 1. Platinum 2. Gold 3. Silver 4. Bronze 5. Minimum Coverage
Enrollment	EDI Validations	41674	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) - Health Plan Shopping Screen shall display the Minimum Coverage filter for the users who are less than the age of 30.
Enrollment	EDI Validations	41675	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) - Health Plan Shopping Screen shall allow user to filter based on Yearly Deductible which includes following: 1. \$2500 and less 2. \$7500 and less 3. \$10,000 and less
Enrollment	EDI Validations	41676	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) - Health Plan shall provide tooltip for all the filters with the title below: 1. Metal Tier 2. Yearly Deductible
Enrollment	EDI Validations	41677	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) - Health Plan Shopping Screen shall allow user to filter based on companies which includes list of companies who are providing QHP based on the user provided information
Enrollment	EDI Validations	41678	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) - Health Plan Shopping Screen shall allow user to filter based on Quality Ratings of the Health Plans. The Quality Rating filters include options ranging from 5 stars quality ratings to 1 star quality rating.
Enrollment	EDI Validations	41679	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall display all the filters selected by user in the Health Shopping screen.
Enrollment	EDI Validations	41680	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall have a functionality for users to clear all the applied filters in the Health Shopping Screen.
Enrollment	EDI Validations	41681	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) - Health Plan Shopping Screen shall display summary for each of the Health Plans recommended by the system. The summary includes the details mentioned in BRs 12.1-12.18

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Category	Sub Category	Req ID	Requirement
Enrollment	EDI Validations	41751	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) - Health Plan Shopping Screen shall display the company/carrier logo image for each of the Health Plans recommended by the system.
Enrollment	EDI Validations	41752	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) - Health Plan Shopping Screen shall display the Plan Name for each of the Health Plans recommended by the system.
Enrollment	EDI Validations	41753	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) - Health Plan Shopping Screen shall display the "Metal Tier", "Plan Type", "Plan Feature" for each of the Health Plans recommended by the system.
Enrollment	EDI Validations	41754	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) - Health Plan Shopping Screen shall display the "Plan Type" for each of the Health Plans recommended by the system.
Enrollment	EDI Validations	41755	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) - Health Plan Shopping Screen shall display the "Plan Features" for each of the Health Plans recommended by the system.
Enrollment	EDI Validations	41756	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) - Health Plan Shopping Screen shall display the Monthly Premium Cost after APTC and/or CA premium credit deductions for each of the Health Plans recommended by the system.
Enrollment	EDI Validations	41757	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall cap the monthly premium amount to \$0 for the users who have APTC and/Or CA premium credit greater than the monthly premium amount.
Enrollment	EDI Validations	41758	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) - Health Plan Shopping Screen shall display the Monthly savings amount for each of the Health Plans recommended by the system.
Enrollment	EDI Validations	41759	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) - Health Plan Shopping Screen shall display the Primary Care Visit Copay for each of the Health Plans recommended by the system.
Enrollment	EDI Validations	41760	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) - Health Plan Shopping Screen shall display the Generic Drugs Copay for each of the Health Plans recommended by the system.
Enrollment	EDI Validations	41761	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) - Health Plan Shopping Screen shall display the Yearly Deductible for each of the Health Plans recommended by the system.
Enrollment	EDI Validations	41762	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) - Health Plan Shopping Screen shall display the 'May not Apply' for each of the Health Plans that have a non-zero yearly deductible for each of the Health Plan recommended by the system.
Enrollment	EDI Validations	41763	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) - Health Plan Shopping Screen shall display the Total Expense Estimate for each of the Health Plans recommended by the system.
Enrollment	EDI Validations	41764	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) - Health Plan Shopping Screen shall display the Quality Ratings for each of the Health Plans recommended by the system. The Quality Ratings are currently defined by no. of stars ranging from 1 star to 5 star.
Enrollment	EDI Validations	41765	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) Health Plan Shopping Screen shall display an indicator to distinguish all the Top Performing Quality Health Plans recommended by the system.
Enrollment	EDI Validations	41766	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) - Health Plan Shopping Screen shall display the list of providers/facilities who provide coverage for each of the Health Plans recommended by the system. The following details should be available for each of the providers: 1. Name of the provider 2. Provider is in network or Out-of-network
Enrollment	EDI Validations	41767	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) - Health Plan Shopping Screen shall have a functionality/option to navigate to the Individual Health Plan details page(s) for each of the Health Plans recommended by the system.
Enrollment	EDI Validations	41768	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) - Health Plan Shopping Screen shall provide user with the Add to Cart feature for each of the Health Plans recommended by the system.
Enrollment	EDI Validations	41769	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) - Health Plan Shopping Screen shall allow user to add only one Health Plan at a time instance to the shopping cart.
Enrollment	EDI Validations	41770	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) - Health Plan Shopping Screen shall provide user with the feature to 'Remove' the Health Plan from the shopping cart
Enrollment	EDI Validations	41771	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) to show a validation/warning message during the Anonymous Flow indicating that the user cannot purchase Dental Plan only.
Enrollment	EDI Validations	41772	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall display a visual confirmation after selecting the plan to provide confirmation of Plan selected and provide user with navigation for next steps: 1. Functionality to navigate to the Dental Plans Summary page 2. Functionality to navigate to the Shopping Cart Page
Enrollment	EDI Validations	41773	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) - Dental Plan Shopping Screen shall display following details regarding the user based on the data collected on the Shop & Compare and user preference pages. 1. Number of Members shopping in the Household 2. Coverage Start Date 3. ZipCode
Enrollment	EDI Validations	41774	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) - Dental Plan Shopping Screen shall display pagination for pages available to user for Dental Plan Shopping.
Enrollment	EDI Validations	41775	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) - Dental Plan Shopping Screen shall display count of items added to the shopping cart
Enrollment	EDI Validations	41776	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) - Dental Plan Shopping Screen shall display 'Benefits Summary Disclaimer' details.

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Category	Sub Category	Req ID	Requirement
Enrollment	EDI Validations	41777	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) - Dental Plan Shopping Screen shall have functionality to sort Dental Plans based on the following sorting categories: 1. Monthly Premium (low to high)(Default Sort Option) 2. Yearly Deductible (low to high)
Enrollment	EDI Validations	41778	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) - Dental Shopping Screen shall have the functionality for the users to filter Dental Plans based on the following: 1. Plan Type 2. Plan Tier 3. Yearly Deductible 4. Companies
Enrollment	EDI Validations	41779	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) - Dental Plan Shopping Screen shall allow users to filter based on the Plan Type which includes following: 1. HMO 2. PPO
Enrollment	EDI Validations	41780	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) - Dental Plan Shopping Screen shall allow user to filter based on Plan Tier.
Enrollment	EDI Validations	41781	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) - Dental Plan Shopping Screen shall allow user to filter based on Yearly Deductible which includes following: 1. \$49 and under 2. \$50 to \$ 99 3. \$100 and over
Enrollment	EDI Validations	41782	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) - Dental Plan Shopping Screen shall allow user to filter based on companies/carriers.
Enrollment	EDI Validations	41783	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall display all the filters selected by user in the Dental Shopping screen.
Enrollment	EDI Validations	41784	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) - Dental Plan Shopping Screen shall display summary for each of the Dental Plans recommended by the system. The summary includes the details mentioned in BRs 20.1-20.11
Enrollment	EDI Validations	41785	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) - Dental Plan Shopping Screen shall display the company/carrier logo image for each of the Dental Plans recommended by the system.
Enrollment	EDI Validations	41786	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) - Dental Plan Shopping Screen shall display the Plan Name for each of the Dental Plans recommended by the system.
Enrollment	EDI Validations	41787	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) - Dental Plan Shopping Screen shall display the Plan Type and Plan Tier for each of the Dental Plans recommended by the system.
Enrollment	EDI Validations	41788	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) - Dental Plan Shopping Screen shall display the Monthly Premium Cost for each of the Dental Plans recommended by the system.
Enrollment	EDI Validations	41789	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) - Dental Plan Shopping Screen shall display the Routine Dental Copay for Adults for each of the Dental Plans recommended by the system.
Enrollment	EDI Validations	41790	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) - Dental Plan Shopping Screen shall display the Routine Dental Copay for Children for each of the Dental Plans recommended by the system.
Enrollment	EDI Validations	41791	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) - Dental Plan Shopping Screen shall display the Yearly Deductible for each of the Dental Plan recommended by the system.
Enrollment	EDI Validations	41792	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) - Dental Plan Shopping Screen shall have a functionality/option to navigate to the "Individual Dental Plan" details pages for each of the Dental Plans recommended by the system.
Enrollment	EDI Validations	41793	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) - Dental Plan Shopping Screen shall provide user with the "Add to Cart" feature for each of the Dental Plans recommended by the system.
Enrollment	EDI Validations	41794	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) - Dental Plan Shopping Screen shall allow user to add only one Dental Plan at a time/instance to the shopping cart.
Enrollment	EDI Validations	41795	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) - Dental Plan Shopping Screen shall provide user with the feature to 'Remove' the Dental Plan from the shopping cart
Enrollment	EDI Validations	41796	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall display a visual confirmation of Plan selected and provide user with the ability to do the following: 1. Functionality to navigate to the Shopping Cart Page
Enrollment	EDI Validations	41797	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) - Health Plan Shopping Screen shall display field label for yearly deductibles which can be configured to include verbiage around Metal Tier and CSR Tier for the yearly deductible.
Enrollment	EDI Validations	41798	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall have a hover over text for the Yearly Deductible field which can be dynamic to include verbiage regarding the Metal tier and CSR tier .
Enrollment	EDI Validations	41799	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall include and display the following functionalities for Health Plan Details screen: 1. Back navigation to shop and compare and plan selection screens 2. Main section header
Enrollment	EDI Validations	41810	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) -- Health Plan Details screen shall have a hover over text for the Yearly Deductible field which can be dynamic to include verbiage regarding the Metal tier and CSR tier .
Enrollment	EDI Validations	41816	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall display a visual confirmation after selecting the plan to provide confirmation of Plan selected and provide user with navigation for next steps: 1. Functionality to navigate to the Dental Plan Shopping 2. Functionality to navigate to the Shopping Cart Page

Category	Sub Category	Req ID	Requirement
Enrollment	EDI Validations	41817	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall display the following content in the Summary section: 1. Total Expense Estimate 2. Doctors & Facilities 3. Plan Type 4. Health Savings Account (HSA) 5. Quality Rating
Enrollment		41818	***The BR for Provider Directory Search implementation will be discussed in a separate RV Session *** California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall include and display the following functionalities for the doctors and facilities card: 1. Section header for doctors and facilities 2. Check for your doctor hyperlink appears if user did not select a preferred provider previously. 3. Provider name and address appears if user selected a preferred provider previously. 4. Edit hyperlink appears if user selected a preferred provider previously. 5. Provider network indicator whether provider is in the health plan network if user selected a preferred provider(s) previously. 6. User will have an option to search, view (list view and map view), or edit preferred provider list.
Enrollment		41819	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall include and display the following functionalities for health services based on information coming SERFF 1. Section header for the name of service 2. List of sub-categories for the service 3. Coverage information for each service for in-network providers will be populated based on information from SERFF
Enrollment	EDI Validations	41825	***The BR for Provider Directory Search implementation will be discussed in a separate RV Session *** California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall include and display benefits resources section with following functionalities: 1. Ability to view Summary of Benefits and Coverage PDF 2. Plan brochure label/hyperlink 3. Provider directory hyperlink
Enrollment		41834	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall display the following features for the Dental Plan comparison page: 1. Back navigation to shop and compare and plan selection pages 2. Main section header
Enrollment			
Enrollment	Enrollment	37913	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall initiate a term/re-enroll during the enrollment update process whenever a consumer, SCR, or assistor-initiated Report a Change transaction occurs that would result in a change to the identification of the subscriber
Enrollment	Enrollment	38074	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall default termination dates to the end of the month in consideration of the 14 day rule (while still maintaining SCR rules for exception handling).
Enrollment	Enrollment	38075	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) system shall include a new termination date field (in addition to Life Event Date) that shows derived value per correct business rules when reporting life events
Enrollment	Enrollment	38077	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall display maintained reasons viewable on the portal for disenrolled members.
Enrollment	Enrollment	38273	When there is custom grouping and the ROP batch discontinues and disenrolls the subscriber in a custom group (i.e. group 1) the other member(s) in the same custom group (i.e. group 1) remain in the same custom group (i.e. group 1.)
Enrollment	Enrollment	38977	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall retest the connectivity with all existing Carriers(Health and Dental).
Enrollment	Enrollment	39284	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) team shall perform Integration test to ensure that carriers are able to accept, process, and provide response to transactions including 834, TA1, 999.
Enrollment	Enrollment	39376	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) system shall create a new security profile for the Issuer Enrollment Module.
Enrollment	Enrollment	39474	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall retest the connectivity with all existing Carriers(Health and Dental).
Enrollment	Enrollment	39488	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) team shall perform Integration test to ensure that carriers are able to accept, process, and provide response to transactions including 834, TA1, 999.
Enrollment	Enrollment	39515	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall send the Salesforce system consumer's demographic, eligibility and enrollment information of submitted applications.
Enrollment	Enrollment	39624	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall update the table structure for REM to include a new table to capture the financial discrepancies. (L5)
Enrollment	Enrollment	39626	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall build the python rules for the financial reconciliation
Enrollment	Enrollment	39628	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall update the carrier action file to include carrier fixes resulting from the financial reconciliation
Enrollment	Enrollment	39643	GI shall configure the Enhanced Provider Data Management Module on for California Healthcare Eligibility, Enrollment and Retention System (CalHEERS)
Enrollment	Enrollment	39644	GI shall provide a User Interface to load provider directory files
Enrollment	Enrollment	39645	GI shall provide comprehensive log files for loaded provider directory files
Enrollment	Enrollment	39646	GI shall provide the number of records uploaded each time
Enrollment	Enrollment	39647	GI shall store the loaded file for future reference
Enrollment	Enrollment	39648	GI shall provide the capability to 'activate' the last successfully uploaded file and make it available to the consumer

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Category	Sub Category	Req ID	Requirement
Enrollment	Enrollment	39649	GI shall provide an audit trail for loaded files
Enrollment	Enrollment	39710	GI shall create a new enrollment ID any time a member who was previously terminated from an enrollment is added back with a new coverage start date.
Enrollment	Enrollment	39711	GI shall maintain the rating age for any continuing member when creating the new enrollment ID
Enrollment	Enrollment	39744	GI shall use the added members current age when rating them for the new enrollment ID
Enrollment	Enrollment	39760	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall display configurable date on the Confirmation page which prompts the consumer to use Pay Now in order to ensure they have coverage by the effective start date of their plan
Enrollment	Enrollment	39762	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall rename the button for online payment to "Pay Now".
Enrollment	Enrollment	39792	GI shall remove “may not apply” deductible link and hover text from plans that show a Yearly Deductible as a \$0-dollar value
Enrollment	Enrollment	39793	GI shall add a Provider sort feature on the Plan Selection page.
Enrollment	Enrollment	39794	GI shall add an "Edit Preferences" indicator to the plan tile
Enrollment	Enrollment	39804	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall display the current APTC/State Subsidy attestations on Enrollment Confirmation page to all IAP applicants
Enrollment	Enrollment	39805	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall use unapplied subsidy eligibility to the entire enrollment year when the consumer uses the Change Plan functionality in the GI portal without running eligibility.
Enrollment	Enrollment	39822	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall passively renew cases in which the consumer started the Active renewal process but did not enroll into a plan, and the case has an active enrollment in the current year.
Enrollment	Enrollment	39823	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall allow a consumer with a passively renewed dental only plan to enroll in a QHP during open enrollment when a new application has been submitted
Enrollment	Enrollment	39824	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall allow a consumer with an active dental only plan to enroll in a QHP when they Report a Change and have a valid Qualifying Life Event
Enrollment	Enrollment	39826	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall send a renewal transaction to the carriers if a consumer actively renews into the same plan after shopping to compare prices
Enrollment	Enrollment	39827	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall include the original policy ID in the 834 renewal transaction to carriers when a consumer actively renews in the same plan after shopping to compare prices
Enrollment	Enrollment	39921	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall retest the connectivity with all existing Carriers (Health and Dental).
Enrollment	Enrollment	39922	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) team shall perform Integration testing to ensure that carriers are able to accept, process, and provide responses to transactions including 834, TA1, 999.
Enrollment	Enrollment	40747	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall update the QRS language on the Plan Tile and Plan Tile summary page
Enrollment	Enrollment	40748	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall update the benefit design logic for any benefit design changes made for the new year
Enrollment	Enrollment	40749	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall update the Out of Pocket calculator for any benefit design changes made for the new year
Enrollment	Enrollment	40800	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall require a consumer in active renewal to select a qualified health plan before selecting a dental plan
Enrollment	Enrollment	40801	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall terminate all Health and Dental enrollments on a case when it is closed as a duplicate
Enrollment	Enrollment	41103	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall update the enrollment sync nightly batch to include the CA subsidy payment for the Non Hyde Abortion portion of premium.
Enrollment	Enrollment	41104	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall update the Enroller Book of Business (Agency/Agent/Entity/Certified Enrollment Counselor) csv file to display the CA subsidy payment for the Non Hyde Abortion portion of premium amount.
Enrollment	Enrollment	41105	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall update the weekly carrier reports to include the CA subsidy payment for the Non Hyde Abortion portion of premium amount.
Enrollment	Enrollment	41106	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall update the REM File Layout to include the new Non Hyde Abortion subsidy amount.
Enrollment	Enrollment	41107	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall update the REM L2 rules based on the new Non Hyde Abortion subsidy amount.
Enrollment	Enrollment	41108	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall update the REM L3 rules to include the Non Hyde Abortion subsidy amount.
Enrollment	Enrollment	41109	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall update the REM L5 rules to include the Non Hyde Abortion subsidy amount.
Enrollment	Enrollment	41110	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall update the REM Report to include the Non Hyde Abortion subsidy amount.
Enrollment	Enrollment	41111	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall update the D2 & D3 rules to include the Non Hyde Abortion subsidy amount.
Enrollment	Enrollment	41112	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall add a new Dispute flag for the Non Hyde Abortion subsidy amount.
Enrollment	Enrollment	41113	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall update the D2 Validation Report & Dispute reports to include the Non Hyde Abortion subsidy amount.
Enrollment	Enrollment	41114	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall add the Non Hyde Abortion subsidy amount to the Dispute Dashboard.
Enrollment	Enrollment	41115	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall update the enrollment sync package to include the Non Hyde Abortion subsidy amount.
Enrollment	Enrollment	41225	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall enable the Choose Plan button on the Account Home when a user implements the Plan Selection Override in GI
Enrollment	Enrollment	41226	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall update the Logic of the Alerts pop up on Account Home page to display the choose plan Link when a user implements the plan selection override in GI.
Enrollment	Enrollment	41227	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall update the logic of displaying the choose plan link and Continue link on the household eligibility summary Page
Enrollment	Enrollment	41294	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall match the hover text for PIN on GI side with the hover text for PIN on HBEX side.

Appendix A-4 - SOW Exhibit A - System Requirements Specification
(Extracted from CalHEERS RTM)

Category	Sub Category	Req ID	Requirement
Enrollment	Enrollment	42785	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall have the functionality to calculate and maintain the carrier advance CSR amount per enrollment based on CMS Plan Variation Multipliers (based on effective dates for the multipliers) and Cost-Sharing Reduction Plan Variation..
Enrollment	Enrollment	42786	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall have the functionality to update, as necessary per CMS, the CSR Plan Multipliers and maintain effective dates for use of multipliers based on enrollment date.
Enrollment	Enrollment	43103	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) system must be able to accept plan information and data in the format documented in the SERFF templates at: http://www.cms.gov/CCIIO/Programs-and-Initiatives/Health-Insurance-Marketplaces/qhp.html#Instructions, Templates and Materials
Enrollment	Enrollment	43184	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall have the functionality to load and update family dental plan data, via the existing plan data load process (SERFF template) for pediatric dental plans.
Enrollment	Enrollment	43185	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall have the functionality to list and maintain family dental plans for consumer portal selection. Shopping page listing of family dental plans requires modification to the existing pediatric dental plan benefit labels, metal tier indicator, and APTC references, displayed on: - Plan Comparison screen - Plan Details screen
Enrollment	Enrollment	43186	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall have the functionality to allow consumers to shop for Medical with embedded pediatric dental plan (10.0), and a family dental plan.
Enrollment	Enrollment	43187	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall provide a link on to a pdf document for details of family dental plans, on the: - Preview Plans page - Plan Comparison page for health plans
Enrollment	Enrollment	43188	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall have the functionality to notify the consumers via onscreen messaging that the family dental plan contains duplicative pediatric dental benefits if they have already chosen a medical plan with embedded pediatric dental.
Enrollment	Enrollment	43189	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall have the functionality to allow a consumer to choose a dental plan at any time (during open enrollment) if plan selection was not completed when a medical plan was chosen.
Enrollment	Enrollment	43190	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall have the functionality to remove the ability to select a dental plan when open enrollment has ended and allow changes only if an SEP is triggered.
Enrollment	Enrollment	43191	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall have the functionality to only allow all children to be added to an adult policy.
Enrollment	Enrollment	43192	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall have the functionality to notify the consumers via onscreen messaging that the consumer may make changes to the plan selection by accessing the 'Change Plans' or 'Report a Change' functionalities within the California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) application
Enrollment	Enrollment	43193	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall have the functionality to notify the consumers via onscreen messaging that the consumer has to make premium payment for coverage to become effective.
Enrollment	Enrollment	43194	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall have the functionality to inform/notify the consumer about the medical carrier names and their embedded dental carrier partner
Enrollment	Enrollment	43195	[Technical Requirement] California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall process family dental plan selection similar to the current process for pediatric dental, in terms of the enrollment transactions on interfaces IND19/IND20.
Enrollment	Enrollment	43198	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall update the business rules for the effective dating of all of the following financial fields in the 834 transactions: gross premium, net premium, member level gross premium, rating area, CSR amount and APTC
Enrollment	Enrollment	44225	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) requires a new test environment be initiated and prepared to support testing and build deployment activities
Enrollment	Enrollment	44533	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall update the end of cycle report to include the financial discrepancies resulting from the financial reconciliation
Enrollment	Enrollment	44534	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall create a new heat map report for financial discrepancies
Enrollment	Enrollment	44535	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall create a new dashboard report for financial discrepancies
Enrollment	Enrollment	45242	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) system shall allow Issuer Enrollment Representatives to view issuer specific enrollment data.
Enrollment	Enrollment	45645	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall add a button to a SAML redirect to the Carrier's Primary Care Provider selection process on the Enrollment pages.
Enrollment	Enrollment	45646	The redirect button shall only display for new enrollments with a \$0 Net Premium
Enrollment	Enrollment	45647	The redirect button shall only display for carriers that have provided a URL for this feature
Enrollment	Enrollment	45648	The redirect button shall stop displaying after a fixed time limit.
Enrollment	Enrollment	46181	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall allow displaying enrollment snapshot modal for the converted enrollment records.
Enrollment	Enrollment	46182	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall convert the point in time data for the legacy 834 EDI triggers.
Enrollment	Enrollment	46183	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall update enrollment snapshot modal to display following fields: Agent Information, Agent Name, Agent License Number, Agency FEIN
Enrollment	Enrollment	46343	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall update the Spanish translation for Change Group Type under Enrollment groups
Enrollment	Enrollment	46344	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall update the QRS Disclaimer language on the Enrollment Plan Shopping screen
Enrollment	Enrollment	46357	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall filter plans for Aetna when the Microsite code is passed to California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) for this carrier
Enrollment	Enrollment	46488	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall display CAPS amount in the Premium/Savings breakdown section on the Enrollment pages only when an individual is evaluated and is determined eligible for the CAPS program.

Appendix A-4 - SOW Exhibit A - System Requirements Specification
(Extracted from CalHEERS RTM)

Category	Sub Category	Req ID	Requirement
Enrollment	Enrollment	46489	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall grant first of current month as the coverage start date when plan shopping is done during the OFL (Over the finish line) period for the open enrollment applications submitted without a QLE.
Enrollment	Enrollment	46490	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall grant first of current month as the coverage start date when plan shopping is done during the OFL (Over the finish line) period for the open enrollment applications submitted without a QLE.
Enrollment	Enrollment	46491	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall send a maintenance transaction for the Subscriber and any applicable dependents who renew into a plan with the current Issuer, along with a member-level termination transaction (coverage end date 12/31) for any dependent who does not renew in the same enrollment group as the current Subscriber.
Enrollment	Enrollment	46494	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall update the benefit design logic for any benefit design changes made for the new year
Enrollment	Enrollment	46495	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall update the Out of Pocket calculator for any benefit design changes made for the new year
Enrollment	Enrollment	46496	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall display the updated Plan Quality Rating Disclaimer text for the specific benefit year.
Enrollment	Enrollment	46497	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall display the updated Plan Quality Rating Disclaimer text for the 2023 benefit year.
Enrollment	Enrollment	46498	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall display the updated Plan Quality Rating Disclaimer text for the 2024 benefit year.
Enrollment	Enrollment	47106	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall filter plans for IEHP when the Microsite code is passed to California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) for this carrier
Enrollment	Enrollment	47108	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall include the county information for the Primary Contact, separately, below the address with a label of - County of Residence.
Enrollment	Enrollment	47109	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall include the primary contact's email address on the Case Overview page.
Enrollment	Enrollment	47110	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall enable and default the checkbox for “Send in 834” in the Enrollment Override page for all reasons except "non-payment" When the user updates the selected reason from “Non-Payment” to any other reason from drop down the checkbox should be enabled and selected to send in 834.
Enrollment	Enrollment	47705	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall restrict users from completing plan selection on the Enrollment Dashboard while Active Manual APS Indicator = "Y" for the consumer.
Enrollment	Enrollment	47706	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall redirect users to the Review Account Updates screen if they attempt to access the Enrollment Dashboard/Plan Selection while the following is true for at least one member on the case: •Active Manual APS Indicator = “Y” •Treatment Indicator = “MAPS1” or “MAPS2”
Enrollment	Enrollment	47707	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall redirect users to the Modified MCT Dashboard for Manual APS if they attempt to access the Enrollment Dashboard form the California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) Portal or attempt to enter the Plan Selection flow on the Enrollment Portal while the following is true for at least one member on the case: •Active Manual APS Indicator = “Y” •Treatment Indicator = “MAPS3”
Enrollment	Enrollment	47708	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) will lift restrictions on the Enrollment Portal for Manual APS process 1, 2, and 3 consumers when the Active Manual APS Indicator is no longer "Y".
Enrollment	Enrollment	47709	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall send the MRC-EC in the 834 EDI transactions when consumer is auto-enrolled into the new Manual APS - Process 3 enrollment.
Enrollment	Enrollment	47890	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall update the Health Preference Page screen for A/B Testing
Enrollment	Enrollment	47891	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall navigate users to both the existing and new Health Preference Page
Enrollment	Enrollment	47892	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall implement a configuration which will enable/disable traffic to either Health Preference Pages
Enrollment	Enrollment	48029	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall generate a cancel transaction to disenroll individuals from the Auto Plan Selection (APS) enrollment if they lose Exchange eligibility before the coverage start date.
Enrollment	Enrollment	48031	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall maintain the same enrollment Coverage Start date when the Change Plan functionality is used prior to the effective date to create a new enrollment.
Enrollment	Enrollment	48246	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall suggest default groupings for CCP-APTC or CCP only consumers under the following plan dependent rules: • Single family policy under one subscriber when all members in the plan meet the plan dependent definition in relation to the subscriber, all members are subsidized, all members are federally recognized AI/AN members, and all members belong to the same CSR eligibility. • Single family policy under one subscriber when all members in the plan meet the plan dependent definition in relation to the subscriber, all members are subsidized, all members are non AI/AN members, and all members belong to the same CSR level (including CS1). • Single family policy under one subscriber when all members in the plan meet the plan dependent definition in relation to the subscriber and all members are eligible for un-subsidized plans.
Enrollment	Enrollment	48247	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall update existing messaging on the enrollment pages regarding enrollment groups.
Enrollment	Enrollment	48248	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall enforce the plan dependent definition rules when consumers are creating custom enrollment groupings and display messaging when those rules are not met.
Enrollment	Enrollment	48249	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall allow over-age dependents to stay in the same enrollment group within the benefit year and will remove them at renewals.
Enrollment	Enrollment	48250	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall have an indicator/flag for enrollees 25 years old or older.
Enrollment	Enrollment	48251	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall display the Disability Indicator Flag history on the Admin Self Service Portal.

Appendix A-4 - SOW Exhibit A - System Requirements Specification
(Extracted from CalHEERS RTM)

Category	Sub Category	Req ID	Requirement
Enrollment	Enrollment	48252	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall have ability for Issuer Enrollment Representatives (IERs) to check and uncheck the Disability Indicator Flag in the Issuer portal for members with active enrollments (Pending/Enrolled).
Enrollment	Enrollment	48253	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall display the Disability Indicator Flag history on the Issuer Portal.
Enrollment	Enrollment	48254	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall consider the Disability Indicator Flag when forming the enrollment groups during future RAC/Renewal flows.
Enrollment	Enrollment	48255	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall consider the following relations to be plan dependents of a subscriber, and only allow plan dependents to enroll in the same Covered CA enrollment group/plan that a subscriber belongs to: • Married spouses • Registered domestic partners • Biological/adopted/step/ certified child under age of 26, including those of Registered Domestic Partners • Disabled adult children of any age (including 26 or above) • Siblings under the age of 21 in a children only enrollment group • Tax dependent parents/In-Law
Enrollment	Enrollment	48256	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) while creating default enrollment groupings and/or allowing custom grouping, shall ensure that the following enrollment rules are followed: • Every member in an enrollment group is a qualified plan dependent relative of the subscriber of the enrollment • Members in an enrollment group are all AI/AN members or they are all Non-AI/AN members • Every member in the enrollment group has the same CSR eligibility • Members in an enrollment group are all subsidized members or they are all Non-subsidized members
Enrollment	Enrollment	48350	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall evaluate the Enhanced CSR amount based on the appropriate benefit year Per Member Per Month(PMPM) computation which will use the rating region, and FPL of the household into consideration, if the Enhanced CSR configuration is turned ON for a benefit year.
Enrollment	Enrollment	48351	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall calculate Enhanced CSR amount using different PMPM amounts for a rating region and Enhanced CS level, and these amounts would be maintained as configurable amounts for a benefit year.
Enrollment	Enrollment	48352	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall allow a configurable percentage of withholding at a CS level in the Enhanced CSR computation.
Enrollment	Enrollment	48353	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall implement the CS levels 7, 8 and 9 in the enrollment module of California Healthcare Eligibility, Enrollment and Retention System (CalHEERS), so that enhanced CSR functionality can be extended to use CS levels.
Enrollment	Enrollment	48412	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall renew members who are between the Current year FPL% of 100 - 259 and enrolled in non – silver plans to target Silver CSR plans as per CSR eligibility by affordability crosswalk batch.
Enrollment	Enrollment	48413	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall stage members who are between the Current year FPL% of 100 - 259 and enrolled in non – silver plans for affordability Crosswalk staging batch.
Enrollment	Enrollment	48414	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall select target silver plan for the affordability Crosswalk population based on the current Issuer and Product type.
Enrollment	Enrollment	48415	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall add a case note indicating that the case was included in the automated Affordability Crosswalk batch process that will indicate if the automated process was successfully able to renew the enrollment or not.
Enrollment	Enrollment	48416	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall send Active renewal indicator for Affordability Crosswalk Population as part of EDI transactions.
Enrollment	Enrollment	48423	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall load the Case Overview page correctly when the user navigates to the page for a case which has an In-progress application for the most recent enrollment year without a prior submitted application for the same enrollment year.
Enrollment	Enrollment	48424	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall collect consent from consumers to allow the carriers to send them text messages
Enrollment	Enrollment	48427	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall update the existing enrollment if user chooses the same plan in a shopping flow during RAC.
Enrollment	Enrollment	48428	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall generate a term transaction for the current year and a cancel transaction for the renewal year if the consumer ends coverage for the current year after being renewed.
Enrollment	Enrollment	48429	After the renewal transaction has been cancelled, California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall generate a new add transaction for the next benefit year if the consumer wishes to retain coverage for the renewal year.
Enrollment	Enrollment	48448	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall generate a cancel transaction with the MRC 07 termination of Benefits when individuals are disenrolled from the Auto Plan Selection (APS - New) enrollment if they are moving back to MAGI MC before the coverage start date.
Enrollment	Enrollment	48532	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall display all plan benefit attributes used to calculate the estimated total cost expense within the Estimated Total Cost section. SSJ: See edits to BR1. Since (b) is referring to display on the portal, I have updated the attribute labels to match what was sent to CLH/DLT/HCD for BR1.6 to update the labels which includes the request to group outpatient services, inpatient services, and prescription drugs.
Enrollment	Enrollment	48533	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall not display any plan benefit attributes used to calculate the estimated total cost expense when that cost amount equals \$0. SSJ: See edits to BR1. Since (b) is referring to display on the portal, I have updated the attribute labels to match what was sent to CLH/DLT/HCD for BR1.6 to update the labels which includes the request to group outpatient services, inpatient services, and prescription drugs.

Category	Sub Category	Req ID	Requirement
Enrollment	Enrollment	48534	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall update portal design documentation to reference how the estimated total cost expense is calculated and what documents to refer to for full context and details. a. Display rules for the Estimated Total Cost section needs more detail and to cite the other functional design documents used to display/calculate these values in PCAP. b. Enrollment design documents to review are WPS/CM 46.01 - Plan Shopping/Plan Details, but any and all related docs should be captured and reviewed for clarity on how the portal displays. c. This BR is doc update only. d. No test or Code update Required.
Enrollment	Enrollment	48535	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall update the labels of each plan benefit attribute used in the estimated total cost calculation. SSJ: See edits to BR1. Since (b) is referring to display on the portal, I have updated the attribute labels to match what was sent to CLH/HLT/HCD for BR1.6 to update the labels which includes the request to group outpatient services, inpatient services, and prescription drugs.
Enrollment	Enrollment	48536	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall make updates to the health plan benefit attributes to align with the 2025 Plan Benefit Design changes. a. For the Bronze benefit design update for 2025 where deductible no longer applies for certain benefits. b. This is a Test only BR. No Doc update or Code update needed.
Enrollment	Enrollment	48537	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall add and display "Gender-affirming care" details for both "in-network cost" and "out-of-network cost" on the Plan Details page.
Enrollment	Enrollment	48538	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall display a tooltip to describe "Gender-affirming care" services and helpful information.
Enrollment	Enrollment - SHOP		
Enrollment	Enrollment - SHOP	44247	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall provide the functionality to present the employer or employee the detailed comparisons of qualified health plans filtered on their plan preferences.
Enrollment	Enrollment - SHOP	44248	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall provide the functionality highlight any benefit gaps in a plan as compared to other selected plans .
Enrollment	Enrollment - SHOP	44249	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall highlight any generous provisions for each plan selected for comparison.
Enrollment	Enrollment - SHOP	44796	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall provide the functionality to display a detailed quality and cost comparison of all available health plans based on information (e.g. location, gender, age, smoking) about employees and employee dependents listed in the employee roster.
Enrollment	Enrollment Dashboard		
Enrollment	Enrollment Dashboard	41969	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall allow the enrollment group to change plans on click of "Change Plans" on the "Shop for Health Plans" page. The following information and features will be displayed: -Title -Static message -Feature to Change Plan -Disenrollment static message -Feature to select applicable household members to disenroll -Feature to Continue
Enrollment	Enrollment Dashboard	41970	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall redirect the user to the "Confirm Your Plan Selection" page with the selected enrollment group and allow them to change their plans on click of "Back to Shopping".
Enrollment	Enrollment Dashboard	41971	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall disenroll all selected members on the "Change Plan" feature on click of "Continue".
Enrollment	Enrollment Dashboard	41972	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall display a Confirmation Details feature for the members who have been disenrolled stating the following details: - Member Names who have been disenrolled - Static message explaining the disenrollment details - Feature to "Continue"
Enrollment	Enrollment Dashboard	41973	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall distribute APTC amounts for the household amongst the groups based on the proportion of the rate bands for each APTC-eligible member in the household.
Enrollment	Enrollment Dashboard	41974	In the event that the eligible APTC amount exceeds the EHB premium amount for the enrolled group, California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall carry forward any surplus APTC after EHB Premiums, and allocate that to the Eligible unenrolled groups.
Enrollment	Enrollment Dashboard	41975	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall only allocate APTC amounts for member(s) of the household that are enrolled in non-catastrophic plans.
Enrollment	Enrollment Dashboard	41976	In the event that the enrollment group decides not to apply the entire APTC amount, California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall not apply the remaining balance of APTC amount to other groups.
Enrollment	Enrollment Dashboard	41977	In the event that an enrollment group disenrolls from a plan, California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall reallocate the unutilized APTC to unenrolled APTC-eligible members.
Enrollment	Enrollment Dashboard	41978	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall redistribute APTC for the following situations: - When there is CS level change - If the user chooses to shop in a group composition that is different from the existing group
Enrollment	Enrollment Dashboard	41979	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall redistribute APTC if the household reports a change in DOB.
Enrollment	Enrollment Dashboard	41980	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall redistribute APTC when a new member is added to the household.
Enrollment	Enrollment Dashboard	41981	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall redistribute APTC when a member is removed from the household.

Category	Sub Category	Req ID	Requirement
Enrollment	Enrollment Dashboard	41982	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall calculate and apply the individual level APTC amounts during the plan selection/enrollment process using the following: - Premium age ratio - Existing APTC calculation logic
Enrollment	Enrollment Dashboard	41983	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall apply APTC and State CAPS/CA Premium Credit amount for the consumers who fall in the below scenarios: 1. HH is quoted for State CAPS/CA Premium Credit 2. HH is quoted for both APTC and State CAPS/CA Premium Credit
Enrollment	Enrollment Dashboard	41984	In the event that the eligible CAPS amount exceeds the EHB premium amount for the enrolled group, California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall carry forward any surplus CAPS and allocate that to the other Eligible unenrolled groups.
Enrollment	Enrollment Dashboard	41985	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall only allocate CAPS amounts for member(s) of the household that are enrolled in non-catastrophic plans.
Enrollment	Enrollment Dashboard	41986	In the event where an APTC and CAPS eligible household is shopping in a single enrollment group, California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall apply subsidies in the following order: 1. Non-Hyde Abortion Subsidy/CA Premium Credit 2. Max APTC amount 3. CAPS
Enrollment	Enrollment Dashboard	41987	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall redistribute APTC/CAPS amounts when there is delayed plan selection made by the consumer.
Enrollment	Enrollment Dashboard	41988	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) system shall continue to support the existing Timeshifter functionality for the new enrollment module.
Enrollment	Enrollment Dashboard	41989	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall confirm that 834 EDI transaction files contain the current accurate system date time stamp information about enrollment events
Enrollment	Enrollment Dashboard	41990	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall send the CR 189474 Termination Transaction details to the old carrier when a consumer with a 2020 enrollment renews coverage into a plan with a different carrier for 2021.
Enrollment	Enrollment Dashboard	41991	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall confirm the Net Premium on the Health Plan Shopping will be always in match with the Gross Premium - the (APTC+ CA Premium Credit Amount + CA Premium Subsidy (If applicable)).
Enrollment	Enrollment Dashboard	41992	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall confirm that updated/modified OE extension dates are propagated/transferred to new enrollment module.
Enrollment	Enrollment Dashboard	41994	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) enrollment module shall include all functional changes documented CR 189473 - Microsite for Bright HealthCare
Enrollment	Enrollment Dashboard	41997	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) enrollment module shall include all functional changes documented CR 188570 - APTC Calculation with prior CCP only benefits.
Enrollment	Enrollment Dashboard	42000	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) enrollment module shall include all functional changes documented CR 174936 - Addition of federally recognized tribes in California Healthcare Eligibility, Enrollment and Retention System (CalHEERS).
Enrollment	Enrollment Dashboard	42001	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) enrollment module shall include all functional changes documented CR 160531 - Medi-Cal Transition Auto-Enrollment per SB260 Part I.
Enrollment	Enrollment Dashboard	42002	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) enrollment module shall include all functional changes documented CR 122823 - Time shifter Feature in California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) for Enrollment Screens.
Enrollment	Enrollment Dashboard	42009	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) enrollment module shall include all functional changes documented CR 179136 - Enroller Portal Alerts - Phase II.
Enrollment	Enrollment Dashboard	42010	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) enrollment module shall include all functional changes documented CR 190956 - State-Level Cost Sharing Reduction program.
Enrollment	Enrollment Dashboard	42011	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall allow the user to access the "Pay Now" option from the following points of entry: - Plan Confirmation Page - My Enrollments Page - View My Plan Details Page
Enrollment	Enrollment Dashboard	42012	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall display a message informing the user that they will be navigated to a Payment Portal in order to proceed with their payment
Enrollment	Enrollment Dashboard	42013	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall redirect the user to the Carrier payment page in a new window upon selecting "Proceed to Payment"
Enrollment	Enrollment Dashboard	42014	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall create the SAML request for each policy in an acceptable format to send to the Carrier site upon selection of "Proceed to Payment" allowing user to complete their payment.

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(Extracted from CalHEERS RTM)

Category	Sub Category	Req ID	Requirement
Enrollment		42015	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall transmit the following fields to the Carrier over HTTP Post: -PaymentTransactionId -QHPPlanId -TotalPremiumOwed -TotalPremiumAmount -APTCAmount -ProposedCoverageEffectiveDate -CaseID -SubscriberID -Language -ResponsibleParty (FirstName, Middle Name {Optional}, Last Name, Suffix Name {Optional}, StreetName1, StreetName2 {Optional}, City Name, State, ZipCode, Email Address {Optional}) -Member Information (FirstName, Last Name, Middle Name {Optional}, Relationship Code, Age, MemberID, TotalMemberPremiumAmount) -ResidenceZipCode -ResidenceCountyCode
	Enrollment Dashboard		
Enrollment	Enrollment Dashboard	42016	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall generate a new PaymentTransactionID upon every click of Pay Now
Enrollment	Enrollment Dashboard	42017	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall confirm Individual's information is secured through SAML 2.0 with HTTPS Post Binding
Enrollment	Enrollment Dashboard	42018	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall digitally sign the request before it is pushed to the individual's browser.
Enrollment		42019	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall display the following when user proceeds to complete health plan selection {Active Renewals}: -Text informing user to renew current enrollment or change plans for enrollment groups - Functionality to shop in new groups - Health Enrollment Groups from the Previous Year <# of members> - APTC amounts for the following Enrollment year - Functionality to Renew or Change Plans
	Enrollment Dashboard		
Enrollment	Enrollment Dashboard	42020	If the user would like to make changes to enrollment groupings, California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall allow the user to change plans for the remaining unenrolled members by clicking on the functionality to shop in new groups.
Enrollment	General Requirement		
Enrollment	General Requirement	39538	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall display the State Subsidy amount as a separate line in addition to the APTC amount every place where the APTC amount is displayed if the consumer is eligible or conditionally eligible for State Subsidy.
Enrollment	General Requirement	39539	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall display the net premium amount on the plan tiles (Premium minus Federal APTC, minus State Subsidy).
Enrollment	General Requirement	39540	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall require that consumers apply the maximum amount of APTC before they can apply State Subsidy.
Enrollment	General Requirement	39541	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall not apply State Subsidy to a household when the premium amount is less than or equal to the APTC amount.
Enrollment	General Requirement	39542	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) must require that the total amount received between APTC and State Subsidy must not be greater than the household premium amount.
Enrollment	General Requirement	39543	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall generate a monthly and annual file for the carriers that includes the State Subsidy information.
Enrollment	General Requirement	39544	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall recalculate the remaining State Subsidy after a mid-year Report a Change (RAC).
Enrollment	General Requirement	39545	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall update the enrollment sync nightly batch to include the State Subsidy.
Enrollment	General Requirement	39558	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall add the State Subsidy amount and the State Subsidy Effective Start Date to the 834.
Enrollment	General Requirement	39563	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall prorate the State Subsidy amount using the same methodology as APTC and premium when there are partial months of coverage.
Enrollment	General Requirement	39571	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall add the State Subsidy to the Book of Business extract for Agents and Assistors (CEC and PBE).
Enrollment	General Requirement	39595	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall insert additional tab to Consumer Assistance Portal (CAP) to show high level application information for available years
Enrollment	General Requirement	39596	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall move the action override button from member impersonation to CAP
Enrollment	General Requirement	39597	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall be persisting premium paid through date and allow admins to update this date through GI Enrollment Edit Page
Enrollment	General Requirement	39598	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall update SEP consumer messaging for adding a member, removing a member, and income change on enrollment dashboard page.
Enrollment	General Requirement	39604	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall add State Subsidy information to the Issuer Portal.
Enrollment	General Requirement	39605	Enter requirement text.
Enrollment	General Requirement	41384	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall only allow effectuation through Recon when the consumer has completed the Opt In process to keep the auto-selected \$0 Net Premium plan.
Enrollment	General Requirement	41386	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall track the auto enrollment at an individual level and enrollment level and differentiate between auto enrollments into new or existing enrollment groups.

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(Extracted from CalHEERS RTM)

Category	Sub Category	Req ID	Requirement
Enrollment	General Requirement	41387	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall request and consume the following information from GI in real time when a consumer is auto-enrolled: -Auto-Enrollment flag at an individual level indicating if consumer is auto-enrolled in new or existing enrollment groups. -Auto-Enrollment plan details including Enrollment Status, Enrollment ID, Coverage Start Date, Plan Name, Carrier, Metal Tier, Premium Amount, Names of the Individuals Enrolled. -List of carriers available to consumer based on the County of Responsibility (COR) -Primary Care Visits Cost, Generic Drugs Cost
Enrollment		41390	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall add the Attestation Indicator as a new column to Weekly Audit file.
Enrollment	General Requirement	42990	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) must enable the terminate participation link for prior year enrollments for ADMIN only whether or not an enrollment exists for current year.
Enrollment	General Requirement	44522	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall update the preference question language in the Medical Usage and Prescription Usage Pages
Enrollment	General Requirement	47087	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall include the CSR Level in the premium history table.
Enrollment	General Requirement	47088	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall include the plan name in the premium history table.
Enrollment	General Requirement	47089	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall make the Premium history table viewable in it's entirety without the need to scroll (left<-->right).
Enrollment	General Requirement	47090	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall make the enrollment change log viewable in it's entirety without the need to scroll (left<-->right).
Enrollment	General Requirement	47091	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall make the Enrollment change log viewable below the enrollment tile without the need to click a link.
Enrollment	General Requirement	47092	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall make the Premium Table viewable on the same page as the enrollment tile without the need to click a link to go to another page.
Enrollment	General Requirement	47093	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall display the deductible in the below format when both medical and drug deductible amounts are zero: "\$0/year" The same format should apply when there is an integrated deductible amount is zero.
Enrollment		47094	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall realign the position of the below fields within the Enrollment page providing the users with a better shopping experience. 1.Case ID 2.Member's Delegate 3.Manage Delegates 4.Case Summary 5.Enrollment Dashboard 6.Transaction ID 7.CMS Plan ID 8.Current CSR Level
Enrollment	General Requirement	47095	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall move the Other Information section to the same page as the enrollment tile without the need to click a link to go to another page.
Enrollment	General Requirement	47096	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall rename the label Agent TPA number to Agent License number within the Other Information section
Enrollment	General Requirement	47097	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall rename the Header Labels in Premium and APTC Information table (Health) and Premium History table (Dental) to acquire more screen space.
Enrollment	General Requirement	47437	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall prevent the creation of an enrollment that will cause an overlap with Medi-Cal eligibility for the same consumer.
Enrollment	General Requirement	47438	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall allow Enrollers to view the CSR eligibility history in the Enrollment portal.
Enrollment	General Requirement	47439	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall allow the functionality for an Admin to Override the Dental Rules for the PCAP module to allow renewals for Dental only enrollments.
Enrollment	General Requirement	47440	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) must limit " renewal" into the same plan as the previous benefit year when enrollment is completed before renewal closure.
Enrollment	General Requirement	47441	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) must limit enrollment into the same plan as the previous benefit year when enrolling after the renewal closure batch.
Enrollment	General Requirement	47442	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall update the Admin Portal Page to include the enrollment year in the phrase "There are no health enrollments for [year] yet."
Enrollment	General Requirement	47443	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall update the verbiage for dental attestation on the Dental Plan confirmation page.
Enrollment	General Requirement	47444	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall navigate user to Enrollment Dashboard when the user selects "Enrollments" tab from the local nav page.
Enrollment	General Requirement	47445	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall provide the default "You Have Not Submitted an Application" modal when a user does not have an application and enrollment for the current year.
Enrollment	General Requirement	47529	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall allow the Issuer Enrollment Representative to search for all enrollments associated with a Household Case ID across any Enrollment year the consumer was enrolled in a plan.
Enrollment	General Requirement	47530	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall allow an Issuer Enrollment Representative to search for an Enrollment ID across any Enrollment year the consumer was enrolled in a plan.
Enrollment	General Requirement	47531	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall display the results for cases that are closed as duplicates when an Issuer Enrollment Representative tries to search for the case.

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(Extracted from CalHEERS RTM)

Category	Sub Category	Req ID	Requirement
Enrollment	General Requirement	47532	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall display the current CSR level and CSR History in the Issuer Enrollment Portal.
Enrollment	General Requirement	47533	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall display the CSR amount for each applicable month in the Premium and APTC grid.
Enrollment	General Requirement	47534	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall display the header as Enrollees in the Enrollees Table.
Enrollment	General Requirement	47535	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall have the ability to show enrollment history with the following details: Transaction Date, Transaction Type, Transaction Reason, Initiated By, EDI File Name, TA1 File Name, TA1 Date, TA1 Status, 999 Transaction Date, 999 File Name, 999 Status. Initiated By shall display the California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) user role who triggered the enrollment transaction. Transaction date shall display the datetime when the user submitted the change.
Enrollment	General Requirement	47536	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall display the Transaction Type as "Addition" for transaction type code 021.
Enrollment	General Requirement	47537	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall display the Transaction Reason as "Re-enrollment" for maintenance reason code 41.
Enrollment	General Requirement	47538	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall display the Rating Area, Rating Area Effective Date, Home Address, Billing Address in the Issuer Enrollment Portal.
Enrollment	General Requirement	47539	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall allow Issuer Admins to search for an Issuer Representative and/or Issuer Enrollment Representative on the Manage Representatives page.
Enrollment	General Requirement	47540	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall restrict Issuer Admins from registering Issuer Representatives and/or Issuer Enrollment Representatives for an Issuer if they already exist in California Healthcare Eligibility, Enrollment and Retention System (CalHEERS).
Enrollment	General Requirement	47541	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) will allow Issuer Enrollment Rep and Issuer Rep accounts to be created with the first name, last name, DOB, email address, and phone number when the HIOS IDs are for different issuers.
Enrollment	General Requirement	47542	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall mandate entries of 2 verification methods (OTP Email and Security Questions) during account registration for Issuer Enrollment Representatives (IERs) and Issuer Representatives.
Enrollment	General Requirement	47543	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall match the HIOS ID, Role, First Name, Last Name, delegation code, Email Address/Phone number, and business legal name against the Issuer Enrollment Rep/Issuer Rep portals during the Account creation process. Users will not be allowed to create duplicate accounts if matches are found in the existing California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) system.
Enrollment	General Requirement	47544	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall allow the Issuer Enrollment Reps and Issuer Reps to update the First Name, Last Name, and Phone # on the My Profile Page.
Enrollment	General Requirement	47545	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall update the Add Issuer Representative page to indicate "Enrollment Representative" as the first and default selection.
Enrollment	General Requirement	47546	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall update the Plan Search page to default Plan Year in the search criteria elements to the latest year available in the dropdown.
Enrollment	General Requirement	47547	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall send the CSR AMT field in the 2750 Loop to communicate CSR Amount (if a CSR plan is selected or a CSR variant change occurs).
Enrollment	General Requirement	47548	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall display the Premium and APTC Grid with the ability for the Carrier to export the information.
Enrollment	General Requirement	47549	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall display the Enrollment History Panel with the ability for the Carrier to export the information.
Enrollment	General Requirement	47550	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall provide the capability to search for a list of comma-separated case IDs, Enrollment IDs, or Subscriber IDs and export the results.
Enrollment	General Requirement	47551	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall provide the capability to export Search results up to a maximum of 2000 records at a time.
Enrollment	General Requirement	47552	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall provide the capability to download an export request for search results greater than 2000 records.
Enrollment	General Requirement	47553	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall display appropriate messaging to inform Carriers that there are additional search results that can be exported, when available.
Enrollment	General Requirement	47554	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall allow the filters to be continued to the next pages when Issuer Admin uses the Pagination on Manage Representative page.
Enrollment	General Requirement	47555	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall allow the filters to be continued to the page when Issuer Admin navigates back to the Manage Representative page.
Enrollment	General Requirement	47556	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall provide export list functionality to download the list of Issuer Enrollment Reps on Manage Representative Page on Issuer Admin Portal.
Enrollment	General Requirement	47557	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall allow the Issuer Admin to export all the Issuer Enrollment Reps and Issuer Rep details.
Enrollment	General Requirement	47558	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall allow the Issuer Admin to export Issuer Enrollment Rep and Issuer Rep details for a specific Issuer.
Enrollment	General Requirement	47559	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall separate the "Name" column into two columns: First Name and Last Name.
Enrollment	General Requirement	47958	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall limit the application of the subsidies from Strike Lockout eligibility to the enrollment to no more than the gross premium less the California Premium Credit, maximum eligible APTC (regardless of the applied amount), and maximum eligible CAPS (when active).
Enrollment	General Requirement	47959	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall utilize the subsidies in the following order: California Premium Credit (CAPC), APTC, CAPS (when active), and Strike Lockout benefit
Enrollment	General Requirement	47960	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall allow any surplus Strike Lockout benefit carry over from one enrollment group to another unenrolled group.
Enrollment	General Requirement	47961	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall not apply Strike Lockout benefit to a household when the premium amount after considering the Non Hyde Abortion portion of premium to every quoted member, is less than or equal to the maximum eligible APTC amount.

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Category	Sub Category	Req ID	Requirement
Enrollment	General Requirement	47962	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall not apply Strike Lockout benefit to cover the remaining premium if the consumer choses to not utilize the full APTC amount.
Enrollment	General Requirement	47963	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall not allow users to reduce the Strike Lockout benefit that can be applied to the enrollment using the Change APTC Functionality on Enrollment Dashboard or Confirm your Plan Page.
Enrollment	General Requirement	47964	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) must require that the total amount received between APTC, CAPS amount and Strike Lockout benefit must not be greater than the household premium amount after considering the Non Hyde Abortion portion of premium to every quoted member.
Enrollment	General Requirement	47965	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall utilize the existing Age Band Ratio logic that is used in current APTC/CAPS distribution for the Strike Lockout benefit
Enrollment	General Requirement	47966	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall update the Health Plan Tab under the Enrollment Dashboard Module to display "Strike Lockout Benefit" as an independent line entity under the Savings section and add the subsidy amount to the Savings total calculation.
Enrollment	General Requirement	47967	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall update the PCAP screen in the Enrollment History Tab under the Enrollment Module to display "Strike Lockout Benefit" as an independent line entity under the Savings section and add the subsidy amount to the Savings Total calculation
Enrollment	General Requirement	47968	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall update various screens in the "Plan Shopping" workflow to display "Strike Lockout Benefit" as an independent line entity under the Savings section and add the subsidy amount to the Savings total calculation.
Enrollment	General Requirement	47969	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall update the "Choose a Health plan" screen in the "Plan Shopping" workflow to include the Strike Lockout Benefit monthly amount in the total savings calculation in the Banner Message
Enrollment	General Requirement	47970	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall update the "Health Plan Details" screen in the "Plan Shopping" workflow to display "Strike Lockout Benefit" as an independent line entity under the Savings section and adding the subsidy amount to the Savings total calculation in the premium breakdown.
Enrollment	General Requirement	47971	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall update the "Confirm your plan" screen in the "Plan Shopping" workflow to display "Strike Lockout Benefit" as an independent line entity under the Savings section and adding the subsidy amount to the Savings total calculation in the premium breakdown.
Enrollment	General Requirement	47972	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall update the "Plan Confirmation and Payment" screen in the "Plan Shopping" workflow to display "Strike Lockout Benefit" as an independent line entity under the Savings section and adding the subsidy amount to the Savings total calculation in the premium breakdown.
Enrollment	General Requirement	47973	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall update the "Adjust Advance Premium Tax Credit (APTC)" screen in the "Plan Shopping" workflow to display "Strike Lockout Benefit" as an independent line entity under the Savings section and adding the subsidy amount to the Savings total calculation in the premium breakdown.
Enrollment	General Requirement	47974	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall use the State Subsidy fields on the 834 to communicate with the carriers regarding the Strike Lockout benefit amount
Enrollment	General Requirement	47975	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall continue to display State Subsidy values on the 834 transactions when SLS configuration is OFF or household does not meet the SLS criteria
Enrollment	General Requirement	47976	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall consolidate the State Subsidy and SLS amount on current State Subsidy values on the 834 transactions when SLS configuration is ON and household does meet the SLS criteria
Enrollment	General Requirement	47984	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall use existing State Subsidy fields in the REM/Dispute to be populated with the SLS subsidy values from the Enrollment Database
Enrollment	General Requirement	47985	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall change the REM Live load process to populate the state subsidy fields using the new SLS subsidy fields from Enrollment database.
Enrollment	General Requirement	47986	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall change the Dispute Live load process to populate the state subsidy fields using the new SLS subsidy fields from Enrollment database
Enrollment	General Requirement	47994	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall update the “Premium and APTC Info” table in Admin Portal PCAP Screen to include two columns for "Max Strike Lockout Benefit" and "Applied Strike Lockout Benefit"
Enrollment	General Requirement	47995	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall update the “Premium and APTC Grid” in the Issuer (Carrier) PCAP Screen to include "Strike Lockout Benefit"
Enrollment	General Requirement	48003	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall update the Export file from the Premium and APTC Grid to include a column for Strike Lockout Subsidy in the Issuer portal.
Enrollment	General Requirement	48004	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall update the Enrollment Details screen in the Issuer Portal to display the Strike Lockout Benefit in the Savings Breakdown.
Enrollment	General Requirement	48005	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall update the Admin Portal "Change Enrollment Details" Page to include the "Group Max Strike Lockout Benefit" & "Applied Strike Lockout Benefit" Columns to the Premium & APTC Table and make the two columns editable by admins similar to APTC and CAPS
Enrollment	General Requirement	48006	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall update the Admin Portal "Recreate Health Enrollment" Details page to add "CAPS Amount" and "Strike Lockout Benefit Amount" similar to existing APTC Field
Enrollment	General Requirement	48007	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall update the Export file from the Enrollment Search screen (Bulk search) to include columns for Strike Lockout Subsidy amount and effective date in the Issuer portal.
Enrollment	General Requirement	48361	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall update the Weekly Audit File column labeled CSR Credit Net Amount” to align with the field name in the 834 EDI.
Enrollment	General Requirement	48405	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall display messaging to consumers that their dental only enrollment will be passively renewed for cases with dental only enrollments.
Enrollment	General Requirement	48406	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall display previously enrolled members, now receiving MC/MCAP/CCHIP or no longer eligible for any other reason, on the Enrollment Dashboard in the respective groups after completing the active renewal submission.
Enrollment	General Requirement	48407	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall display messaging to members that cannot shop for dental plans due to not having chosen a health plan section in the Intake/RAC/Renewal flows.

Appendix A-4 - SOW Exhibit A - System Requirements Specification
(Extracted from CalHEERS RTM)

OTSI CalHEERS RFP #73040873 Addendum 1
October 31, 2025

Category	Sub Category	Req ID	Requirement
Enrollment	General Requirement	48409	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall update the benefit design logic for any benefit design changes made for the benefit year 2025.
Enrollment	General Requirement	48410	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall update the QRS score and QRS disclaimer text on the Plan Tile and Plan Detail page for the benefit year 2025.
Enrollment	General Requirement	48411	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall update the Out of Pocket calculator for any benefit design changes made for the benefit year 2025.
Enrollment	General Requirement	48569	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall update the filtering logic for plan shopping for an intake/RAC/Renewal case with CS06 eligibility to filter out Bronze plans if "Low Premium" has been selected as a preference filter.
Enrollment	General Requirement	49119	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall suppress the Confirmation Date segment (DTP*543) and Paid through date (DTP*343) segment in all Outbound EDI transactions.
Enrollment	General Requirement	49227	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall include the Enroller's information on the generated take away page(s) when applicable for logged-in users (Enrollers) with an account for the Anonymous Shop and Compare Flow.
Enrollment	General Requirement	49228	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall update the Enroller's information on the generated take away page(s) when applicable for logged-in users (Enrollers) when plan shopping through Enrollment Dashboard flow.
Enrollment	Health & Dental Plan Shopping		
Enrollment	Health & Dental Plan Shopping	41838	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall include and display the following functionalities for dental services based on information coming SERFF 1. Section header for the name of service 2. List of sub-categories for the service 3. Coverage information for each service for in-network providers will be populated based on information from SERFF
Enrollment	Health & Dental Plan Shopping	41840	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) have a Shopping Cart section/screen to view the Health and Dental Plans confirmed by the user to be added to the cart during Shop & Compare Flow.
Enrollment	Health & Dental Plan Shopping	41842	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) Shopping Cart shall include the following sections with details: 1. Health Plan section/details 2. Dental Plan section/details 3. Total Cart Section
Enrollment	Health & Dental Plan Shopping	41843	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) Shopping Cart shall display a below details in Health Plan section. The section shall include the following items: 1. Name and Logo of the provider 2. Health Plan Category/Type (ex: Platinum 90 EPO) 3. Coverage Start Date 4. Additional details about: Monthly Premium, Monthly Federal Tax Credit, Monthly CA Premium Credit, and Net Monthly Premium.
Enrollment	Health & Dental Plan Shopping	41844	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) Shopping Cart screen shall display a preview of Dental Plan details. The preview details shall include the following items: 1. Name and Logo of the provider 2. Dental Plan Category/Type (ex: Family Dental HMO) 3. Coverage Start Date 4. Additional details about: Monthly Dental and Net Monthly Premium.
Enrollment	Health & Dental Plan Shopping	41845	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) Shopping Cart shall allow the user to view the plan specific details by navigating to the plan details from Health and Dental plan sections.
Enrollment	Health & Dental Plan Shopping	41846	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall allow a user to remove the health and/or dental plans selected.
Enrollment	Health & Dental Plan Shopping	41847	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) Shopping Cart screen/section shall display cart total monthly cost which includes the following: 1. Net Health Monthly Premium 2. Net Dental Monthly Premium 3. Total Monthly Premium
Enrollment	Health & Dental Plan Shopping	41848	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) Shopping Cart screen shall have Apply Now feature.
Enrollment	Health & Dental Plan Shopping	41849	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) Shopping Cart screen shall provide provision for the user to navigate back to the plan shopping page.
Enrollment	Health & Dental Plan Shopping	41850	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) Shopping Cart screen shall include a message and back navigation to the Shopping cart screen when the shopping cart is empty.
Enrollment	Health & Dental Plan Shopping	41851	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall display a banner/message on the Shop and Compare page indicating that UI lock changes are not applied when eligibility is determined using Shop and Compare tool if the coverage year is 2021.
Enrollment	Health & Dental Plan Shopping	41852	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall not display this banner/text if the coverage year is 2022 and beyond.
Enrollment	Health & Dental Plan Shopping	41853	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall confirm the Net Premium on the Health Plan Shopping will be always in match with the Gross Premium - the (APTC + CA Premium Credit Amount + CA Premium Subsidy (if applicable)).
Enrollment	Health & Dental Plan Shopping	41854	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) - SHOP and Compare functionality will refer the most recent SBC_UCM_ID and SBC_DOC_NAME while showing details for the Health and Dental Plans in their respective details page.

Category	Sub Category	Req ID	Requirement
Enrollment	Health & Dental Plan Shopping	41855	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall exclude the Non Hyde Abortion portion of premium from the Benchmark Premium amount when calculating subsidies in Shop & Compare Anonymous flow.
Enrollment	Health & Dental Plan Shopping	41856	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) enrollment module shall include all the functional changes documented CR 165044- Changing Shop & Compare Defaults to Reduce Choice Errors for Silver 87- and Silver 94-eligible consumers from Release 22.6
Enrollment	Health & Dental Plan Shopping	41857	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall display the following navigation options in the Enrollment Dashboard: -My Enrollment Dashboard -My Eligibility History -My Enrollments -My Delegates -Appeals Information -My Account Home
Enrollment	Health & Dental Plan Shopping	41858	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall display the following static message on the My Enrollment Dashboard: -Welcome, <Primary Contact Name>
Enrollment	Health & Dental Plan Shopping	41859	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall display the following summary sections on the My Enrollment Dashboard page: -Warning Message -Next Steps Section -Your Application Status -Your Household Eligibility. -Health Plans -Dental Plans
Enrollment	Health & Dental Plan Shopping	41860	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS)-My Enrollment Dashboard shall display warning message/indicator regarding the number of days left to enroll for changes to the Enrollment application.
Enrollment	Health & Dental Plan Shopping	41861	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) My Enrollment Dashboard Next Steps section will provide a dynamic verbiage for the consumer's next steps.
Enrollment	Health & Dental Plan Shopping	41862	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall display a button to continue on to "Next Steps" on the My Enrollment Dashboard based on the enrollment period and application status.
Enrollment	Health & Dental Plan Shopping	41863	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall display the following feature on the My Enrollment Dashboard in the "Next Steps" section based on the enrollment period and application status: -"Start New Application"
Enrollment	Health & Dental Plan Shopping	41864	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall display the following feature on the My Enrollment Dashboard in the "Next Steps" section based on the enrollment period and application status: -"Report Life Event and Shop"
Enrollment	Health & Dental Plan Shopping	41865	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall display the following feature on the My Enrollment Dashboard in the "Next Steps" section based on the enrollment period and application status: -"Shop for Plans"
Enrollment	Health & Dental Plan Shopping	41866	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall display the following feature on the My Enrollment Dashboard in the "Next Steps" section based on the enrollment period and application status: -"Confirm Event and Shop"
Enrollment	Health & Dental Plan Shopping	41867	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall display the following feature on the My Enrollment Dashboard in the "Next Steps" section based on the enrollment period and application status: -"Provide Additional Information"
Enrollment	Health & Dental Plan Shopping	41868	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall display the following feature on the My Enrollment Dashboard in the "Next Steps" section based on the enrollment period and application status: -"Confirm Event and Finalize Plan"
Enrollment	Health & Dental Plan Shopping	41869	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall display the following feature on the My Enrollment Dashboard in the "Next Steps" section based on the enrollment period and application status: -"Finalize Plans"
Enrollment	Health & Dental Plan Shopping	41870	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall display the following feature on the My Enrollment Dashboard in the "Next Steps" section based on the enrollment period and application status: -"Continue Shopping"
Enrollment	Health & Dental Plan Shopping	41871	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall display the following feature on the My Enrollment Dashboard in the "Next Steps" section based on the enrollment period and application status: -"Change Plans"
Enrollment	Health & Dental Plan Shopping	41872	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall display the following feature on the My Enrollment Dashboard in the "Next Steps" section based on the enrollment period and application status: -"Report a Change"

Category	Sub Category	Req ID	Requirement
Enrollment	Health & Dental Plan Shopping	41873	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall display the following information in the "Your Application Status" Overview/section: -Application Year -Case ID -Total HH Members Enrolled -HH Members -Application Status -Feature to view "Eligibility Details" -Feature to "Start Application"
Enrollment	Health & Dental Plan Shopping	41874	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall display the following information in the "Your Household Eligibility" Overview/Section: -Household Members Name {AI/AN, Medi-Cal Eligible} -APTC per month -California Premium Credit per month -CSR eligibility -Feature to "View Details" -Feature to "Report a Change"
Enrollment	Health & Dental Plan Shopping	41875	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall display the following information in the "Your Health Plans" and "Your Dental Plans" Overview/Section: Your Health Plans -Health Plan Details -Total HH Members Enrolled -HH Members {Member Name} -Status of Enrollment -Feature to View Details Your Dental Plans -Dental Plan Details -Total HH Members Enrolled -HH Members {Member Name} -Status of Enrollment -Feature to View Details
Enrollment	Health & Dental Plan Shopping	41876	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) -My Enrollment Dashboard shall allow the user to switch between active applications of two different enrollment years.
Enrollment	Health & Dental Plan Shopping	41877	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall display the current and past application details on the My Eligibility History page.
Enrollment	Health & Dental Plan Shopping	41878	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall allow the user to view the detailed Eligibility Results Summary page for an application on click of "View Eligibility".
Enrollment	Health & Dental Plan Shopping	41879	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall navigate the user to the "My Enrollments" page when user clicks on the "View Your Plan Details" option from "My Eligibility History".
Enrollment	Health & Dental Plan Shopping	41880	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall provide users the ability to Adjust the Premium Tax Credit amount that will be applied to their enrollment. The screen should display the following details: - Information on APTC qualification amounts - Explanation on how to use tax credits - Monthly Tax Slider to allow users to modify APTC amounts. - Explanation on how the amount was calculated
Enrollment	Health & Dental Plan Shopping	41881	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall display a functionality on the My Plan Details page for the user to "Cancel Coverage/Disenroll" or "Cancel Coverage/Disenroll for Health and Dental Plans". 1. Cancel Coverage/Disenroll (at enrollment level) 2. Cancel Coverage/Disenroll for Health and Dental Plans (at household level)
Enrollment	Health & Dental Plan Shopping	41882	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall capture and display reasons for users to answer "Why are you canceling your plan?"
Enrollment	Health & Dental Plan Shopping	41883	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall capture and display dates for user to select the Termination Date if coverage has already began
Enrollment	Health & Dental Plan Shopping	41885	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall display a "Confirmation" screen displaying more details: -Static message indicating the coverage end date and plan name -Static message about premium payments

Category	Sub Category	Req ID	Requirement
Enrollment	Health & Dental Plan Shopping	41886	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall display the "Cancel Coverage Request/Voluntary Disenrollment Request Submitted" popup after user cancels or terminates the plan: -Static message informing the user that the insurance company will be notified of the cancellation request -Feature to "Go to Dashboard" -Feature to close the popup
Enrollment	Health & Dental Plan Shopping	41887	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall re-direct users to the View Benefit Details Page on click of "View Benefit Details". {To be covered under the SHOP and Compare sessions}
Enrollment	Health & Dental Plan Shopping	41888	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) "View and Print Application Summary" page shall display the primary contact and the household members information enrolled in a health plan. Below sections are displayed when the user is navigated to the "View and Print Application Summary" page: - Application Summary - Household Members - More About this Household
Enrollment	Health & Dental Plan Shopping	41889	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall allow "My Enrollments" page to be viewed from the Enrollment Portal and shall display the following information: -Feature to select applicable Enrollment Year -Current Enrollments (Health Plan, Dental Plan) -Past Enrollments (Health Plan, Dental Plan)
Enrollment	Health & Dental Plan Shopping	41890	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall display a static message on the "My Enrollments" page for enrollments when user does not have any current or past enrollment history.
Enrollment	Health & Dental Plan Shopping	41891	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall display the following information for both current and past enrollments for health and dental plans: -Carrier Logo -Plan Name -Feature to View Benefit Details -Benefit Summary -Plan Summary -Contact Your Carrier -Covered Family Members -Feature to Pay Now (if status is Pending) (for current enrollments) -Feature to Disenroll/Cancel Coverage (for current enrollments) -Feature to Adjust Premium Tax Credit amount (Request to move from My Plan Details to My Enrollments)
Enrollment	Health & Dental Plan Shopping	41892	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall allow user to view the following information in the "Benefit Summary" overview: -Plan Type {Health & Dental} -Office Visit {Health Only} -Generic Medications {Health Only} -Deductible {Health Only} -Routine Dental (Adult) {Dental Only} -Dental Checkup (Child) {Dental Only} -Yearly Deductible (Child) {Dental Only} -Out-of-Pocket Maximum {Health & Dental}
Enrollment	Health & Dental Plan Shopping	41893	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall allow user to view the following information in the "Plan Summary" overview: -Coverage Start Date {Health & Dental} -Coverage End Date {Health & Dental} -Enrollment Status {Health & Dental} -Monthly Premium {Health & Dental} -Elected APTC {Health only} -CA Premium Credit/CAPS {Health only} -Net Premium {Health & Dental} -Premium Effective Date {Health & Dental} -Option to Hover "Premium Effective Date" for more information {Health & Dental} -Policy ID (Request to move from My Plan Details to My Enrollments)
Enrollment	Health & Dental Plan Shopping	41894	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall display the below details in the Contact Your Carrier Section: - Customer Service Number - Customer Service TTY Number (AI 192243 from Plan Management) - Feature to "Click Here" to the Insurance Company Website
Enrollment	Health & Dental Plan Shopping	41895	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall display the below details in the Contact Your Carrier Section: - Customer Service TTY Number (AI 192243 from Plan Management)

Category	Sub Category	Req ID	Requirement
Enrollment	Health & Dental Plan Shopping	41896	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall allow user to view the following information in the "Covered Family Members" overview: -Relationship to Subscriber -Member Name -Coverage Dates
Enrollment	Health & Dental Plan Shopping	41897	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall allow users to view all Agents/CECs on the "My Delegates" page and shall allow customers to filter by the following: -Agent First Name -Agent Last Name -CEC First Name -CEC Last Name -Feature to Reset All -Feature to Apply -Table listing all active and past delegates.
Enrollment	Health & Dental Plan Shopping	41898	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall display the following details on the My Delegates page if the user has no active or past delegations: -Agent First Name -Agent Last Name -CEC First Name -CEC Last Name -Feature to Reset All -Feature to Apply -Static message that search criteria did not return any results
Enrollment	Health & Dental Plan Shopping	41899	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall display the historical delegation data associated with the consumer's case. Below fields are populated with the historical data: -Agent/CEC Name -Type -Agent License No. -Agency/Entity Business Name -Delegation Start Date -Delegation End Date -Reason for End
Enrollment	Health & Dental Plan Shopping	41900	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall display the Business Cell Phone Number on the My Delegates page.
Enrollment	Health & Dental Plan Shopping	41901	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall display the following table with Agent Information if a Delegate has been selected: -Agent/CEC Name -Type -Agent License No. -Agency/Entity Business Name -Delegation Start Date -Delegation End Date -Reason for End
Enrollment	Health & Dental Plan Shopping	41902	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall navigate the user to the "Appeals Information" page upon user selection of "Appeals Information" Option.
Enrollment	Health & Dental Plan Shopping	41903	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall navigate the user to the "My Account Home" page upon user selection of My Account Home Option.
Enrollment	Health & Dental Plan Shopping	41904	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) - Shop for Plans page shall allow the user to switch between shopping for Health or Dental plans for the applicable enrollment year.
Enrollment	Health & Dental Plan Shopping	41905	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall display a static pop-up message if the user attempts to shop for a Dental plan before enrolling in a Health plan along with the following: -Feature to "Start Dental Enrollment" -Feature to "Continue with Health Enrollments"
Enrollment	Health & Dental Plan Shopping	41906	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) "Shop for Health Plans <Enrollment year>" shall display the following features: -"Whom are you shopping health plans for?" -Static text regarding custom grouping -"Shop for these Members" -Feature to "Go to Dashboard" -Feature to proceed "Shop for Health Plans for <Enrollment Year> <# of members>"

Category	Sub Category	Req ID	Requirement
Enrollment	Health & Dental Plan Shopping	41907	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) "Shop for Health Plans" page shall display the following in the "Shop for these members section" -Feature to select Applicable Household Members -Advance Premium Tax Credit amount per month -CA Premium Credit amount per month/CAPS Amount per month -CSR Eligibility Text
Enrollment	Health & Dental Plan Shopping	41908	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall display the fields previously covered in the SHOP and Compare pages on the plan shopping page: -SHOP & Compare BRs 1 - 21
Enrollment	Health & Dental Plan Shopping	41909	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall display a feature to go "Back to Dashboard"
Enrollment	Health & Dental Plan Shopping	41911	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall display below details on the Health Plan shopping page: -Names of HH members -Static text explaining that coverage can start once payment has been received
Enrollment	Health & Dental Plan Shopping	41912	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall display static text with a Quality Rating Disclaimer.
Enrollment	Health & Dental Plan Shopping	41913	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) Enrollment Portal - Confirm Your Plan Selection screen shall display the following sections: -Title Page "Confirm Your Plan Selection" -Health Plan <HH Member Names> -Feature to remove plan from the cart -Cart Total -Feature to go "Back to Shopping" -Feature to go "Next"
Enrollment	Health & Dental Plan Shopping	41914	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall display the following items in the Health Plan overview section: -Provider Name and Logo -Plan Metal Tier and Type -Coverage Start Date -Monthly Premium -Monthly Federal Tax Credit -Feature to "Adjust APTC" -Monthly CA Premium Credit/Monthly CAPS amount -Health Monthly Payment
Enrollment	Health & Dental Plan Shopping	41915	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall display the following details in the Cart Total Section: -Health Monthly Payment -Total Monthly Payment
Enrollment	Health & Dental Plan Shopping	41916	The "Your Tax Credit" popup will display the following information: -A static message indicating that user qualifies for Advanced Premium Tax Credits -Ways to use Advanced Premium Tax Credits -APTC slider that displays the APTC amount used each month and the amount that would be received at tax time
Enrollment	Health & Dental Plan Shopping	41917	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall display the eSignature page that displays the following details: - Title Page "Provide eSignature" -Static Message with instructions -Terms and Conditions -Binding Arbitration Agreement -Feature to "Print" the Binding Arbitration Agreement -Feature to go "Back" -Feature to "Enroll"
Enrollment	Health & Dental Plan Shopping	41918	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall display terms and conditions that displays the following details: -Feature to Agree to the terms and conditions -Static message stating terms and conditions
Enrollment	Health & Dental Plan Shopping	41919	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall display the Binding Arbitration agreement that displays the following details: -Static message with the terms of the Binding Arbitration Agreement -Feature to enter eSignature -Feature to agree to the Binding Arbitration Agreement -Feature to enter PIN Number -Feature to hover over PIN number -Provide eSignature field -Date

Category	Sub Category	Req ID	Requirement
Enrollment	Health & Dental Plan Shopping	41920	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) Enrollment Confirmation page shall display the following details: - Title Page "Confirmation" - Static text with confirmation message - Health Plan - Making Changes to Your Plan - Disclaimers - Feature to "Shop for More Members" - Feature to "Print Page" - Feature to "Go to Dashboard" - Banner and feature to Exit & Pay Offline
Enrollment	Health & Dental Plan Shopping	41921	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall display Health plan details with the following information: - Names of Plan Enrollees - Expected Start Date for the Coverage - Name and Logo of the Plan provider - Name and Metal Tier of the Plan selected - Monthly Premium Cost before Credits are applied - Static message instructing consumer to "Pay Now" - Feature to "Pay Now" - Total Monthly Premium Cost - Monthly Federal Tax Credit - Monthly CA Premium Credit/CAPS (if user is eligible) - Your Total Monthly Premium Payments
Enrollment	Health & Dental Plan Shopping	41922	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall display a static message in the "Making Changes to Your Plan" section.
Enrollment	Health & Dental Plan Shopping	41923	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall display a static message in the "Disclaimers" section.
Enrollment	Health & Dental Plan Shopping	41924	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall display a banner with static text displaying payment next steps and a feature to "Exit & Pay Offline"
Enrollment	Health & Dental Plan Shopping	41926	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) "Shop for Dental Plans <Enrollment year>" shall display the following features: -Static text regarding dental coverage -"Shop for these Members" -Feature to "Go to Dashboard" -Feature to proceed "Shop for Dental Plans for <Enrollment Year> "
Enrollment	Health & Dental Plan Shopping	41927	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) "Shop for Dental Plans" page shall display the following in the "Shop for these members" section -Feature to select Applicable Household Members
Enrollment	Health & Dental Plan Shopping	41932	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall continue to apply the existing Business Rules for Dental Plan shopping
Enrollment	Health & Dental Plan Shopping	41933	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall display the fields previously covered in the SHOP and Compare pages on the Dental plan shopping page: -SHOP & Compare BRs 1 - 21
Enrollment	Health & Dental Plan Shopping	41934	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall display a feature to go "Back to Dashboard"
Enrollment	Health & Dental Plan Shopping	41935	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall display the "Dental Plans" tab once the user has enrolled in a Health Plan.
Enrollment	Health & Dental Plan Shopping	41936	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall display below details on the Dental Plan shopping page: -Names of HH members -Static text explaining that coverage can start once payment has been received
Enrollment	Health & Dental Plan Shopping	41938	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall display the following information in the Dental Plan section: -Provider Name and Logo -Dental Plan Name -Feature to View Plan Details on click of Dental Plan Name -Coverage Start Date -Monthly Premium -Dental Monthly Payment
Enrollment	Health & Dental Plan Shopping	41939	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall display the following information in the Cart Total Section -Dental Monthly Payment -Total Monthly Payment

Category	Sub Category	Req ID	Requirement
Enrollment	Health & Dental Plan Shopping	41940	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall display the eSignature page for Dental Plan that displays the following details: -Title Page "Provide eSignature" -Static Message with instructions -Binding Arbitration Agreement -Feature to "Print" the Binding Arbitration Agreement -Feature to go "Back" -Feature to "Enroll"
Enrollment	Health & Dental Plan Shopping	41941	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall display the Binding Arbitration agreement that displays the following details: -Static message with the terms of the Binding Arbitration Agreement -Feature to enter eSignature -Feature to agree to the Binding Arbitration Agreement -Feature to enter PIN Number -Feature to hover over PIN number -Provide eSignature field -Date
Enrollment	Health & Dental Plan Shopping	41942	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) Enrollment Confirmation page {Dental} shall display the following details: - Title Page "Confirmation" - Static text with confirmation message - Dental Plan - Making Changes to Your Plan - Disclaimers - Feature to "Shop for More Members" - Feature to "Print Page" - Feature to "Go to Dashboard" - Banner and feature to Exit & Pay Offline
Enrollment	Health & Dental Plan Shopping	41943	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall display Dental plan details with the following information: - Names of Plan Enrollees - Expected Started for the Coverage - Name and Logo of the Plan provider - Name of the Plan selected - Monthly Premium Cost - Static message instructing consumer to "Pay Now" - Feature to "Pay Now" - Total Monthly Premium Cost - Your Total Monthly Premium Payments
Enrollment	Health & Dental Plan Shopping	41944	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall display a static message in the "Making Changes to Your Plan" section.
Enrollment	Health & Dental Plan Shopping	41945	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall display a static message in the "Disclaimers" section.
Enrollment	Health & Dental Plan Shopping	41947	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall navigate the user to an error message on the carrier website that states that the "Carrier website indicates that Initial Premium Payment functionality is temporarily unavailable" if the initial premium payment URL is not available or times out.
Enrollment	Health & Dental Plan Shopping	41948	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall display a recommended/default grouping for household members with the option to change the grouping and proceed with plan selection upon click of the "Shop for Plans" feature on the Enrollment Dashboard.
Enrollment	Health & Dental Plan Shopping	41949	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall display the following groupings if there are CSR eligible household members: - Noneligible CSR household members - CSR Eligible household members
Enrollment	Health & Dental Plan Shopping	41950	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall display a popup message when the user attempts to change the recommended grouping for a household member with CSR eligibility that displays the following information: - Static message that the user is about to change the recommended grouping suggested for maximum financial benefit - Feature that states "Got it. Continue" - Feature to "Cancel"
Enrollment	Health & Dental Plan Shopping	41951	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall not allow subsidy eligible and non-subsidy eligible members from the same household to shop in one grouping.

Category	Sub Category	Req ID	Requirement
Enrollment	Health & Dental Plan Shopping	41954	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall display the following details in the Enrolled Section: - Static text explaining enrollment and APTC amounts. - Static text explaining CAPS/CA Premium Credit amounts. - Static text explaining CSR eligibility - HH Member Name - Health Plan Details - Feature to Cancel Coverage/Disenroll
Enrollment	Health & Dental Plan Shopping	41955	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall display the following details in the "Whom are you shopping for" section: - Household Members that have yet to enroll in a plan.
Enrollment	Health & Dental Plan Shopping	41956	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall display the following features upon click of "Shop for More Members" or "Report a Change" after enrollment is completed for all household members: - Enrolled <# of HH Members>
Enrollment	Health & Dental Plan Shopping	41957	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall display the following details in the Enrolled Section: - Static text explaining enrollment and APTC amounts. - Static text explaining CSR eligibility (if the household member is eligible) - HH Member Name - Health Plan Details - Feature to Cancel Coverage/Disenroll
Enrollment	Health & Dental Plan Shopping	41958	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall allow a newly added member to Shop for Health Plans with the options to: - View the "Enrolled" Section - Add to an existing household enrollment - Feature to "Add to this Plan" - Shop for a new health plan - Feature to "Shop for Health Plans"
Enrollment	Health & Dental Plan Shopping	41959	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall display an option for the existing groups to "finalize plan" selection in the "Enrolled" Section after a new member has been added.
Enrollment	Health & Dental Plan Shopping	41960	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall automatically group newly added household members into the existing household member groupings with the same CSR eligibility.
Enrollment	Health & Dental Plan Shopping	41961	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall allow newly added members the option to shop for health plans separately.
Enrollment	Health & Dental Plan Shopping	41962	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall not allow the user to group newly added members together when shopping for a new health plan if the newly added members have differing CSR eligibility.
Enrollment	Health & Dental Plan Shopping	41964	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall indicate the user if they attempt to add a newly added member who is CSR eligible to a plan with non-CSR eligible members: - Static message that the user is about to change the recommended grouping suggested for maximum financial benefit - Feature that states "Got it. Continue" - Feature to "Cancel"
Enrollment	Health & Dental Plan Shopping	42021	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall alert the users that shopping in new groups will result in loss of renewing their existing enrollments: - Message stating that the user will have the option to shop for new or current plan(s) for the household members. There will be no option to renew with the current enrollment groups. - Functionality to select "Ok" - Functionality to select "Cancel"
Enrollment	Health & Dental Plan Shopping	42022	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall display the "Renew Your Plans" page for health plan shopping: - Title: Renew Your Plans - Dynamic banner describing any changes to premiums, CA Premium Credit, and APTC.
Enrollment	Health & Dental Plan Shopping	42023	If a plan is no longer available for a consumer for the next benefit year, California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall display the "Pick a New Plan" screen and prompt users to go "Back to Shopping" on click of "Renew or Change Plans" with the following details: - Message stating the plan options have changed - Image of unavailable plan - Functionality to go "Back to Shopping"
Enrollment	Health & Dental Plan Shopping	42024	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall provide an indication to the consumers if their current plan is unavailable for active renewals.
Enrollment	Health & Dental Plan Shopping	42026	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall enable dental plan renewal shopping once the household has completed enrolling in qualified health plans.

Category	Sub Category	Req ID	Requirement
Enrollment	Health & Dental Plan Shopping	42027	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall alert the users that shopping in or a new dental plan will result in losing the capability to renew their existing enrollment: - Message stating that the user will have the option to shop for new or current plan(s) for the household members. There will be no option to renew with the current enrollment groups. - Functionality to select "Ok" - Functionality to select "Cancel"
Enrollment	Health & Dental Plan Shopping	42028	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall display the Renew Your Plans Page for dental plan shopping: - Title: Renew Your Plans
Enrollment	Health & Dental Plan Shopping	42029	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) Enrollment Module shall continue to support current renewals crosswalk functionality with the same carrier.
Enrollment	Health & Dental Plan Shopping	42030	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) Enrollment Module shall continue to support current renewals crosswalk functionality with a different carrier.
Enrollment	Health & Dental Plan Shopping	42031	If a member of the household is removed from the household as part of renewal application, California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall not display the removed member on the custom grouping screen and the removed member will not go through the shopping flow.
Enrollment	Health & Dental Plan Shopping	42032	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall allow newly added members that qualify for renewals to shop for a new plan or get added to existing enrollment groups.
Enrollment	Health & Dental Plan Shopping	42033	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall continue to display a functionality for the users to renew their current health and dental plans even if the users have opted for "Shop for New Plans" but have not completed the plan selection process.
Enrollment	Health & Dental Plan Shopping	42034	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) enrollment transition module - Pay Now/Active Renewals sub module shall include the functionalities of the CRs mentioned in the CR, Defects, and PCRs sheet.
Enrollment	Health & Dental Plan Shopping	42035	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall provide an indicator while shopping to display the user's current year plan is available for renewal even if the user opts to shop for a new plan.
Enrollment	Health & Dental Plan Shopping	42036	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) Enrollment modules shall include all functional changes documents in CR 161263 - 2022 Renewals.
Enrollment	Health & Dental Plan Shopping	42037	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) Enrollment modules shall include all functional changes documents in CR 191292 - 2023 Renewals.
Enrollment	Inbound EDI		
Enrollment	Inbound EDI	41801	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) Health Plan Details screen shall include and display the following summary for the health plan: 10. Plan name label and plan name 11. Primary care visits label and primary care visits member's cost 12. Generic drugs label and generic drugs member's cost 13. Yearly deductible label and yearly deductible cost 14. Health savings account (HSA) label and a yes/no indicating this plan offers HSA 15. Quality rating label and rating metric 16. Provider label and search hyperlink if user did not select any preferred provider previously. 17. Provider name label and indication whether provider is in the health plan network if user selected a preferred provider(s) previously. 18. REMOVE feature (if the health plan is added to cart using the feature no. 9 above.)
Enrollment	Inbound EDI	41804	***The BR for Provider Directory Search implementation will be discussed in a separate RV Session *** California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall include and display the following functionalities for the doctors and facilities card: 1. Section header for doctors and facilities 2. Check for your doctor hyperlink appears if user did not select a preferred provider previously. 3. Provider name and address appears if user selected a preferred provider previously. 4. Edit hyperlink appears if user selected a preferred provider previously. 5. Provider network indicator whether provider is in the health plan network if user selected a preferred provider(s) previously. 6. User will have an option to search, view (list view and map view), or edit preferred provider list.
Enrollment	Inbound EDI	41808	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall include plan quality ratings disclaimer label for the Health Plan Details page.
Enrollment	Inbound EDI	41809	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) - Health Plan Details screen shall display yearly deductibles field/label which can be differentiated or configured based on the Metal Tier or/and CSR Tier.
Enrollment	Inbound EDI	41811	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall have a section on the Health Plan shopping page to display and manage Health Plans that are selected by users to be compared.
Enrollment	Inbound EDI	41812	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall have the following features for the Health Plan compare section: 1. Remove Health Plans to be compared 2. Add Health Plans to be compared 3. Compare Now feature
Enrollment	Inbound EDI	41813	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall allow maximum of 3 Health Plans to be compared at single instance.

Category	Sub Category	Req ID	Requirement
Enrollment	Inbound EDI	41814	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall display the following features for the Health Plan comparison page: 1. Back navigation to shop and compare and plan selection pages 2. Main section header
Enrollment	Inbound EDI	41832	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall have the following options for the Dental Plan compare section: 1. Remove Dental Plans to be compared 2. Add Dental Plans to be compared 3. Compare Now option
Enrollment	Inbound EDI	41833	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall allow maximum of 3 Dental Plans to be compared at single instance.
Enrollment	Interfaces		
Enrollment	Interfaces	41800	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) Health Plan Details screen shall include and display the following summary for the health plan: 1. Provider name and logo 2. Health Plan name (metal tier, plan type) hyperlink 3. Health Plan description as a banner (metal tier, plan type, CSR if it applies) 4. Monthly premium amount 5. Monthly premium details 6. Monthly savings amount 7. Monthly savings details 8. Add to cart button 9. Total expense estimate label and total expense estimate amount.
Enrollment	Interfaces	41802	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall display a visual confirmation after selecting the plan to provide confirmation of Plan selected and provide user with navigation for next steps: 1. Functionality to navigate to the Dental Plans Shopping page 2. Functionality to navigate to the Shopping Cart Page
Enrollment	Interfaces	41803	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall include and display benefits resources section with following functionalities: 1. Ability to view Summary of Benefits and Coverage PDF 2. Plan brochure label/hyperlink 3. Provider directory hyperlink 4. Drug list hyperlink
Enrollment	Interfaces	41805	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) Health Plan Details screen shall display the total count of Primary Care Providers for each of the Health Plans.
Enrollment	Interfaces	41806	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall include and display the following functionalities for medical services based on information coming SERFF 1. Section header for the name of service 2. List of sub-categories for the service 3. Coverage information for each service for in-network and out-of-network providers will be populated based on information from SERFF
Enrollment	Interfaces	41807	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall include benefits summary disclaimer label for the Health Plan Details page.
Enrollment	Interfaces	41826	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall include and display the following functionalities for dental services based on information coming SERFF 1. Section header for the name of service 2. List of sub-categories for the service 3. Coverage information for each service for in-network and out-of-network providers will be populated based on information from SERFF 4. Additional information will be provided where ever it is needed
Enrollment	Interfaces	41827	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall include benefits summary disclaimer label for Dental Plan Details page.
Enrollment	Interfaces	41831	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall have a section on the Dental Plan shopping page: a. To display the dental plans selected by the user to be compared. b. To manage dental plans that are selected by users to be compared.
Enrollment	Maintain Operational Data		
Enrollment	Maintain Operational Data	42140	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall add the Temporary (Enhanced) CSR program as a single new column to the Weekly Audit File.
Enrollment	Maintain Operational Data	48019	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall ensure that the start and end dates of an enrollment are contained within the same calendar year, with the earliest start date = 1/1/xxxx and the latest end date = 12/31/xxxx. (To address SIR 246082)
Enrollment	Notices		
Enrollment	Notices	42855	Modify the NOD17 (English and Spanish) to inform all the consumers who have requested an access code and do not already have an online account.
Enrollment	Plan and Benefit Assistance		
Enrollment	Plan and Benefit Assistance	38958	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall allow Covered CA plan selection when the case is in Medi-Cal Renewal mode and at least one household member is Covered CA Program Eligible or Conditionally Eligible.
Enrollment	Plan and Benefit Assistance	41965	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall allow new group/regrouping (non AI/AN + AI/AN) during RAC flow when adding new members for members identifying as AI/AN.

Appendix A-4 - SOW Exhibit A - System Requirements Specification
(Extracted from CalHEERS RTM)

Category	Sub Category	Req ID	Requirement
Enrollment	Plan and Benefit Assistance	42098	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall apply the coverage start date based on the plan selection date generated by any of the following action: - Automated Process - Manual user selection
Enrollment	Plan and Benefit Assistance	42099	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall apply the coverage end date based on the SEP details received from the business rules engine.
Enrollment	Plan and Benefit Assistance	42100	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall apply the coverage end date based on the following: - Automated Process - Manual user selection
Enrollment	Plan and Benefit Assistance	42101	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall apply the precedence logic in the situations where multiple QLEs are active for the consumer's case.
Enrollment	Plan and Benefit Assistance	42102	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall allow the users to select a new plan or modify the existing plan for the specific changes reported
Enrollment	Plan and Benefit Assistance	42103	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall restrict the certain users from selecting a new plan or modifying the existing plan for the specific changes reported
Enrollment	Plan and Benefit Assistance	42104	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall bypass the safeguards while allowing plan selection for the specified SEPs.
Enrollment	Plan and Benefit Assistance	42105	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall allow the admin user to assess and provide the approval for the specific changes and elements selected by the user under the following QLE reason(s) - Other Qualifying Life Event
Enrollment	Plan and Benefit Assistance	42106	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall be able to create a task for the admin to review and approve the SEP.
Enrollment	Plan and Benefit Assistance	42107	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall apply the changes automatically to the existing enrollment(s) based on the specific changes reported.
Enrollment	Plan and Benefit Assistance	42108	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall apply the re-rating logic based on the business rules currently implemented in the California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) system.
Enrollment	Plan and Benefit Assistance	42109	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) enrollment module will continue leveraging the existing CSR (enrollment) related business rules based on the details provided by the business rules engine.
Enrollment	Plan and Benefit Assistance	42110	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) enrollment transition module - SEP-RAC sub module shall include the functionalities of the CRs mentioned in the CR, Defects, and PCRs sheet.
Enrollment	Plan and Benefit Assistance	42111	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) enrollment module shall include all the functional changes documented CR 95184 - SEP Dropdowns and Workflow
Enrollment	Plan and Benefit Assistance	42112	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) enrollment module shall include all the functional changes documented CR 179749- Enable Choose Plan for Overrides.
Enrollment	REM		
Enrollment	REM	41835	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) Dental Plan Compare screen shall include and display the following summary for each dental plan selected for comparison: 1. Provider name and logo 2. Dental Plan name (plan type) hyperlink 3. Monthly premium amount 4. Add to cart feature
Enrollment	REM	41836	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall display a visual confirmation after selecting the plan to provide confirmation of Plan selected and provide user with navigation for next steps: 1. Functionality to navigate to the Health Plan Shopping (if Health plan was not selected) 2. Functionality to navigate to the Shopping Cart Page
Enrollment	REM	41837	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall display the following content in the Summary section: 1. Plan Type
Enrollment	REM	46636	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall create and maintain comprehensive design documentation for the Carrier REM process
Enrollment	REM	46637	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall consolidate the existing CR specific REM functional documents into the one comprehensive functional document
Enrollment	REM	46638	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall consolidate any existing CR specific REM technical documents into one comprehensive technical document
Enrollment	REM	46639	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall consolidate any existing CR specific REM operational documents into one comprehensive operation document
Enrollment	REM	46640	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall create and maintain comprehensive design documentation for the Carrier Dispute process.
Enrollment	REM	48028	REM shall reject carrier updates for Cancel and Termination (non-payment of premium) for all enrollments with \$0 Net Premium.
Enrollment	REM	48363	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall update the weekly audit file to align with state level CSR enhancements
Enrollment	REM	48364	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall update the Weekly Audit File column "supplemental CSR" to "CSR_CREDIT_NET_AMT" to align with the field name in the 834 EDI.

Appendix A-4 - SOW Exhibit A - System Requirements Specification
(Extracted from CalHEERS RTM)

Category	Sub Category	Req ID	Requirement
Enrollment	REM	48365	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall update the weekly audit file with 12 additional columns (CSR_CREDIT_NET_JAN, CSR_CREDIT_NET_FEB, CSR_CREDIT_NET_MAR, CSR_CREDIT_NET_APR, CSR_CREDIT_NET_MAY, CSR_CREDIT_NET_JUN, CSR_CREDIT_NET_JUL, CSR_CREDIT_NET_AUG, CSR_CREDIT_NET_SEP, CSR_CREDIT_NET_OCT, CSR_CREDIT_NET_NOV, CSR_CREDIT_NET_DEC) that will contain the "CSR Credit net amount" for each month of the enrollment
Enrollment	REM	48366	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) DW shall build the new Report in csv format and has output as attached in the template for all the enrollments which are eligible for Enhanced CS level plan for a benefit year. When an enrollment is Eligible for Enhanced CS level plan, then corresponding eligible months should be populated with the CSR_CREDIT_NET_AMT and CSR level. If enrollment not Eligible, then these fields should be null. This report should be generated every Thursday (same like Health audit files) and uploaded to CH SharePoint.
Enrollment	REM	48367	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall add a new L2 rule, L2-S. This L2-S rule will be assigned when the monthly value populated in the monthly CSR Credit Net Amount field is Null for an enrollment with an enhanced CS level plan.
Enrollment	REM	48368	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall validate and load the 13 new fields (CSR_CREDIT_NET_AMT, CSR_CREDIT_NET_JAN, CSR_CREDIT_NET_FEB, CSR_CREDIT_NET_MAR, CSR_CREDIT_NET_APR, CSR_CREDIT_NET_MAY, CSR_CREDIT_NET_JUN, CSR_CREDIT_NET_JUL, CSR_CREDIT_NET_AUG, CSR_CREDIT_NET_SEP, CSR_CREDIT_NET_OCT, CSR_CREDIT_NET_NOV, CSR_CREDIT_NET_DEC) related to CSR Credit Net Amount from carriers initial response file and go back response file into REM database.
Enrollment	REM	48369	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall add a new L2 rule, L2-S1. This L2-S1 rule will be assigned when the monthly value populated in the monthly CSR Credit Net Amount field is Null for an enrollment Eligible for an enhanced CS level plan and not null when not Eligible for an enhanced CS level plan.
Enrollment	REM	48370	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall add a new L2 rule, L2-S2. This L2-S2 rule will be assigned when the monthly value populated in the monthly CSR Credit Net Amount field is not Null for Cancelled enrollment Eligible for an enhanced CS level plan.
Enrollment	REM	48371	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall add a new L5 rule to the REM process. The new L5 rule will be assigned as a "Carrier fix" when CH monthly CSR_Credit_Net_Amount<> QHP monthly CSR Credit Net Amount
Enrollment	REM	48372	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall update REM reports to include the newly added rules as appropriate. The reports include: Go back files sent to Carrier from CH, L2 Heatmap, Dashboard, End of Cycle, Financial Carrier Action file, L2 Persistency, L5 Persistency, Enrollment Accuracy, Financial Accuracy, Error Report, L5 Heatmap.
Enrollment	REM	48373	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall create a new REM report entitled "Benefit year (YYYY)_Cycle number_Post_REM_ CSR_Credit_Net_Amount_Report" to include: Audit date, HIOS ID, Case ID, Enrollment ID, Subscriber ID, and Enhanced State CS level
Enrollment	REM	48374	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall update the carrier dispute process to allow for the "CSR Credit net amount" to be disputable.
Enrollment	REM	48375	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall validate and load the 13 new fields related to CSR Credit Net Amount (CSR_CREDIT_NET_AMT, CSR_CREDIT_NET_JAN, CSR_CREDIT_NET_FEB, CSR_CREDIT_NET_MAR, CSR_CREDIT_NET_APR, CSR_CREDIT_NET_MAY, CSR_CREDIT_NET_JUN, CSR_CREDIT_NET_JUL, CSR_CREDIT_NET_AUG, CSR_CREDIT_NET_SEP, CSR_CREDIT_NET_OCT, CSR_CREDIT_NET_NOV, CSR_CREDIT_NET_DEC) from carriers initial disputes file and go back disputes file into Disputes database.
Enrollment	REM	48376	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall modify Disputes D2-D rule for 13 new fields (CSR_CREDIT_NET_AMT, CSR_CREDIT_NET_JAN, CSR_CREDIT_NET_FEB, CSR_CREDIT_NET_MAR, CSR_CREDIT_NET_APR, CSR_CREDIT_NET_MAY, CSR_CREDIT_NET_JUN, CSR_CREDIT_NET_JUL, CSR_CREDIT_NET_AUG, CSR_CREDIT_NET_SEP, CSR_CREDIT_NET_OCT, CSR_CREDIT_NET_NOV, CSR_CREDIT_NET_DEC).
Enrollment	REM	48377	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall modify Disputes D3-IsEqual rule for 13 new fields (CSR_CREDIT_NET_AMT, CSR_CREDIT_NET_JAN, CSR_CREDIT_NET_FEB, CSR_CREDIT_NET_MAR, CSR_CREDIT_NET_APR, CSR_CREDIT_NET_MAY, CSR_CREDIT_NET_JUN, CSR_CREDIT_NET_JUL, CSR_CREDIT_NET_AUG, CSR_CREDIT_NET_SEP, CSR_CREDIT_NET_OCT, CSR_CREDIT_NET_NOV, CSR_CREDIT_NET_DEC).
Enrollment	REM	48541	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall add a Go Back phase to the Carrier Dispute process
Enrollment	REM	48542	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall process the go back dispute file received from the carriers.
Enrollment	REM	48543	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) Dispute process shall perform D1 Validation on the go back dispute file
Enrollment	REM	48544	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) Dispute process shall perform D2 Validation on the go back dispute file
Enrollment	REM	48545	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) Dispute process shall load the go back dispute file into Dispute Staging database
Enrollment	REM	48546	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) Dispute process shall merge the initial disputes with the updated disputes received in the go back file and load the new disputes from the go back dispute file.
Enrollment	REM	48547	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) Dispute process shall move the initial disputes received in the go back dispute file to new disputes audit table
Enrollment	REM	48548	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) Dispute process shall clear (soft delete) the initial D2 discrepancies identified using the initial dispute file
Enrollment	REM	48549	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) Dispute process shall perform D2 Validation using dispute records from the initial disputes file which are updated using the Go back file and new disputes received in the go back file.
Enrollment	REM	48550	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) Dispute process shall create the D2 report after processing go back dispute file which will have all the D2 discrepancies for the respective carrier.
Enrollment	REM	48551	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) Dispute process shall create the D2 Heatmap report after processing go back dispute files for all the carriers.
Enrollment	REM	48851	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall update L3-59 rule (CH updates status from Confirm to Term) with the additional scenario when the CH Net Premium for the first month is greater than \$0 and CH APS Status is "APS-NEW" and CH APS Attestation Indicator is not equal to "O" (Opt-Out), then flag the record for L3-59 discrepancy.
Enrollment	REM	48852	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall update L3-61 rule (CH updates status from Term to Confirm) with the additional scenario when the CH Net Premium for the first month is greater than \$0 and CH APS Status is "APS-NEW" and CH APS Attestation Indicator is not equal to "O" (Opt-Out), then flag the record for L3-61 discrepancy.

Appendix A-4 - SOW Exhibit A - System Requirements Specification
(Extracted from CalHEERS RTM)

Category	Sub Category	Req ID	Requirement
Enrollment	REM	48853	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall update L3-62 rule (CH updates status from Term to Confirm) with the additional scenario when the CH Net Premium for the first month is greater than \$0 and CH APS Status is "APS-NEW" and CH APS Attestation Indicator is not equal to "O" (Opt-Out), then flag the record for L3-62 discrepancy.
Enrollment	REM	48854	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall generate new Exclusion list having the APS Enrollments that have been "Cancelled" by the SB260 cancellation batch. The Category for these exclusions will be "SB260 Cancellation".
Enrollment	Renewal		
Enrollment	Renewal	41820	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall include benefits summary disclaimer label for the Health Plan Compare page.
Enrollment	Renewal	41821	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall include plan quality ratings disclaimer label for the Health Plan Compare page.
Enrollment	Renewal	41822	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall include and display the following functionalities for Dental Plan Details screen: 1. Back navigation to shop and compare and plan selection screens 2. Main section header
Enrollment	Renewal	41823	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall include and display the following summary for the dental plan: 1. Provider name and logo 2. Dental Plan name (plan type) label 3. Monthly premium amount 4. Monthly premium details 6. Add to cart button 7. Plan name label and plan name 8. Routine dental (adult) label and routine dental (adult) member's cost 9. Dental checkup (child) label and dental checkup (child) member's cost 10. Yearly deductible label and yearly deductible cost
Enrollment	Renewal	41824	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall display a visual confirmation after selecting the plan to provide confirmation of Plan selected and provide user with navigation for next steps: 1. Functionality to navigate to the Shopping Cart Page 2. Functionality to navigate to the Health Plans Shopping page
Enrollment	Renewal	46139	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall display the following when user proceeds to complete health plan selection {Active Renewals}: -Text informing user to renew current enrollment or change plans for enrollment groups - Functionality to shop in new groups - Health Enrollment Groups from the Previous Year <# of members> - APTC amounts for the following Enrollment year - Functionality to Renew or Change Plans
Enrollment	Renewal	46140	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall allow the user to make changes to the enrollment groupings by changing plans for the remaining unenrolled members on click of the functionality shop in new groups.
Enrollment	Renewal	46141	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall display the "Renew Your Plans" page for health plan shopping: - Title: Renew Your Plans - Dynamic banner describing any changes to premiums, CA Premium Credit, and APTC.
Enrollment	Renewal	46142	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall alert the user and prompt them to select a new plan for the upcoming year if their plan is not available for renewals.
Enrollment	Renewal	46143	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall display the following when user proceeds to complete dental plan selection {Active Renewals}: - Text informing user to renew current enrollment or change plans for enrollment groups -Text informing user not to click "Renew or Change Plans" in case all members are not listed in the enrollments section if they would like to keep the same dental plan. - Functionality to shop in new groups - Dental Enrollments from the Previous Year <# of Members> - Functionality to Renew or Change Plans
Enrollment	Renewal	46144	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall enable dental plan renewal shopping once the household has completed enrolling in qualified health plans.
Enrollment	Renewal	46145	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall display the Renew Your Plans Page for dental plan shopping: - Title: Renew Your Plans
Enrollment	Renewal	46146	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) Enrollment Module shall continue to support current renewals crosswalk functionality with the same carrier.
Enrollment	Renewal	46147	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) Enrollment Module shall continue to support current renewals crosswalk functionality with a different carrier.
Enrollment	Renewal	46148	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall not display members that are made inactive from the household or are ineligible for Renewals on the custom grouping screen. The inactive/ineligible member will not go through the shopping flow.
Enrollment	Renewal	46149	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall allow newly added members that qualify for renewals to shop for a new plan or get added to existing enrollment groups.
Enrollment	Renewal	46150	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall allow the user to access the "Pay Now" button from the following points of entry: - Enrollment Dashboard Page - Plan Confirmation Page - My Enrollment History Page

Appendix A-4 - SOW Exhibit A - System Requirements Specification
(Extracted from CalHEERS RTM)

Category	Sub Category	Req ID	Requirement
Enrollment	Renewal	46151	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall auto plan select household members that transition from MAGI/Medi-Cal to CCP/APTC eligible during renewals and complete the renewal process for the remaining eligible members.
Enrollment	Renewal	46152	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall cancel an enrollment created via passive renewal when the following criteria is met: - the renewal was from an Auto-Plan Selection (APS) New enrollment from the previous year -the APS enrollment has a \$0 net premium -the consumer has not opted-in for the APS enrollment - the APS enrollment has been cancelled automatically based on a consumers failure to opt in by the APS deadline
Enrollment	Renewal	46153	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall display messaging to consumers who choose to Opt Out of their current year enrollment after it has been renewed for the next year.
Enrollment	Renewal	46154	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall retain the SEP period established on the case during OSEP when Open Enrollment ends.
Enrollment	Renewal	46155	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall capture the existing functionality of the Over Aged Dependent BOT process in the PCAP module and custom group Over Aged Dependent in their own enrollment group during Passive Renewals
Enrollment	Renewal	46156	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall enroll any over aged dependent in the same plan ID as their current plan.
Enrollment	Renewal	46157	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall not update the policy for the remaining members.
Enrollment	Renewal	46158	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall only separate over aged dependents if renewals for the upcoming benefit year have been completed for the household.
Enrollment	Renewal	46159	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall add a case note indicating that the case was included in the automated Over Aged Dependent process that will indicate if the Batch was successfully able to update the enrollment or not
Enrollment	Renewal	46160	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall automate and custom group individuals aging out of Catastrophic plans in their own enrollment group during Passive Renewals
Enrollment	Renewal	46161	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall enroll the individual aging out of the Catastrophic plan in the Ageing off Plan column in Crosswalk SERFF template Bronze version of that plan, if available.
Enrollment	Renewal	46162	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall enroll the remaining Catastrophic-eligible members in the Crosswalk plan mentioned in Crosswalk SERFF template.
Enrollment	Renewal	46163	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall add a case note indicating that the case was included in the automated Catastrophic Age Out process that will indicate if the automated process was successfully able to renew the enrollment or not
Enrollment	Renewal	46164	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall automate the existing Bronze to Silver Crosswalk process through a batch process during Passive Renewals.
Enrollment	Renewal	46165	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) Case Note shall indicate if the automated process was successfully able to renew all enrollments in a household or not
Enrollment	Renewal	46166	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall update BAT55 to extract all the applicable enrollment id and corresponding case id, plan details.
Enrollment	Renewal	46167	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall create a new Enrollment Batch that will passively renew cases that are eligible.
Enrollment	Renewal	46168	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall run the Staging Batch to stage the enrollments that were in pending or enrolled status from Current year.
Enrollment	Renewal	46169	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall then run the Renewal Batch will use the data staged in HBX_CROSSWALK_TEMP table, HBX_CATASTROPHIC_TEMP table and Renewal staging table to Renew cases to their Target plans.
Enrollment	Renewal	46170	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall update the references/stop Account Transfer in the existing renewals batches.
Enrollment	Renewal	46171	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall allow users to enroll in a plan effective as of First of coming month during the OFL period.
Enrollment	Renewal	46172	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall allow the Admin User to opt consumers out of Passive Renewals after the Renewals eligibility jobs have run
Enrollment	Renewal	46173	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall log all the applicable reason codes for the cases that are not passively renewed.
Enrollment	Renewal	46174	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall send the 834 Renewals transactions to the Issuers, that clearly denotes the Active and Passive Renewals with the specific codes, so that Issuers can process the information accordingly.
Enrollment	Renewal	46175	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall send 834 Renewal transactions to the Issuers for consumers who actively or passively renew into the same plan under the current Issuer.
Enrollment	Renewal	46176	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall send 834 Renewal transactions to the Issuers for consumers who actively or passively renew into a different plan under the current Issuer.
Enrollment	Renewal	46177	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall send 834 new enrollment (add) transactions to the Issuers for consumers who actively renew their coverage into a new plan with a different Issuer.
Enrollment	Renewal	46178	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall send an EDI 834 new enrollment (add) transaction if the consumer is automatically renewed into a different plan with a different Issuer. (Cross Issuer Auto-Renewal)
Enrollment	Renewal	46179	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall cancel all enrollment records for the future year when a case is closed as a duplicate when exchange renewals has been complete for the future year.
Enrollment	Renewal	46180	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall remove a consumer from Dental only enrollments after passive renewals are complete if they move out of state.
Enrollment	Renewal	49223	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall Passively Renew Dental Only consumers into the same Dental Plan, if available.
Enrollment	Shop & Compare		
Enrollment	Shop & Compare	41839	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall include benefits summary disclaimer label for Dental Plan Compare page.

Category	Sub Category	Req ID	Requirement
Enrollment	Shop & Compare	41841	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) Shopping Cart screen shall display a standard verbiage to instruct the users about the next steps in the Shop & Compare Flow.
Enrollment	Shop & Compare	41884	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall display a "Confirm your coverage end date" screen displaying more details: -Static Message indicating the date and plan name that the user will be disenrolled from -Plan logo
Enrollment	Shop & Compare	41910	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall display the "Dental Plans" tab once the user has enrolled in a Health Plan.
Enrollment	Shop & Compare	41925	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall navigate the user to an error message on the carrier website that states that the "Carrier website indicates that Initial Premium Payment functionality is temporarily unavailable" if the initial premium payment URL is not available or times out.
Enrollment	Shop & Compare	41937	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) Enrollment Portal - Confirm Your Plan Selection screen shall display the following sections: -Title Page "Confirm Your Plan Selection" -Dental Plan <HH Member First Name and Last Names> -Feature to remove dental plan from the cart -Cart Total -Feature to go "Back to Shopping" -Feature to go "Next"
Enrollment	Shop & Compare	41946	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall display a banner with static text displaying payment next steps and a feature to "Exit & Pay Offline"
Enrollment	Shop & Compare	41952	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall display a "Minimum Coverage" option in the Metal Tier section on the SHOP & Compare page when all the users enrolling in the health plan are eligible for a catastrophic plan.
Enrollment	Shop & Compare	41953	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall display the following when there are still household members to be enrolled in a plan: - Enrolled <# of HH Members> - Whom are you shopping for - Feature to Go to Dashboard - Feature to Shop for Health Plans for Applicable Coverage Year <# of Household Members>
Enrollment	Shop & Compare	41963	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall display an "Alert" popup message informing the user to select one group.
Enrollment	Shop & Compare	41966	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall display the following details on the "Confirm Your Plan Selection" when adding a new member to an existing plan: - Banner explaining any updates to the plans including changes to premiums and changes to subsidy amounts - Health Plan Section - Cart Total - Feature to go "Back to Shopping" - Feature to go "Next"
Enrollment	Shop & Compare	41967	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall provide a "Back to Shopping" feature that contains the following: - Static message about possible premium changes - Feature to "Remove Existing Plans & Go Shopping" - Feature to "Return to Cart"
Enrollment	Shop & Compare	41968	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall preserve enrollment groupings for remaining household members in cases where other household members have been removed. Removed household members will be automatically disenrolled/canceled from coverage.
Enrollment	Shop & Compare	41999	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) enrollment module shall include all functional changes documented CR 177906 - Allow Consumers Unlimited Plan Changes During SEP Window.
Enrollment	Shop & Compare	42025	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall display the following when user proceeds to complete dental plan selection {Active Renewals}: - Text informing user to renew current enrollment or change plans for enrollment groups -Text informing user not to click "Renew or Change Plans" in case all members are not listed in the enrollments section if they would like to keep the same dental plan. - Functionality to shop in new groups - Dental Enrollments from the Previous Year <# of Members> - Functionality to Renew or Change Plans
Enrollment	Timeshifter		
Enrollment	Timeshifter	42113	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) enrollment module shall include all the functional changes documented CR 177906- Allow Consumers Unlimited Plan Changes During SEP Window.
Environment Management			
Environment Management	Enrollment		

Category	Sub Category	Req ID	Requirement
Environment Management	Enrollment	42418	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) system shall create an exportable list of people who consumers did not access their California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) account during the renewal period (auto renewal) and whose coverage continues. The list shall include: Case number, Head of Household/Primary Contact, Physical Mailing address, preferred method of contact, email address (if available), preferred written language, and Program(s). This list will be sent to CoveredCA fulfillment vendor to mail voter registration cards and letter notices in appropriate preferred language. The list shall be created and sent to the fulfillment vendor once at the end of the renewal period.
			The list will also be used to pull email's of consumers whose preferred method was electronic, and email notices (in appropriate language) with SOS links, instead of paper mailing.
Environment Management		45349	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) system shall receive the new vendor onboarding document with connection and private/public keypair.
Environment Management		45350	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) system shall make an infrastructure change as network/firewall updates to allow the connection from California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) to HMS.
Environment Management		45351	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) system shall create or update an API gateway policy to connect to vendor.
Environment Management	Enrollment	45352	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) system shall send the webservice transaction through SSL channel.
Environment Management	General Requirement		
Environment Management	General Requirement	38682	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) system shall have the functionality to time shift the training environment to a specific date within 4 hours of request by the Covered California University (CCU) team.
Environment Management	General Requirement	38683	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) system training environment shall always have the build version that is in the production environment.
Environment Management	General Requirement	38684	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) system shall inform the CCU team when the training environment environment is time shifted.
Environment Management	General Requirement	38685	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) system shall inform the CCU team when the UAT environment environment is time shifted..
Environment Management	General Requirement	38686	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) system shall provide access to the training environment for the computers that located in HQ Training Rooms 1, 2, and 3, and in Fresno Training Rooms 109, 110, and 111.
Environment Management	General Requirement	38687	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) system shall provide access to the UAT environment all Covered California CCU staff..
Environment Management	General Requirement	38688	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System will have the following number of role logins available for CCU use in the training environment: 150 accounts for consumers, 30 accounts for PBE, 30 accounts for Agent, 30 accounts for CEC, and 3 for CEE.
Environment Management	General Requirement	38689	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System will provide an automated method for resetting the passwords for training environment accounts that are provisioned for CCU.
Environment Management	General Requirement	44179	The Vendor shall maintain the Training environments with at least the production version of the System code or one version earlier unless requested otherwise by Exchange Project Director.
Environment Management	General Requirement	44180	The Vendor shall provide the Training and UAT environments to State staff outside of the project Facilities.
Environment Management	General Requirement	44211	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall provide the Service Center with a "test like" training environment. This training envorinment must mirror produciton functionality using simulated information.
Environment Management	General Requirement	44212	CalHEEERS shall maintain the Training environments with test like data for Plan Selection.
Environment Management	General Requirement	44213	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall maintain the Training environments with test like data for Agent and CEE/CEC delegation.
Environment Management	General Requirement	44214	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall provide the funtionailty in the Training environment to update data to simulate Production cases through enrollment, upon request.
Environment Management	General Requirement	44215	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) Service Center Training Environment shall have the capacity to accommodate 70 concurrent Users.
Environment Management	General Requirement	44216	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) must provide the functionality to allow for the load and reload of a training dataset upon request.
Facilities	General Requirement		

Category	Sub Category	Req ID	Requirement
Facilities	General Requirement	45364	The Vendor shall plan, equip, provide and manage the appropriate number and type of Facilities to successfully operate the System. The Vendor must provide all Facilities necessary in order to support all required System functions: A) Development and Implementation Facility (D&I) - must be located within 30 miles of the State Capitol in Sacramento. B) Production Data Center (PDC) - must be located in California. C) Backup Data Center (BDC) - must be located in the Continental United States. Vendors are free to propose a single Facility to house multiple functions. For example, Vendors may propose one Facility that will accommodate the D&I project team, the Call/Service Center and the Production Data Center.
Facilities	General Requirement	45365	All Sites/Facilities shall be subject to the State acceptance.
Facilities	General Requirement	45366	The Vendor shall designate a point of contact for each State Project Facility.
Facilities	General Requirement	45367	The Vendor shall be responsible for ensuring that State Project Facilities meet all applicable local, State, and federal laws, Codes, and Requirements.
Facilities	General Requirement	45368	The Vendor PDC Facility and Backup Facility shall meet with the Uptime Institute TIER III – Concurrently Maintainable Site Infrastructure requirements. The State encourages PDC and Backup Facility compliance with U.S. Building Council Leadership in Energy and Environmental Design (LEED) requirements for a Silver rating.
Facilities	General Requirement	45369	During non-working hours, all State Facilities shall be protected against intrusion by appropriate surveillance System (e.g., security cameras). The required level of surveillance may vary by Facility, as appropriate.
Facilities	General Requirement	45370	Until the D&I Facility is installed and operational, the Vendor shall provide sufficient temporary office space to perform its project start up activities and to house Vendor and the State staff. Adequate furniture, Equipment, Software, and office supplies must be provided to support all staff located at any temporary Site.
Facilities	General Requirement	45371	The D&I Facility shall provide appropriate office space (cubicles, offices, or work spaces) to accommodate, at a minimum, the following required on-site State staff, vendors, Sponsors and partners: A) Forty (40) State Vendor staff B) Sixty (60) State Staff C) Twenty (20) as-needed Testers and/or other staff D) Ten (10) Sponsors and Partners E) Vendor staff
Facilities	General Requirement	45372	The D&I Facility shall include, at a minimum, the following: A) One (1) very large conference room with the capacity to seat 40 people at or around tables and accommodate at least 90 people absent of tables. B) Two (2) large conference rooms with a capacity to seat 25 C) Three (3) medium conference rooms with a capacity to seat 16 D) Three (3) small conference rooms with a capacity to seat eight (8) E) Each room shall be equipped with the following: I) An appropriate number of large white boards for the space. II) Table(s) and chairs to match the capacity III) Voice Conferencing Equipment, including auxiliary microphones IV) Phone and data lines (data lines to accommodate LAN and SharePoint access for attendees) V) Video Conferencing mechanism in two (2) conference rooms. VI) An Integrated Projection device capable of audio/visual presentation for the very large, large and medium conference rooms. F) Staff PCs or laptops configured with Microsoft Office automation and email Software, internet access, antivirus, and any other Software appropriate for project-wide communication and administration. G) An appropriate number of PC/laptop copies of all Software and Software licenses used in development, testing and maintenance H) An appropriate number of servers and all related Software to support administration, development, testing and maintenance I) An appropriate number of printers located throughout the Facility K) One (1) or more spaces designated and equipped for copy, print, scan, and fax functions, office supplies, and storage equipped with copy/duplicating Equipment with scanning capabilities, including one (1) high-speed Networked copy/duplicating machine and a fax machine. L) A central file and Document storage area.
Facilities	General Requirement	45373	Prior to acquisition, the Vendor shall obtain the approval of the State Project Director, or designee, for sample office and conference room furniture, phones and paint.
Facilities	General Requirement	45374	The D&I Facility shall have, at a minimum, six (6) private areas/study booths, each with a capacity for two (2) individuals, for use by temporary staff, confidential phone calls/discussions, private one-on-one meetings, nursing mothers, and similar purposes. Each breakout area shall be equipped with the following: A) One (1) Desk or work surface B) One (1) telephone C) Two (2) data lines D) Two (2) chairs E) One (1) white board
Facilities	General Requirement	45375	The D&I Facility shall include a large break room/kitchen area with adequate furnishings, Equipment, microwaves, vending machines, and supplies to support food and beverage storage, preparation and recycling for all on-site Project staff, and additional staff attending meetings at the Project Site. The break room/kitchen area shall also contain an adequate number of tables and chairs so staff can sit down to eat.
Facilities	General Requirement	45376	The D&I Facility shall include an adequate number of parking spaces adjacent to the Facility for all on-site Project staff and meeting attendees.

Category	Sub Category	Req ID	Requirement
Facilities	General Requirement	45389	The Vendor shall be responsible for development, maintenance, and distribution of an Emergency Evacuation Plan for each proposed Facility; however, this plan is not a formal Deliverable. The Emergency Evacuation Plan shall address periodic Testing of all emergency alert System and fire drills.
Facilities	General Requirement	45390	The Vendor shall provide and maintain a Backup Facility geographically separate from the PDC Facility. The location of the Backup Facility proposed by the Vendor shall mitigate the risk of both the PDC Facility and Backup Facility being impacted by the same disaster.
Facilities	General Requirement	45391	The PDC Facility and Backup Facility shall be equipped with adequate measures and means to ensure prompt detection of any disaster. The Vendor shall maintain appropriate processes and procedures for reporting disasters at the PDC Facility and/or Backup Facility to appropriate authorities and the emergency handling of fire, water intrusion, explosion, or other disasters.
Facilities	General Requirement	45392	PDC Servers and other essential devices (e.g., Routers and primary Switches) shall be protected from the effect of electrical power outages and fluctuations by the installation of Uninterrupted Power Supply (UPS) devices.
Facilities	General Requirement	45395	The D&I Facility shall include eleven (11) individual locking offices for the state use.
Facilities	General Requirement	45396	All work spaces for on-site State Project staff (partitioned and individual) shall be equipped, at a minimum with the following: A) One (1) ergonomic desk B) One (1) ergonomic desk chair C) One (1) bookcase in offices and large cubicles D) One (1) locking file cabinet or equivalent E) One (1) side chair, if requested F) One (1) Workstation or laptop G) One (1) speaker telephone H) One (1) Telephone Headset, if requested
Facilities	General Requirement	45448	Any change in Facility locations from those specified in the Proposal shall be subject to prior written acceptance by the State.
Facilities	General Requirement	45449	The Vendor shall propose a solution that complies with Data center and architecture requirements, standards, federal, State regulations.
Facilities	General Requirement	45450	The Vendor shall be responsible for the purchase, lease/rental, and operation of the State Facilities, including, the following goods and Services, as appropriate for each Facility: A) Leasehold improvements and ongoing maintenance and repairs B) Utilities C) Telephone System, including communication lines with service providers D) LAN/WAN installation and maintenance E) Secured wireless and remote connectivity and Access F) Office Equipment installation and maintenance G) Office supplies H) Furniture installation and maintenance I) Coordinated Facility maintenance with the Facility owner/manager J) Janitorial Services K) Security L) Adequate parking M) Storage N) Insurance
Facilities	General Requirement	45451	All State Facilities that host State Servers, Data, and central print Equipment shall have, at a minimum, physical security measures including secured doors and entry mechanisms and locked Server rooms with floor-to-ceiling walls. Site entrance doors and doors to Server rooms must be secured at all times and shall have an Auditable entry mechanism (e.g., card reader) that records all entries and departures.
Facilities	General Requirement	45452	The Vendor shall have System application and Data available at all times for production use at the Backup Facility. The Vendor shall provide automated failover to the Backup Facility. The Vendor shall provide redundant power supply to support operations for a minimum of 48 hours in the event of an extended power outage at the PDC Facility.
Facilities	General Requirement	45465	The Vendor shall provide a Backup Facility that includes, but is not limited to: A) Daily backups of the System shall be stored at the Backup Facility B) At least two major versions of the System Software shall be retained at the Backup Facility C) The Vendor shall provide a Backup Facility that replicates the PDC data and provide compute capacities for DR purposes. D) Interfaces with other System that interface with the PDC Facility
Final Detailed Design Review			
Final Detailed Design Review	General Requirement		

Category	Sub Category	Req ID	Requirement
Final Detailed Design Review	General Requirement	43532	As part of the Final Detailed Design Review, the Vendor shall prepare a Final Detailed Requirements Traceability Matrix to include but not be limited to: A) Approach to Requirements Analysis and Traceability B) Summary of Findings C) List of Requirements D) List of Deliverables E) Requirements mapped to Deliverables F) Deliverables mapped to Requirements G) Requirements without matching Deliverables H) Deliverables without matching Requirements
Final Detailed Design Review	General Requirement	43533	The Vendor shall prepare a System Design Document (Final) to include at a minimum: A) Design Considerations B) System Architecture C) Data Design D) Human-Machine Interface E) Operational Scenarios F) Detailed Design G) System Integrity Controls H) External Interfaces
Final Detailed Design Review	General Requirement	43534	The Vendor shall prepare a Interface Control Document (Final) to include at a minimum: A) Description of all System Interfaces: Federal, State and Local B) Detailed Interface Requirements C) Communication Protocols with external entities D) Interface development and test schedule E) Contingency plans
Final Detailed Design Review	General Requirement	43535	The Vendor shall prepare a Database Design Document (Final) to include at a minimum: A) Design Decisions B) Detailed Database Design C) Database Administration And Monitoring
Final Detailed Design Review	General Requirement	43536	The Vendor shall prepare a Data Management Plan (F) to include at a minimum: A) Approach for managing data during and after project execution. B) Data archiving plan C) Data retention plan
Final Detailed Design Review	General Requirement	43537	The Vendor shall prepare a Physical Data Model (Final) to include at a minimum: B) Participants Roles And Responsibilities C) Conceptual, Logical, And Physical Data Models D) PDM Concepts E) PDM Relationship Views G) Physical Data Model (PDM) Development H) Extract, Transform And Load Process I) PDM Data Dictionary Development K) Appendix A: Physical Data Model Diagram L) Appendix B: Extract, Transform, And Load Diagram M) Appendix C: Physical Data Model Matrix N) Appendix D: PDM Data Dictionary
Final Detailed Design Review	General Requirement	43538	The Vendor shall prepare a Data Conversion Plan (Final) to include at a minimum: A) Data Conversion Strategy and Approach B) Staffing and roles and responsibilities of Exchange and Vendor staff C) A list of files being converted D) Data Conversion Preparation E) Data Conversion Specifications F) A cross-reference of existing data elements to California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) data elements G) Conversion rules for each existing and new data element H) Methods for calculating default values, as appropriate I) Manual processes required including preparation and actual Conversion, and estimated work effort and timeline for each J) The approach for training users and technical staff in both automated and manual Conversion procedures K) Reports

Category	Sub Category	Req ID	Requirement
Final Detailed Design Review	General Requirement	43539	The Vendor shall prepare an Infrastructure Design document to include at a minimum: A) Logical and physical architectures and networks for all central and local components B) Technical diagrams and schematics for all central and local components C) Existing System infrastructure components that will continue to be used/leveraged as well as new infrastructural components. Identification of new infrastructure components that can be leveraged or reused by other State agencies D) Schedule for availability, including any phasing if applicable E) How all CMS technical requirements for MITA, SOA and cloud computing are addressed F) Infrastructure test plans
Final Detailed Design Review			The Vendor shall develop and execute an IVR Plan to successfully design and implement the IVR functionality. The IVR Plan shall include but not be limited to: A) Approach B) Roles and Responsibilities clearly delineated for Vendor, Exchange and Service Center staff C) IVR Design D) Schedule E) Processes and Procedures F) Call/decision trees
Financial Management			
Financial Management	Assister Financial Transactions		
Financial Management	Assister Financial Transactions	39652	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall provide the functionality to track applications and enrollments for which an Assister or Eligibility Administrator was involved.
Financial Management	Assister Financial Transactions	39653	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall provide the functionality to configure a fee for an Assister for a configured timeframe for enrollment and renewal activities based on policies to be determined by the Exchange, DHCS or MRMIB.
Financial Management	Assister Financial Transactions	39655	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall provide the functionality to configure and calculate Assister fees that may vary based on programs for which individuals enroll (Exchange, Medi-Cal, Healthy Families, MCAP).
Financial Management	Assister Financial Transactions	39674	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall provide the functionality to submit a payment request to the State Controller's Office or designated State agency of Assister fees due.
Financial Management	Assister Financial Transactions	39692	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall provide the functionality to automatically and manually reconcile Assister fees.
Financial Management	Consumer Assistance - SHOP		
Financial Management	Consumer Assistance - SHOP	42847	Add verbiage to the Enrollment Summary page to direct consumers to the Covered California How to Pay site for directions on how to make their first payment
Financial Management	Consumer Assistance - SHOP	42848	Add a link on the Enrollment Summary page to the Covered California How To Pay site.
Financial Management	Consumer Assistance - SHOP	42849	Update the Covered California How to Pay site with instructions for consumers to make their first Health Insurance Payment
Financial Management	Exchange Accounting		
Financial Management	Exchange Accounting	39477	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) accounts receivable functionality shall track all premium and Issuer Plan Assessment Fee invoices, receipts, adjustments and write-offs for a minimum of ten years.
Financial Management	Exchange Accounting	39478	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall provide the functionality for accounts receivable to track Issuer Plan Assessment Fees due to the Exchange.
Financial Management	Exchange Accounting	39492	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) accounts receivable functionality shall allow for automated and manual reconciliation of Issuer receivable balances.
Financial Management	Exchange Accounting	39516	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) accounts receivable functionality shall provide an audit trail of all adjustments and write-offs made.
Financial Management	Exchange Accounting	39517	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall provide the functionality for accounts payable to track Assister fees due.
Financial Management	Exchange Accounting	39518	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System accounts payable functionality shall track all Assister payments, adjustments and write-offs for a minimum of ten years.
Financial Management	Exchange Accounting	39564	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System accounts payable functionality shall allow for automated and manual reconciliation of premium refunds and Assister fee balances.
Financial Management	Exchange Accounting	39568	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System accounts payable functionality shall provide an audit trail of all adjustments and write-offs made.
Financial Management	Exchange Accounting	42591	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) system shall provide extracts/files from the state health benefits exchange billing software (ABE) that are formatted properly for upload to the CalSTARS system by FMD staff for general ledger transaction reporting.
Financial Management	Exchange Accounting	42592	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) system shall provide pipe delimited CSV reports from the state health benefits exchange billing software (ABE) that match the extract files but are formatted for FMD review.

Appendix A-4 - SOW Exhibit A - System Requirements Specification
(Extracted from CalHEERS RTM)

Category	Sub Category	Req ID	Requirement
Financial Management	Exchange Accounting	42593	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) system shall generate a CalSTARS defined TC240 Accounts Payable payment extract/file that will be ready for manual upload to the CalSTARS system by FMD staff.
Financial Management	Exchange Accounting	42594	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) system shall generate a CalSTARS defined TC121 Accounts Receivable extract/file to record carrier invoices recorded in ABE. The file will split out medical and dental. FMD staff will review, and upload the file to CalSTARS.
Financial Management	Exchange Accounting	42595	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) system shall generate a CalSTARS defined TC143 Accounts Receivable extract/file which includes remittance details at the invoice level from carriers recorded in ABE. FMD staff will review and upload the file to CalSTARS.
Financial Management	Exchange Accounting	42596	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) system shall make available all CalSTARS specific California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) extracts, files, and reports in a secured SharePoint location that can be securely accessed and securely retrieved by authorized Covered CA Financial Management Department staff.
Financial Management	Exchange Accounting	42631	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) billing engine shall include Individual Contract ID, Household Case ID, CEC ID and CEE ID on the AP Pending by CEE Report Extract.
Financial Management	Exchange Accounting	42918	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) system shall support transmission of TC143 (underpayments) through the CalSTARS Interface
Financial Management	Exchange Accounting	42960	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) system shall generate a CalSTARS defined TC109 Accounts Receivable extract/file which includes overpayment details at the invoice level from carriers recorded in ABE. FMD staff will review and upload the file to CalSTARS.
Financial Management	General Requirement		
Financial Management	General Requirement	39590	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall provide the functionality to extract, print and electronically send monthly enrollee and plan data (including premium information) to appropriate State entities and CMS for reinsurance and risk adjustment calculations.
Financial Management	General Requirement	42997	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall bill carriers for all consumers whose enrollment status is ENROLLED as of 2016 PMPM Renewal/Open Enrollment Period
Financial Management	Notices		
Financial Management	Notices	42783	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall generate the CalNOD22 with member and dependent level identifying information detail; such that, a Carrier / Issuer can identify the person receiving benefits Member ID and Member's full name along with the member's relationship to other household members.
Financial Management	Plan Assessment Fees		
Financial Management	Plan Assessment Fees	38228	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) system shall have the functionality to generate invoices to carriers based on a percentage of the consumer's premium amount.
Financial Management	Plan Assessment Fees	38229	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) system shall have the functionality to set a different percentage amount per carrier.
Financial Management	Plan Assessment Fees	38230	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) system shall have the functionality to configure each percentage amount for each benefit year.
Financial Management	Plan Assessment Fees	38231	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) system shall maintain the functionality to run the retroactive additions and terminations for the historical plan years to appear on the current bill.
Financial Management	Plan Assessment Fees	38233	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) system shall invoice Carriers plan participation fees based on the number of consumers effectuated for the previous month of coverage
Financial Management	Plan Assessment Fees	39600	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall provide the functionality to configure Plan Assessment Fees by Issuer and /or QHP and / or qualified stand-alone dental plan for defined time periods.
Financial Management	Plan Assessment Fees	39607	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall provide the functionality to invoice Issuer QHP and / or qualified stand-alone dental plan Assessment Fees.
Financial Management	Premium Processing		
Financial Management	Premium Processing	39279	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) system shall provide a 'common', 'standardized' web service that can be used across multiple payment vendors.
Financial Management	Premium Processing	39338	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall provide the functionality to send an electronic report to CMS Federal Data Hub of all current enrollees determined eligible for APTC and CSR subsidies for the upcoming month, along with the current Second Lowest Cost Silver Plan (SLCSP) premium amounts.
Financial Management	Premium Processing	39367	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall provide the functionality to submit a payment request to the State Controller's Office or designated State agency of net premiums due to the Issuers.
Financial Management	Premium Processing	39374	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall provide the functionality to track for audit purposes all manual adjustments.
Financial Management	Premium Processing	42006	On the Enrollment Summary Screen, add the Subscriber #.
Financial Management	Premium Processing	42438	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) system shall be able to provide Carriers with a subscriber's policy, contact, and member information.
Financial Management	Premium Processing	42439	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) system shall provide responsible party information sufficient to appropriately address invoicing which is to include the mailing address.
Financial Management	Premium Processing	42440	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) system shall provide case residential address information to support the Carriers ability in assisting consumers with Primary Care Physician (PCP) selection from the transaction. At minimum, residential information will include the residential zip code.
Financial Management	Premium Processing	42441	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) system shall disable the binder payment service after the binder payment has been successfully received by the carrier. a. The pay now button shall be disabled once the Carrier's web service provides initiated payment confirmation. (optional – carrier choice for implementation) b. The pay now button shall be disabled once the carrier 834 effectuation is received by California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) confirming payment receipt.
Financial Management	Premium Processing	42442	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) system shall not require a plan binder payment be made through the Covered CA web portal to effectuate coverage.

Appendix A-4 - SOW Exhibit A - System Requirements Specification
(Extracted from CalHEERS RTM)

Category	Sub Category	Req ID	Requirement
Financial Management	Premium Processing	42443	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) system shall display to the Covered CA user an information message when the Carrier payment service is unavailable and direct the consumer to try again later.
Financial Management	Premium Processing	42444	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) system shall open a separate browser window for the consumer to access the carrier site.
Financial Management	Premium Processing	42445	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) portal shall remain open and active for the user when the separate carrier browser window is open for payment processing.
Financial Management	Premium Processing	42446	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) system shall provide member level information sufficient to provide invoice line item billing detail generation including member level premiums.
Financial Management	Premium Processing	42447	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) system shall provide policy level information sufficient to match case information to the 834 transaction including subscriber and plan.
Financial Management	Premium Processing	42448	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) system shall send Carrier requests for binder payments by plan product ID.
Financial Management	Premium Processing	42449	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) system shall display a “pay now” button per policy purchase.
Financial Management	Premium Processing	42450	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) system shall provide sufficient on-screen messaging to the consumer to explain payment components being made and provide warnings that separate plans will require separate payments be made.
Financial Management	Premium Processing	42451	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) system shall send valid premium and tax credit payment data to the Carrier.
Financial Management	Premium Processing	42452	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) system shall provide the “pay now” feature for initial binder payments only. NOTE: Requirement is 'pending' until 'renewals' conversation is held with Carriers.
Financial Management	Premium Processing	42453	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) web service documentation shall provide a crosswalk to the location of each populated data field within the 834 transaction to assist with carrier reconciliation.
Financial Management	Premium Processing	42454	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) system shall utilize the SAML authentication protocol for transactions occurring between Covered CA and the Carrier.
Financial Management	Premium Processing	42455	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) system shall encrypt, and transfer securely, any data related to making an enrollment binder payment.
Financial Management	Premium Processing	44481	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall provide the functionality to track QHP and / or stand-alone dental plan gross premium rates per month per enrollee.
Financial Management	Premium Processing	44482	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall provide the functionality to generate a report of all individuals enrolled in QHPs or qualified stand-alone dental plans for the upcoming month along with the amounts of gross premiums, APTC and CSR associated with the individuals and transmit to CMS Federal Data Hub electronically.
Format			
Format	General Requirement		
Format	General Requirement	39118	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall remove the current messaging above the immigration status and document type dropdown menus on the Household Members page and replace it with the following text: Please select your current immigration document and status. We can process your application faster if you enter your immigration document information now. If you cannot provide that information now, you will have the chance to provide it at a later date.
Format	General Requirement	45483	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall provide web-based Exchange access that requires no desktop software except commercially available web-browsers Internet Explorer, Firefox, Chrome, and Safari.
Format	General Requirement	45484	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall display each process within California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) in consistent format (e.g., color, layout, font, menus, navigation, graphics, and information location).
Format	General Requirement	45485	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall utilize recognized presentation standards for displaying user, plan, and payment information.
Format	General Requirement	45486	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall displaying information in a culturally sensitive manner, taking into consideration color, symbols, format, and overall presentation.
General			
General	Assister Management		
General	Assister Management	47049	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall display the Agent/Enroller's name and contact details on MCT Dashboard if the case has an active agent/enroller delegated (the delegated Agent/Enroller is in "Certified/Approved" status with "Active" Delegation)
General	Assister Management	47050	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall display the Agency/Entity's name and contact details on MCT Dashboard if the delegated Agent/enroller is not able to service the consumer when: 1) the delegated Agent/Enroller is in "Certified/Approved" status with "Pending" Delegation on the case OR 2) the delegated Agent/Enroller is in "Suspended" status with "Active" Delegation on the case
General	Assister Management	47051	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall display “Get free enrollment assistance from a Covered CA Certified Partner” section on MCT Dashboard if the case has an no agent/enroller delegated.
General	Assister Management	47052	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall display a button to the existing "Manage Delegate" flow within the "You have a Delegated Enroller" section on the MCT dashboard which displays the delegated Agent/Enroller's name and contact details, if applicable.
General	Assister Management	47053	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall always display a "Find Local Help" link within the "Contact Us" section on the MCT Dashboard
General	Assister Management	47054	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall display a heading "Need to find an Agent, Certified Enrollment Counselor, or Local County Office?" for the "Find Local Help" link within the "Contact Us" section on the MCT Dashboard

Appendix A-4 - SOW Exhibit A - System Requirements Specification
(Extracted from CalHEERS RTM)

Category	Sub Category	Req ID	Requirement
General	Assister Management	47717	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall display the Agent/Enroller's name and contact details on modified MCT Dashboard for Manual APS process 3 Consumer if the case has an active agent/enroller delegated (the delegated Agent/Enroller is in "Certified/Approved" status with "Active" Delegation)
General	Assister Management	47718	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall display the Agency/Entity's name and contact details on on modified MCT Dashboard for Manual APS process 3 Consumer if the delegated Agent/enroller is not able to service the consumer when: 1) the delegated Agent/Enroller is in "Certified/Approved" status with "Pending" Delegation on the case OR 2) the delegated Agent/Enroller is in "Suspended" status with "Active" Delegation on the case
General	Assister Management	47719	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall display “Get free enrollment assistance from a Covered CA Certified Partner” section on modified MCT Dashboard for Manual APS process 3 Consumer if the case has no agent/enroller delegated.
General	Assister Management	47720	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall display a button to the existing "Manage Delegate" flow within the "You have a Delegated Enroller" section on the modified MCT Dashboard for Manual APS process 3 Consumer which displays the delegated Agent/Enroller's name and contact details, if applicable.
General	Assister Management	47721	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall always display a "Find Local Help" link within the "Contact Us" section on the modified MCT Dashboard for Manual APS process 3 Consumer
General	Assister Management	47722	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall display a heading "Need to find an Agent, Certified Enrollment Counselor, or Local County Office?" for the "Find Local Help" link within the "Contact Us" section on the modified MCT Dashboard for Manual APS process 3 Consumer
General	Assister Management	47723	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall restrict the display of the Unsubsidized MCT dashboard for the remainder of the benefit year after a consumer has completed Manual APS Process 1 or 2 and the Active Manual APS Indicator was moved to "N".
General	Eligibility Determination		
General	Eligibility Determination	38319	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) system shall remove the consent for verification on the e-signature page for unsubsidized applications.
General	Eligibility Determination	39940	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall have the functionality to prompt the user to give consent to receive calls & text messages for new 'Account Creation'.
General	Eligibility Determination	39941	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall have the functionality to allow existing Account Holders to consent to receive calls & text messages.
General	Eligibility Determination	39942	Remove from UCD, This will be addressed as part of CR159413\BR1
General	Eligibility Determination	39943	Remove from UCD, This will be addressed as part of CR159413\BR2
General	Eligibility Determination	39944	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall have the functionality to allow the user to consent to receive phone calls & text messages on all telephone number(s) (Home, Cell, Work) entered for the 'Primary Contact'.
General	Eligibility Determination	39945	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall update the consent to receive call & text messages verbiage.
General	Eligibility Determination	39946	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall have the functionality to allow the SCR to consent on behalf of the Consumer to receive phone calls & text messages on all telephone number(s) (Home, Cell, Work) entered for the 'Primary Contact'.
General	Eligibility Determination	40137	SIR 146191: California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall update applicable Spanish translations in WPS 08.18 Manual_Verification-Outstanding_Verification
General	Eligibility Determination	40140	SIR 129117: California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall update the missing static text in the Spanish translations for the Eligibility factor - EligStatus_033
General	Eligibility Determination	40830	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall have the functionality to insert case notes in the California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) Portal when Negative Action or Non-Compliance is lifted at reapplication from the California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) Portal.
General	Eligibility Determination	40833	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall have the functionality to insert case notes in the California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) Portal when Negative Action or Non-Compliance is lifted automatically by California Healthcare Eligibility, Enrollment and Retention System (CalHEERS).
General	Eligibility Determination	40838	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall update budget worksheet to display when Negative Action or Non-Compliance is applied for a consumer for Medi-Cal and Exchange programs.
General	Eligibility Determination	40860	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall add functionality to display the SAWS-linked case number and COR for a California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) case to Admin users.
General	Eligibility Determination	40861	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall have the ability to navigate an Admin user to a new Admin screen that displays the SAWS case linkage history and COR history for a California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) Case.
General	Eligibility Determination	40862	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall add a new Admin screen that displays the latest SAWS case and COR linked to a California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) case, and a history of SAWS case and COR linkage that includes the dates for each linkage.
General	Eligibility Determination	41302	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall implement functionality to display inactivated individuals in the California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) Portal
General	Eligibility Determination	41303	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall display a default inactivation reason for an inactivated individual if there is no inactivation reason associated to the individual that will also specify if the individual was inactivated from SAWS access channel.
General	Eligibility Determination	41304	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall add a new modal to the 'Eligibility Results' screen in California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) Portal that shall be displayed upon Intake / RAC / Renewal application submission when the application includes a change to the household composition (a member was added, removed, or reactivated to the household).
General	Eligibility Determination	41305	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall display a banner on the 'Review Application' screen ('Review & Submit' mode) in California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) Portal when an individual is reactivated informing the user to review the reactivated individual's information before submitting the application.
General	Eligibility Determination	41306	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall display inactivated individuals on the 'Household Members' screen during applications in California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) Portal with the following information: - Individual Name - Age

Category	Sub Category	Req ID	Requirement
General	Eligibility Determination	41307	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall display inactivated individuals on the Flexible Application with the following information: - Individual Name - Latest Date Inactivated - Inactivated Reason - Age
General			California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall display inactivated individuals on the 'Search Individual' screen in California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) Portal with the following information: - Individual Name - Date of Birth - Last 4 Digits of SSN - California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) Case ID - Application ID - CIN - Case Status - Application Status
General	Eligibility Determination	41309	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall display inactivated individuals on the 'Case Linkage Admin' screen in California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) Portal along with the following information: - Individual Name - CIN - DOB - Last 4 Digits of SSN - SAWS Person Number - California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) Person Number
General			California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall display inactivated individuals on the 'Manual Verification - Household Verifications' Admin screen in California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) Portal along with the following information: - Individual Name - SSN - DOB - Gender
General	Eligibility Determination	41311	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall only display eligibility results for active individuals on the 'Eligibility Results' page on California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) Portal.
General	Eligibility Determination	41312	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall determine whether an inactive individual is displayed in California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) Portal based on whether there are any duplicate records for the individual on the California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) Case as determined by the California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) Duplicate Prevention Logic.
General	Eligibility Determination	41313	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall not display an inactive individual record if the record is found to be a duplicate of an active individual record.
General	Eligibility Determination	41314	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall only display the latest inactive individual record (highest Indv ID) for an individual with multiple duplicate inactive individual records.
General	Eligibility Determination	41315	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall have the functionality to reactivate an individual that was previously inactivated from the California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) Portal and FlexiApp.
General	Eligibility Determination	41316	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall add functionality to display messaging to a user to inform the user of the process to reactivate an individual.
General	Eligibility Determination	41317	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall pre-populate the following application information for an inactive individual selected to be reactivated on an application from California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) Portal using the latest information stored for the individual. - Pre-Populated Information: Basic Information (Name, DOB, Gender, AI/AN attestation), Contact Information, Language Preferences, Citizenship and Immigration Information, Military Service Information, Optional Demographic Information, and Relationships - Not Pre-Populated Information: Marital Status, Health Care Information, Tax Filing Information, Income Information, and Pregnancy Information.
General			California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall display a warning to a user during an application on California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) Portal or FlexiApp if a user attempts to add an individual that is identified (based on matching first name, last name, and date of birth) to have an inactive record on the California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) case.
General	Eligibility Determination	41319	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall consider a reactivated individual as reapplying for health care when determining eligibility for the reactivated individual.
General	Eligibility Determination	41320	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall maintain cached verification statuses for a reactivated individual for SSN if the previous verification status was e-verified, and Citizenship and Lawful Presence if the previous verification status was e-verified or admin verified.
General	Eligibility Determination	41321	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall update the search functionality on the 'Search Individual' screen to include inactivated individuals in the search.
General	Eligibility Determination	41322	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall add a new 'Person Status' indicator to the search results on the 'Search Individual' screen to indicate whether an individual is active or inactive on their associated case.
General	Enrollment		

Category	Sub Category	Req ID	Requirement
General	Enrollment	38304	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) system shall allow a consumer to shop for a dental plan anytime that they can shop for a health plan.
General	Enrollment	38305	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall allow a consumer to reenroll in all plan type combinations, including: a health plan and a dental plan; a dental plan only; or a health plan only.
General	Enrollment	38306	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall allow a consumer to terminate cases for either: a health plan and a dental plan; a dental plan only; or a health plan only.
General	Enrollment	38309	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall remove the Decline Coverage Pop Up.
General	Enrollment	38310	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall allow a consumer to complete health plan selection without completing a dental plan selection.
General	Enrollment	47025	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) Data Integrity dispute process validation rules shall allow carriers to dispute all cases.
General	Enrollment	47026	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall suspend D2-E rule for carrier disputes.
General	Enrollment	47027	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall modify the D2-H rule to add additional condition when issuer indicates a request for further review of financial data. This modification will need to be updated through D2-H SQL
General	Enrollment	47028	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall enhance the dispute process to reduce the number of cases that are routed to service channels
General	Enrollment	47029	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall change the D3 Process File Report name to D3_ROUTING_MASTER_<AUDIT_DATE YYYYMMDD>.<BENEFIT_YEAR YYYY>.CSV
General	Enrollment	47030	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall not include AUTO_CLOSED functionality during D3 validation in the D3 routing master report.
General	Enrollment	47031	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall build a process to load the RESPONSE_D3_ROUTING_MASTER_< AUDIT_DATE YYYYMMDD>.<BENEFIT_YEAR YYYY>.CSV for further dispute steps.
General	Enrollment	47032	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall modify the FINAL_DISPOSITION_REPORT_<AUDIT_DATE YYYYMMDD>.<BENETIT_YEAR YYYY>.CSV to include all the dispute records from the current cycle and all IN PROGRESS status disputed records from the previous cycle(s)
General	Enrollment	47033	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall enhance the dispute process (AUTO_CLOSED logic) to capture enrollments fixed through California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) and matching with live refresh data before the dispute disposition report generated.
General	Enrollment	47034	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall enhance the AUTO_CLOSED dispute logic for "California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) REM Fix" discrepancy as below - • REM ID of reported dispute is part of recent CH REM Datafix. This is from the rem2_fix_stage table which has all the records which will be data fixed excluding cases from exclusion list and will be excluded cases due to last minute updates during California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) datafix.
General	Enrollment	47035	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall enhance the AUTO_CLOSED dispute logic for "Is Equal" discrepancy as below - • Status, benefit start date, end date, all the fields related to APTC, NP, GP, SS and CAPC from the reported dispute matches with the California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) refresh live data.
General	Enrollment	47036	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall modify D3_ROUTING_<SERVICE CHANNEL>_<AUDIT DATE YYYYMMDD>.<BENEFIT YEAR>.CSV to only report all records (current and previous cycles) with IN PROGRESS status within the benefit year. The column "DIU_ANALYSIS" from the D3 routing master report will be added to the D3 routing for service channels.
General	Enrollment	47037	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall produce a new dashboard to capture YTD total of all the disputes being worked within the benefit year.
General	General Requirement		
General	General Requirement	39524	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall update the Program Eligibility by Person section with State Subsidy information.
General	General Requirement	39587	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall have the ability to display the divorce, separation or modification date on the Application PDF.
General	General Requirement	39588	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall update the references to IRS Topic 452 to IRS Pub 504 in the User interface
General	General Requirement	39589	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall provide case notes to cases that are automatically processed via passive renewals or batch EDR's where an active alimony income or alimony paid deduction are present.
General	General Requirement	40599	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall display a message to the User when the file is blocked & rejected on the Document Upload modals in the following application flows: - RIDP page - Document & Correspondence page - Eligibility Documents page - Flexi App - VLP page - Bulk upload
General	General Requirement	40600	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall display a message to the User providing an alternate method to get documents to California Healthcare Eligibility, Enrollment and Retention System (CalHEERS).
General	General Requirement	41408	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall ensure that there is one pageview count per page visit in Google Analytics for the HBX REACT portal pages.
General	General Requirement	42887	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System must provide section in the single-page application for the addition of Notes. This section of the application will link and map to the Notes available for the application/case.
General	General Requirement	42888	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) Security Profiles must be updated and modified for those individuals who can edit and view partial applications.
General	General Requirement	42889	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System must provide the functionality for the Admin to associate applications from ECM to the Flexible Application.

Category	Sub Category	Req ID	Requirement
General	General Requirement	42975	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System must provide the functionality to display the Flexible Application for New or Report a Change (RAC) applications.
General	General Requirement	42976	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System must provide the functionality to display the Flexible Application for Manual Renewal applications.
General	General Requirement	43491	Each Deliverable shall be submitted no later than the delivery date established in the approved Work Plan.
General	General Requirement	43492	If a Deliverable is rejected, the Vendor shall correct and resubmit the deliverable within the agreed upon timeframes as defined in the approved Work Plan that will vary with the type, complexity, and volume of the deliverable.
General	General Requirement	43498	Each DED shall present an overview and outline of the associated Deliverable. The DED shall contain at a minimum the following information: 1) Introduction 2) Schedule that reflects all Vendor draft and final submittal dates, and Exchange review and approval dates 3) Requirements associated with the deliverable 4) Approach for Deliverable development 5) Deliverable Outline 6) Vendor resources responsible for development and Exchange, QA and IV&V resources responsible for Review. 7) Assumptions 8) Acceptance Criteria 9) DED Approval
General	General Requirement	43516	The Vendor shall submit an electronic Version of each Deliverable to the California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) Project Director, or designee, for Acceptance. Once the Exchange has approved a Deliverable, the Vendor must provide a read-only electronic copy.
General	General Requirement	43527	Each Deliverable submitted for Acceptance shall include a formal transmittal letter from the Vendor Project Manager (or designee) to the California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) Project Director (or designee). The transmittal letter must certify that the subject Deliverable meets all applicable Specifications, DEDs, and Requirements.
General	General Requirement	43578	Except for Status Reports and unless otherwise approved, the Vendor shall include the following standard sections in each deliverable: A) Introduction B) Assumptions, Constraints and Risks C) Requirements D) Referenced Documents E) Glossary F) Acronyms G) Appendices as applicable
General	General Requirement	45919	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall validate that users have successfully completed the confirm identity process prior to initial application submission. C, D, E, F, G, H, I, M, N, R, S, and T
General	General Requirement	45920	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall provide messaging with clear instructions prior to initial application submission for users who have not completed the confirm identity process.
General	General Requirement	46018	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall include a sensitive individual indicator on the daily MCAP report sent to DHCS.
General	General Requirement	46019	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall include a sensitive individual indicator on the daily CCHIP reports sent to DHCS.
General	General Requirement	46020	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall enable accounts and access codes that have been disabled due to being associated with a case containing sensitive contact information.
General	General Requirement	46021	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall add a case note to cases that have had their accounts and access codes re-enabled to note that the accounts and access codes associated to the case are no longer disabled.
General	General Requirement	47432	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall apply a case note to cases included in the no response batch to indicate successful eligibility and enrollment action on one or more members for Medicare/Deceased inconsistency.
General	General Requirement	47433	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall apply a case note to cases included in the no response batch to indicate an unsuccessful enrollment action taken on one or more members for Medicare/Deceased inconsistency.
General	Notices		
General	Notices	38275	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) system shall update the content for NOD01, General Eligibility, including tables, snippets (language TBD), and changing any hard-coded dates to dynamic dates.
General	Notices	38276	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) system shall update the content for NOD12a/b/c, Annual Open Enrollment, including tables, snippets (Change 34 days to 30 days and other language TBD), and changing any hard-coded dates to dynamic dates.
General	Notices	38277	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) system shall trigger the NOD12a/b/c notices, Annual Open Enrollment, based on a new trigger TBD with the result that only one NOD12 is sent per case.
General	Notices	38307	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) system shall update the content for NOD 01 A, B, C including tables and snippets (Dental and other language TBD).
General	Notices	38308	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) system shall update the content for NOD12 A, B, C including tables and snippets (Dental and other language TBD).
General	Notices	38318	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) system shall update the renewal date from 34 days to 30 days for the NOD12, Annual Open Enrollment Notice, batch job.

Category	Sub Category	Req ID	Requirement
General	Notices	38327	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) system shall display “Eligibility Redetermination” as the subject of the Email on the Secure inbox whenever NOD01c is generated.
			California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) system shall display “Renewal – Eligibility Determination” as the subject of the Email on the Secure inbox whenever renewals based NOD01ab is generated.
General	Notices	38496	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall generate new notices for 2016 for the CalNOD 62A and labeled the .pdf as" CalNOD62A_IRSForm1095A_2016" in Documents and Correspondence.
General	Notices	38498	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall generate new notices for 2016 for the CalNOD 62B (Correction and VOID) and labeled the .pdf as" CalNOD62B_IRSForm1095A_2016" in Documents and Correspondence.
General	Notices	38727	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall update the following NOD01 snippets to be more clear & informative.
General	Notices	39005	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall generate new 2017 CalNOD 62A notices in the PDF format placed in the consumer's Documents and Correspondence folder in the portal labeled "CalNOD62A_IRSForm1095A_2017".
General	Notices	39006	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall generate new 2017 CalNOD 62B notices in the PDF format placed in the consumer's Documents and Correspondence folder in the portal labeled "CalNOD62B_IRSRevisedForm1095A_2017".
General	Notices	39007	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall utilize the Pitney Bowes Presort Services (PBPS) to forward 2017 1095 Notices to any consumer who has filed a change of address with the USPS.
General	Notices	39008	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) system shall allow for notices generated in languages other than English to also be available in English.
General	Notices	39179	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall generate NOD12 in English, Spanish, Vietnamese, Arabic, Farsi, Chinese, Russian, Korean, Armenian, Tagalog, Khmer and Hmong.
General	Notices	39385	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall generate new 2018 CalNOD 62A notices labeled "2018_Tax_Form_1095A".
General	Notices	39386	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall generate new 2018 CalNOD 62B notices labeled "2018_Tax_Form_1095A_Revised".
General	Notices	39602	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall generate new 2019 CalNOD 62A notices labeled "2019 Tax Form (1095-A) - Original".
General	Notices	39603	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall generate new 2019 CalNOD 62B notices labeled "2019 Tax Form (1095-A) - Revised".
General	Notices	40158	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) system shall display a message to Consumers who provide an email address when completing the contact section in 'Account Creation' and Primary Contact & household members contact information on the 'Application' (React App and Flexi-App) to inform Consumer that Covered CA may use the email address(es) provided to contact them regarding health information and their account from Covered California.
General	Notices	44466	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall update the current Correction Auto Sweep batch to include voided 1095 notices.
General	Notices	44604	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall generate new notices for 2015 for the CalNOD 62B
General	Notices	44621	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall generate new notices for 2015 for the CalNOD 62A
General	Notices	46000	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall include the followin as part of A void record: all of the form information from the referencing record that is being voided (Parts I, II, and III) with the only changes being the metadata that marks the record as void and references the record being voided.
General	Notices	46005	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall enhance the current Correction Auto Sweep batch to send out correction notices including the void notices, as defined in the use cases.
General	Renewal		
General	Renewal	38297	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) system shall allow a consumer to actively renew in both a health plan and dental plan if the consumer is currently in both a health plan and dental plan.
General	Renewal	38298	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) system shall allow a consumer to actively renew in only health plan if the consumer is currently in both a health plan and dental plan.
General	Renewal	38299	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) system shall NOT allow a consumer to actively enroll in a health plan and renew in a dental plan if the consumer is currently enrolled only in a dental plan.
General	Renewal	38300	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) system shall allow a consumer to actively enroll in a dental plan and renew in a health plan if the consumer is currently enrolled only in a health plan.
General	Renewal	38301	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) system shall allow any consumer to add or remove a member to a case during renewals and choose to add them to the dental plan.
General	Renewal	38302	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) system shall passively renew consumers in a dental plan.
General	Renewal	38303	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) system shall allow consumers to actively (e.g. indicate through clicking a button) opt out of renewing in a dental plan.
General	Reports		
General	Reports	39131	Remove the Tier 2 Error, Physician Grouping by Taxonomy Classification Error (Code Y), from the Waterfall report
General	Reports	39132	Remove the Tier 2 Error, PCP specialty is not typically associated with PCPs (Code Y), from the Waterfall report
General	Reports	39133	LexisNexis Data Dictionary description of the supression_flag: "flag for records not to be sent on the file for the online directory". Plan Management requests the supression_flag be populated with a Y for any record that is suppressed from the online directory including but not limited to records with Tier 1 errors and records with visibility_flag=N.
General	Web Portal Online Help		

Appendix A-4 - SOW Exhibit A - System Requirements Specification
(Extracted from CalHEERS RTM)

Category	Sub Category	Req ID	Requirement
General	Web Portal Online Help	38330	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) system shall display the full text of the "Type of Change" on the Application Signature for Reported Changes page as body text and not within a text field.
General	Web Portal Online Help	38331	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) system shall display the before and after values for each "Type of Change" on the Application Signature for Reported Changes page.
General	Web Portal Online Help	38332	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) system shall group the "Type of Change" rows by household member on the Application Signature for Reported Changes page.
General	Web Portal Online Help	38333	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) system shall display additional instructions at the top of the Application Signature for Reported Changes page.
General	Web Portal Online Help	38334	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) system shall display only applicable Reasons for each Type of Change on the Application Signature for Reported Changes page.
General	Web Portal Online Help	38335	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) system shall display the Change Element for each Type of Change on the Application Signature for Reported Changes page.
Help Desk			
Help Desk	General Requirement		
Help Desk	General Requirement	44000	Prior to each Release, the Vendor shall provide training to all Help Desk personnel on the changes and alternative procedures associated with each release and documented in the release notes, webcast, and job aids.
Hosting			
Hosting	General Requirement		
Hosting	General Requirement	44829	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) data center locations shall meet physical security standards found in 508/504 Accessibility standards. http://www.access-board.gov/sec508/guide/index.html
Hosting	General Requirement	44833	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) data center locations shall meet physical security standards found in the NIST security standards: http://csrc.nist.gov/publications/PubsFIPS.html
Hosting	General Requirement	44836	The Vendor shall procure, install, configure, and operate Equipment and Software to the California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) Project and System. The Vendor may accommodate multiple Data centers in one location; except, for the backup Data center.
Hosting	General Requirement	45394	The Vendor shall procure, install, configure, and operate the System (i.e. Equipment, Software, Network, and database management System).
Hosting	Notices		
Hosting	Notices	43316	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall store the final MAGI notices of action file and notice metadata (including the Notice corresponding DER ID) provided by each of the SAWS, within the California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) content management system.
Implementation/Change Management			
Implementation/Change Management	General Requirement		
Implementation/Change Management	General Requirement	38979	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall correct any connectivity issues identified during retest.
Implementation/Change Management	General Requirement	38983	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) team shall perform limited scope integration test (As mentioned in scope of services) with all existing carriers. Integration test shall ensure that carriers are able to accept, process and provide response to California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) transactions(including 834, TA1, 999)
Implementation/Change Management	General Requirement	43415	The Vendor shall provide post-Implementation Release support six month after its Implementation date.
Implementation/Change Management	General Requirement	43416	The Vendor shall collect and document all issues and concerns that the users encounter with the Release for six months after the Implementation date and report them in the Project tracking System.
Implementation/Change Management	General Requirement	43436	The Vendor must develop and deliver an implementation approach that takes into consideration California's size, geographical diversity and broad range of California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) users.
Implementation/Change Management	General Requirement	43437	The Vendor shall provide an Implementation methodology that ensures all users are trained, the proper Equipment and Software is in place, and that user support is ready and available.
Implementation/Change Management	General Requirement	43439	The Vendor shall develop, adhere to and complete an Implementation readiness checklist detailing all required activities and associated timelines and/or due dates.
Implementation/Change Management	General Requirement	43440	The Vendor shall document when and by which method the users (including supervisors and managers): A) Have received orientation and passed all appropriate training prior to Implementation; B) Demonstrate an understanding of the overall Implementation plan and the processes; C) Have reviewed and demonstrated an understanding of the Change Discussion Guides; and D) Have received training in the processes and procedures for communication and problem resolution during the Implementation support period.
Interfaces			
Interfaces	1095		
Interfaces	1095	48679	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall increase the IRS-destined transmission file size up to 95 mb uncompressed.

Category	Sub Category	Req ID	Requirement
Interfaces	1095	48681	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall enhance the Marketplace Policy Number to remove the last two digits of the Plan ID (CSR Level Code) for 1095 Process for the 2024 benefit year and future benefit years.
Interfaces	Appeal - SHOP		
Interfaces	Appeal - SHOP	45210	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall send a common error code or unique identifier instead of an actual error id(HBX_MONITOR_ID) in the response message when eHIT transactions fails to process due to California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) internal error.
Interfaces	Assister Management		
Interfaces	Assister Management	46458	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall implement the change in the Enroller Portal to add the "Does entity serve the disabled?" field to the Initial Entity Application.
Interfaces	Assister Management	46459	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall implement the change in the Enroller Portal to add the "Disabilities Served" field to the Initial Entity Application.
Interfaces	Assister Management	46460	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall implement the change in the Enroller Portal to add the "Other Disabilities Served" field to the Initial Entity Application.
Interfaces	Assister Management	46461	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall implement a 15-character password length requirement when a new Enroller user is creating his/her new California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) credentials from Enroller Portal
Interfaces	Assister Management	46462	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall implement the password leak detection feature when an Enroller is creating his/her account and the Enroller should see also see the password leak detected modal on account creation when their password is identified as vulnerable.
Interfaces	Assister Management	46463	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall have the ability for Agent Admin to send Monetary and Non-Monetary Agreement to AM2
Interfaces	Case Management		
Interfaces	Case Management	38240	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall update the California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) SAWS EHIT schema to version 6.0 to account for change request 46047, 40758, and 59947 changes in the aligned release.
Interfaces	Case Management	38755	The MEDS Message and Alert Search page contains an Advanced Search capability.
Interfaces	Case Management	38756	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall provide the functionality to perform an advanced search without also requiring basic search criteria.
Interfaces	Case Management	38757	MEDS Message and Alert Advanced Search Criteria shall contain the following fields: MEDS Alert Date Range (From, To) * Transaction Type * Status * Message Category * Number * Aid Code * County Code
Interfaces	Case Management	38758	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall allow a maximum of 5 day window for Advanced Search date range.
Interfaces	Case Management	38933	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall provide the functionality to electronically receive exception files from MEDS.
Interfaces	Case Management	39188	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS)-SAWS Interface shall expand the Primary Contact matching criteria to allow Last Name only changes without the matching bypass flag.
Interfaces	Case Management	43007	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall provide the functionality via California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) Web Pages to present MEDS messages and alerts on MEDS Message and Alert Search and Detail Pages.
Interfaces	Case Management	43008	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall display MEDS messages and alerts received through the MEDS batch alert file and via the MEDS web services response.
Interfaces	Case Management	43009	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall display MEDS response messages and alert records of types: - Action (Batch) - Reject (Batch) - Error (Web Service) - Information (Web Service) - Warning (Batch and Web Service)
Interfaces	Case Management	43010	The MEDS Message and Alert Search page contains a Basic Search capability.
Interfaces	Case Management	43011	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall display all MEDS Messages and Alerts that meet the basic search criteria entered up to 4 months.
Interfaces	Case Management	43012	MEDS Message and Alert Search Basic Criteria contains the following fields: * California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) Case Number * CIN * MEDS ID / SSN * Message ID
Interfaces	Case Management	43013	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall display MEDS messages and alert records up to 4 months from the MEDS message or alert generation date.
Interfaces	Case Management	43014	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall allow a user to select a status of Open, Deferred, In Progress, or Closed for each MEDS message or alert. Messages and alerts will initially default to a status of "Open" and a Status Date of the date MEDS message or alert was processed into California Healthcare Eligibility, Enrollment and Retention System (CalHEERS).
Interfaces	Case Management	43015	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall display and track only the current record of status (no history) for each MEDS message or alert.

Category	Sub Category	Req ID	Requirement
Interfaces	Case Management	43016	MEDS Messages will be processed into this tool on a daily basis (7 days a week) and will be available for search/display the day after the messages are posted in California Healthcare Eligibility, Enrollment and Retention System (CalHEERS).
Interfaces	Case Management	43017	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall allow access to the California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) MEDS Message and Alert pages to one new security group.
Interfaces	Case Management	45922	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall add a new AdministrativeVerificationType of 'SEN' to be used to flag sensitive non-primary applicants received in EDR transactions.
Interfaces	Case Management	45923	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall identify a non-primary applicant's contact information as sensitive when California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) receives an EDR that includes an AdministrativeVerificationType of 'SEN' with an AdministrativeVerificationInd of 'Y' for the non-primary applicant.
Interfaces	Case Management	45924	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall send an AdministrativeVerificationType of 'SEN' to SAWS in DER transactions when an AdministrativeVerificationType of 'SEN' is received in the EDR transaction that the DER is generated for.
Interfaces	Case Management	45925	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall ignore and not persist a sensitive indicator for the primary applicant if the sensitive indicator is received from SAWS.
Interfaces	Case Management	45926	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall no longer consider contact information as sensitive when California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) receives an EDR that either: 1. Includes an AdministrativeVerificationType of 'SEN' with an AdministrativeVerificationInd of 'N' for the non-primary applicant. 2. Does not include an AdministrativeVerificationType of 'SEN' for the non-primary applicant.
Interfaces	Case Management	45927	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall add a new business validation to prevent Update Inbound transactions received from SAWS that include a sensitive non-primary applicant.
Interfaces	Case Management	45928	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall continue to identify a non-primary applicant's contact information as sensitive when a non-primary applicant is reactivated from California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) Portal if the non-primary applicant was identified as sensitive when they were removed from the case.
Interfaces	Consumer Management		
Interfaces	Consumer Management	46605	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall add a case origin data element to the Salesforce BPM interface that will be populated with "Mail", "Fax" or "California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) Upload" based on the case origin of the document being sent to Salesforce.
Interfaces	Eligibility Determination		
Interfaces	Eligibility Determination	37910	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall add business validation on click of the "Continue" button on the User Information page during the account creation process. California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall invoke a new validation based upon DOB and SSN. If a match is found, it will trigger the hard stop popup message. On click of the "Continue" button on the Contact Information page during the account creation process, if DOB and SSN match is not found California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall invoke a new validation based upon Name, DOB, and one of the following: Address, Phone Number, or Email; if a match is found then trigger a hard stop popup message. California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall not invoke the validation rules on the "Continue" button on both the User Information and Contact Information pages if the Delegation Code has been provided.
Interfaces	Eligibility Determination	37911	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall enhance the Admin combo search type functionality to search phonetically and by DOB range of plus or minus two years.
Interfaces	Eligibility Determination	37912	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall disable the "Withdraw Application" link on the consumer's Home Page when an application has been submitted.
Interfaces	Eligibility Determination	37928	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall populate the discontinuance effective Start Date minus 1 day (to capture the true eligibility end date) on DE# 0150 of HX40 transaction when the individual is discontinued from APTC/CCP/CSR/MCAP/CCHIP programs.
Interfaces	Eligibility Determination	38064	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall add the proper elements to the EHIT schema for sending and receiving the PRUCOL statuses between SAWS and California Healthcare Eligibility, Enrollment and Retention System (CalHEERS)
Interfaces	Eligibility Determination	38144	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall prevent gaps in eligibility and enrollment for APTC/CSR/CCP consumers who are enrolled in an IAP transition to MAGI Medi-Cal when Carry Forward begins in one year and the IAP Transition Month (month prior to the first Carry Forward month) begins in a prior year.
Interfaces	Eligibility Determination	38145	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall provide a Carry Forward flag in the SAWS eHIT interface at the member level for the following transition: APTC/CSR/CCP to MAGI M/C
Interfaces	Eligibility Determination	38147	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) eHIT Interface shall add a Carry Forward Lift Indicator at the individual level.
Interfaces	Eligibility Determination	38148	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall end "Carry Forward" for the individual once a Carry Forward Lift Indicator has been sent via EDR for that individual from SAWS and received and processed by California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) resulting in Eligible or Conditionally Eligible for MAGI Medi-Cal.
Interfaces	Eligibility Determination	38150	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall end Carry Forward for an individual when an EDR is sent from SAWS with or without a Carry Forward Lift Indicator and the redetermination of eligibility results in APTC/CSR/CCP, MCAP, or CCHIP.
Interfaces	Eligibility Determination	38165	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall keep a QDP (Dental) active when an APTC/CSR/CCP consumer becomes discontinued for APTC/CSR/CCP and transitions to another IAP.
Interfaces	Eligibility Determination	38168	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall display MAGI Medi-Cal transition text on the Eligibility Results page when an APTC/CSR/CCP individual is determined "Pending" for the MAGI Medi-Cal program and is in a "Carry Forward" status.
Interfaces	Eligibility Determination	38274	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall create new ROP eligibility evaluation reason codes to send to SAWS on DER transaction.
Interfaces	Eligibility Determination	38382	Upgrade the Rancho Internet Circuit from 100Mbps to 150Mbps
Interfaces	Eligibility Determination	38383	Upgrade the Fresno MPLS Circuit from 100Mbps to 150Mbps

Category	Sub Category	Req ID	Requirement
Interfaces	Eligibility Determination	38384	Upgrade the Fresno Internet Circuit from 50Mbps to 150Mbps
Interfaces	Eligibility Determination	38439	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall send any/all MEDS transactions at the member level.
Interfaces	Eligibility Determination	38440	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall send transactions for members who have a CIN number assigned immediately upon triggering action.
Interfaces	Eligibility Determination	38441	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall send transactions for member who do not have a CIN number assigned only after a CIN has been assigned to the individual.
Interfaces	Eligibility Determination	38458	The following OPA budget worksheet elements shall be populated in the California Healthcare Eligibility, Enrollment and Retention System (CalHEERS)-SAWS eHIT Interface for both MAGI and APTC: 1. MAGI: By person to whom income/deduction is assigned, by income/deduction type and by income source: a) MC - Non countable income. (Not currently on Budget display, not in CR 30049. Include source and amount as well) b) MC - Employment Income (Total is included in CR 30049, but need to expand to include source and amount provided for each employment income record entered) c) MC - Self-Employment Income (Total is included in CR 30049, but need to expand to include source and amount provided for each self-employment income record entered) d) MC - Other income (Total is included in CR 30049, but need to expand to include source and amount provided for each other income record entered) e) MC - Allowable deductions (Total is included in CR 30049, but need to expand to include source and amount provided for each allowable deduction entered) f) MC - Disallowed Deductions (Not on budget worksheet, need source and amount) g) MC – Countable Income (Total is included in CR 30049, but need to expand to include source and amount provided for each countable income record entered) (add PAI/CMI indicator to indicate which income is being used) h) Projected Monthly Income (total is included in CR 30049, need to expand to include individual amount) 2. APTC - a) APTC -Total Income after Deduction Monthly (Needed for mixed household notices) b) APTC -Total Income after Deduction Annual (Needed for mixed household notices) c) APTC - Federal Poverty Level (Needed for mixed household notices) d) APTC - Federal Poverty Level % for Individual (Needed for mixed household notices) e) APTC - Eligible for (Needed for mixed household notices) f) APTC - Monthly APTC Amount (Needed for mixed household notices) g) APTC - Annual APTC Amount (Needed for mixed household notices) 3. UPW Income Disregard.
Interfaces	Eligibility Determination	38459	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall pass OPA elements outlined in BR#1 via the California Healthcare Eligibility, Enrollment and Retention System (CalHEERS)-SAWS eHIT Interface for both MAGI and APTC at the household and individual level in the Determination node of the eHIT schema.
Interfaces	Eligibility Determination	38460	CALHEERS shall update the Portal Budget Summary Page to include new elements added in BR1 for MAGI Medi-Cal Only and add source, entity name and amount details if applicable. a) MC - Total Non countable income and details b) MC - Current Monthly Income details c) MC - Allowable deductions details d) MC – Total Countable Income details (add PAI/CMI indicator to indicate which income is being used and amount details)
Interfaces	Eligibility Determination	38461	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS)-SAWS eHIT interface shall add “PA” as an income category and send PAI amounts for each individual when available.
Interfaces	Eligibility Determination	38780	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) system shall create new ROP eligibility evaluation reason codes for income to send to SAWS on DER transaction.
Interfaces	Eligibility Determination	39327	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall receive the DDS disabled indicator from the SAWS via the eHIT interface.
Interfaces	Eligibility Determination	39431	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall have the functionality to accept Non-Compliance reason(s) from SAWS via eHIT.
Interfaces	Eligibility Determination	39432	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) eHIT interface definition shall be updated to transmit zero, one or multiple Non-Compliance reason(s) at the individual level.
Interfaces	Eligibility Determination	39683	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall allow on the EDR from SAWS, individuals who attest to a tax filing status of Married Filing Jointly, to optionally include on the application the other individual with whom they are Married Filing Jointly.
Interfaces	Eligibility Determination	39689	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall send the tax filing status association of Married Filing Jointly on the DER to SAWS.
Interfaces	Eligibility Determination	39705	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall send the Salesforce system consumer's demographic information of in-flight applications during Intake
Interfaces	Eligibility Determination	39706	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) system shall send Username for all applicants under selected household's inflight or submitted application to Salesforce.
Interfaces	Eligibility Determination	39707	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) system shall send Preferred Written and Spoken Language for the household members for submitted and in-flight applications
Interfaces	Eligibility Determination	39708	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) system shall send the date of expiration for 'consent to verify' to Salesforce
Interfaces	Eligibility Determination	39709	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) system shall send the Preferred Method of Contact to Salesforce
Interfaces	Eligibility Determination	39712	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall receive the tax filing status association of Married Filing Jointly on the EDR from SAWS.

Category	Sub Category	Req ID	Requirement
Interfaces	Eligibility Determination	39713	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall invoke a Business Validation, when the Married Filing Jointly association is received in an EDR as self or with a person who is not on the case.
Interfaces	Eligibility Determination	39716	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall send on the DER to SAWS, an out-of-country indicator for individuals who are residing out-of-country.
Interfaces	Eligibility Determination	39717	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall receive on the EDR from SAWS, an out-of-country indicator for individuals who are residing out-of-country.
Interfaces	Eligibility Determination	39718	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall not require a residence address on the EDR if the out-of-country indicator is sent for an individual. California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall use the out-of-country indicator in case both out-of-country indicator and the residence address is received on EDR from SAWS. California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall ignore Residence/Mailing address for individual(s) when out-of-country indicator is set to 'Y' on EDR/EDR-C.
Interfaces	Eligibility Determination	39719	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall send primary contact's residence/ mailing address to MEDS as the residence/ mailing address for individuals who attest to residing out-of-country.
Interfaces	Eligibility Determination	39720	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall suppress the following business validations when an EDR is received with an out-of-country indicator as 'Y' for an individual: BV#30 - Missing information in address node BV#31 - Missing Required Field in Address Node BV#33 - Missing address info node for applying member BV#35 - Missing Physical Address 1 BV#36 - Missing Mailing Address 1 BV#37 - Address 1 Required When Address Node Present BV# 38 - Address 1 Field Does Not Adhere to Guidelines BV# 39 -Invalid Address 2 Format BV#40 - Missing High Dated Physical Address BV#128 - Expected FIPS Code BV#147 - Physical Address for Preferred Mode of Communication
Interfaces	Eligibility Determination	39721	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall suppress BV# 128 for FIPSCountyCode for an out-of-state address received in EDR from SAWS.
Interfaces	Eligibility Determination	39722	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall not send Residence/Mailing address for individual(s) who reside out-of-country on a DER/DER-U to SAWS.
Interfaces	Eligibility Determination	39723	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall send County Code '99' to MEDS for each non-California residence address for all HX transactions.
Interfaces	Eligibility Determination	39724	If the Primary Contact's address is out side of California, California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall use the following criteria for County of Responsibility (COR) assignment: 1. If non-primary household members on the case have address(s) in California, then the county of the first non-primary household member added to the case will be used as COR for DER/DER-U and any MEDS transactions. 2. If all household members are out of state, COR that will be used to send any MEDS transactions will be 99.
Interfaces	Eligibility Determination	39725	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall not send the FIPSCountyCode on the DER/DER-U for an out of state address.
Interfaces	Eligibility Determination	39729	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall send an EERC to SAWS when an individual has been determined ineligible/discontinued due to residing out-of-state and out-of-country.
Interfaces	Eligibility Determination	39731	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall turn off the following business validations to allow out-of-state addresses to be received in EDR from SAWS and allow self attestation of Married Filing Jointly association from SAWS: BV#32 - Resident Address Other than California BV#27 - Current Year Tax Filing Status BV# 175 - Current Year Tax Filing Status Spouse
Interfaces	Eligibility Determination	39732	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall run eligibility and a DER / DER-U will be sent by California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) to SAWS, as applicable, if there are any changes to the Out of Country Address Indicator for any person from California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) access channel.
Interfaces	Eligibility Determination	39733	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall run eligibility and a DER / DER-U will be sent by California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) to SAWS, as applicable, if there are any changes to the Tax Filing Status association for any person from California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) access channel.
Interfaces	Eligibility Determination	39734	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall run eligibility and a DER / DER-U will be sent by California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) to SAWS, as applicable, if there is any change to the 'State' data element of an address for a person from California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) access channel
Interfaces	Eligibility Determination	39769	For authenticateIVRUser endpoint, California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall provide five different response codes to the Covered California IVR system when authenticating users.
Interfaces	Eligibility Determination	39770	For authenticateIVRUser endpoint, California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall send a response to the IVR to indicate that the caller is not authenticated as no cases were found.

Appendix A-4 - SOW Exhibit A - System Requirements Specification
(Extracted from CalHEERS RTM)

Category	Sub Category	Req ID	Requirement
Interfaces	Eligibility Determination	39771	For authenticateIVRUser endpoint, California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall send a response to the IVR to indicate that the consumer is authenticated with only one active case number.
Interfaces	Eligibility Determination	39772	For authenticateIVRUser endpoint, California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall send a response to the IVR to indicate that the consumer is authenticated with multiple active cases for a maximum of 4 cases.
Interfaces	Eligibility Determination	39773	For authenticateIVRUser endpoint, California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall send a response to the IVR to indicate that more than 4 active cases were found.
Interfaces	Eligibility Determination	39774	For authenticateIVRUser endpoint, California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall send a response to the IVR to indicate that the caller is authenticated with only inactive cases found.
Interfaces	Eligibility Determination	39775	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall send a response to the IVR with case data for upto 4 active cases.
Interfaces	Eligibility Determination	39776	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall send the case number(s) for all active case(s) upto 4 active cases.
Interfaces	Eligibility Determination	39795	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall send the entire SSN as part of the response to IVR system.
Interfaces	Eligibility Determination	39796	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall send the INDV_ID as part of the response to the IVR system.
Interfaces	Eligibility Determination	39797	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall expose the GI Get API to IVR to fetch the enrollment data.
Interfaces	Eligibility Determination	39798	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) OAG shall authenticate IVR request for GI Get API and return GI REST response without any California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) application intervention.
Interfaces	Eligibility Determination	39799	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall accept the entire SSN as part of the request from IVR system and shall use the entire SSN for preparing the response to IVR system.
Interfaces	Eligibility Determination	39800	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall convert the existing IVR implementation from SOAP to REST.
Interfaces	Eligibility Determination	39801	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall convert authenticateIVRUser service from SOAP to REST.
Interfaces	Eligibility Determination	39802	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall convert updateUserConsent service from SOAP to REST.
Interfaces	Eligibility Determination	39803	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall add new validation error message for request parameters of updateUserConsent.
Interfaces	Eligibility Determination	39851	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall set the exchange informational flag to "No" when there is a change to case data, MAGI Medi-Cal, MCAP, CCHIP, Non-MAGI referral, or a person is soft paused/carry forward; Otherwise the flag will be set to "Yes".
Interfaces	Eligibility Determination	40143	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall send via eHIT an Eligibility Evaluation Reason Code (EERC) when an individual is ineligible to MAGI Medi-Cal programs due to being enrolled in APTC/CSR/State Subsidy for the benefit month(s) requested.
Interfaces	Eligibility Determination	40144	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall update the CX EERC code to only be output when SAWS is requesting a prior period that is within a person's Carry Forward transition period and up to 3 Retro months prior to the transition month.
Interfaces	Eligibility Determination	40197	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall have the functionality to consume Aid Codes authorized by SAWS when eligibility on the Disposition differs from California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) results
Interfaces	Eligibility Determination	40209	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall have the functionality to consume override reason from SAWS when Medi-Cal eligibility on the Disposition differs from California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) results.
Interfaces	Eligibility Determination	40210	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall have the functionality to consume an Aid Code, Program Status, Begin Date, and End Date from SAWS when eligibility on the Disposition differs from California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) results.
Interfaces	Eligibility Determination	40245	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall have the functionality to trigger business rules engine when the Medi-Cal Aid Code authorized by SAWS differs from that provided by California Healthcare Eligibility, Enrollment and Retention System (CalHEERS).
Interfaces	Eligibility Determination	40252	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall have the functionality to suppress unsolicited DER that was generated from consuming disposition and re-evaluating eligibility.
Interfaces	Eligibility Determination	40254	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall have the functionality to clear MEDS MEC cache after disposition from SAWS is received with a Non-MAGI Medi-Cal MEC Aid Code.
Interfaces	Eligibility Determination	40255	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall have the functionality to update the MEC aid codes 5L, 8L, 0G and 0H in the California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) MEC tables based on BRF01.14 - Reference and Appendix, Section C MEC Aid Code Table.
Interfaces	Eligibility Determination	40322	SIR 156776: California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall populate the county code based on the zip code provided for mailing address, if county code is not received in an EDR from SAWS, based on the county code to zip code mapping maintained in California Healthcare Eligibility, Enrollment and Retention System (CalHEERS).
Interfaces	Eligibility Determination	40323	SIR 121340: California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall not send an HX05 transaction to MEDS for members that are newly added to an application during a RAC/Renewal where COR is changed.
Interfaces	Eligibility Determination	40394	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall send an Eligibility Evaluation Reason Code of "MAGI Medi-Cal: Awaiting Review" (RV) on the DER/DER-U when Eligibility Review is required by SAWS.
Interfaces	Eligibility Determination	40395	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall send a DER-U with "Exchange Info Update Ind" defaulted to "Yes" when confirmation for MAGI Medi-Cal discontinuance is received from SAWS.
Interfaces	Eligibility Determination	40456	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall update the schema used for Fraud Archive Reporting Service (FARS) from H66.1 to H140.
Interfaces	Eligibility Determination	40457	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall have the functionality to receive 'RF3' for FinalDecisionCode element in FARS response and initiate downstream impact to application flow.
Interfaces	Eligibility Determination	40458	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall update the schema used for Remote Identity Proofing (RIDP) from H1.1 to H139.
Interfaces	Eligibility Determination	40459	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall update the FARS mock service to implement 'RF3' for FinalDecisionCode element

Appendix A-4 - SOW Exhibit A - System Requirements Specification
(Extracted from CalHEERS RTM)

Category	Sub Category	Req ID	Requirement
Interfaces	Eligibility Determination	40460	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall update Mock Services to translate a testing for SSN when the service is live for which the SSN passed is considered invalid.
Interfaces	Eligibility Determination	40665	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall set VLP No Call Reason Code to "02" when the following criteria is met: individual has attested to not being "Lawfully Present" and the immigration status is either not "Lawfully Present" or "Document or Status Not Listed" or "Null".
Interfaces	Eligibility Determination	40666	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall send a VLP No Call Reason Code 02 on the DER/DER-U for individuals who meet the criteria for VLP No Call Reason Code 02.
Interfaces	Eligibility Determination	40667	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall display the VLP No Call Reason Code 02 messaging on the "Personal Verifications" section of the "Manual Verifications" Page for the individuals who meet the criteria for VLP No Call Reason Code 02.
Interfaces	Eligibility Determination	40717	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall send Citizen/Alien Indicator (DE #2009) value as '4' to MEDS for individuals: 1. If VLP returns COA codes of FSM, MIS, or PAL (COA Codes for the Immigration status of : "Citizen of Micronesia, the Marshall Islands, or Palau") 2. If VLP does not return a COA Code and the individual attest to the Immigration status of : "Citizen of Micronesia, the Marshall Islands, or Palau"
Interfaces	Eligibility Determination	40718	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall update MEDS Schema for DE # 2009 and add code '4' to be sent to MEDS.
Interfaces	Eligibility Determination	40719	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall send the Citizen/Alien Indicator (DE #2009) value as '4' to MEDS on HX18, HX20 (all ESAC), HX12, HX34 and RX20 transactions if applicable.
Interfaces	Eligibility Determination	40785	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall support all California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) related changes and support required for C-IV to migrate to the CalSAWS System.
Interfaces	Eligibility Determination	40792	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall update the reference tables for CIV to LRS migration.
Interfaces	Eligibility Determination	40793	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall update the reference table containing FIPS county code.
Interfaces	Eligibility Determination	40794	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall update the reference table containing consortia code.
Interfaces	Eligibility Determination	40795	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall modify EDR/ EDR-C/ CancelDER/ DER processing logic to support C-IV to LRS migration.
Interfaces	Eligibility Determination	40796	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall implement the configurable logic to turn on/ off code changes related to C-IV to CalSAWS migration to support R21.9 and CalSAWS migration go-live.
Interfaces	Eligibility Determination	40828	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall send an Eligibility Evaluation Reason Code of "Consumer Reapplied from the California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) Portal, Negative Action has been lifted" (RA) on the DER-U when Negative Action is lifted at reapplication from the California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) Portal.
Interfaces	Eligibility Determination	40829	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall send an Eligibility Evaluation Reason Code of "Consumer Reapplied from the California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) Portal, Non-Compliance has been lifted" (RC) on the DER-U when Non-Compliance is lifted at reapplication from the California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) Portal.
Interfaces	Eligibility Determination	40836	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall send the HX18 transaction to MEDS for consumers that do not have active eligibility who are reapplying through the California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) Portal.
Interfaces	Eligibility Determination	40837	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall send the HX20 ESAC-1 transaction to MEDS for consumers that do not have active eligibility who are reapplying through the California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) Portal if they are determined Eligible or Conditionally Eligible for MAGI Medi-Cal.
Interfaces	Eligibility Determination	40839	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall update eHIT to include Negative Action and/or Non-Compliance in the California Healthcare Eligibility, Enrollment and Retention System (CalHEERS)-SAWS eHIT Interface within a budget section for both MAGI Medi-Cal and APTC
Interfaces	Eligibility Determination	40840	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall remove the suppression logic for the HX18 transaction to MEDS for Accelerated Enrollment aid code 8E.
Interfaces	Eligibility Determination	40848	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall provide SAWS the capability to search California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) for existing California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) case information using search parameters via a new endpoint separate from eHIT.
Interfaces	Eligibility Determination	40849	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall implement a new Search Request transaction from SAWS to California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) that shall send parameters that California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall use to search for existing California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) cases in California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) according to one of the following search types: - California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) Case ID - California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) Application ID - SSN or ATIN or ITIN - SCIN - FN and LN (Soundex match) and DOB - FN and LN (Soundex match) and DOB and CIN or SSN or ATIN or ITIN - SAWS Case Number and FIPS County Code
Interfaces	Eligibility Determination	40850	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall add a search type indicator to the new Search Request transaction for SAWS to notify California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) of which search type should be used for the transaction.
Interfaces	Eligibility Determination	40851	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall search for a California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) case with an exact match to the parameters provided in a Search Request for the following search types: - California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) Case ID - California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) Application ID

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Interfaces	Eligibility Determination	40852	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall search for an individual with an exact match to the parameters provided in a Search Request for the following search types: - SSN or ATIN or ITIN - SCIN
Interfaces	Eligibility Determination	40853	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall search for an individual with a phonetic match to First Name and Last Name parameters, and an exact match to other parameters provided in a Search Request for the following search types: - FN and LN and DOB (Soundex match) - FN and LN and DOB and CIN or SSN or ATIN or ITIN (Soundex match)
Interfaces	Eligibility Determination	40854	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall implement a new Search Response transaction from California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) to SAWS that shall send the following information for every individual that is on a California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) case that matches to the search parameters provided in the Search Request: - Individual First Name - Individual Last Name - Date of Birth - SSN/ATIN/ITIN - California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) Case ID - California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) Application ID - SCIN - California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) Case Status - California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) Application Status - Actively Linked SAWS Case Number - Actively Linked SAWS Case County - Last Associated SAWS Case Number - Last Associated SAWS Case County - Latest COR - Latest Eligibility Statuses for Medi-Cal Programs - Latest Eligibility Statuses for Covered CA Programs - Actively Enrolled in Plan Indicator - Account Created Indicator - Primary Contact Indicator - Person Status Indicator - California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) Case Person Number - SAWS Case Person Number
Interfaces	Eligibility Determination	40855	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall search for a California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) case that is either actively linked to the SAWS case corresponding to the SAWS Case Number and FIPS County Code provided in the Search Request, or a California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) case where the last associated case linkage is to the SAWS case corresponding to the SAWS Case Number and FIPS County Code provided in the Search Request.
Interfaces	Eligibility Determination	40856	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall have the functionality to support a REST based implementation for CalSAWS and SOAP based implementation for CalWIN for the new Search Transaction.
Interfaces	Eligibility Determination	40857	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall log the Search transaction Request / Response message information in a new transaction table in the database.
Interfaces	Eligibility Determination	40858	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall send either up to 20 California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) cases in the Search Response or no results and an error message informing SAWS that the maximum threshold was reached if more than 20 California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) cases were found to match the search parameters provided in the Search Request.
Interfaces	Eligibility Determination	40859	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall timeout the Search Response if no response is generated within 30 seconds of receiving the Search Request and send a error response with the corresponding timeout error code and message.
Interfaces	Eligibility Determination	40863	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall update the CancelDER transaction to add new functionality to allow SAWS to change the COR for an active California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) case.
Interfaces	Eligibility Determination	40864	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall add a new cancel reason code to the CancelDER schema that shall be used to indicate that a CancelDER transaction is being used to update the COR for an active California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) case.
Interfaces	Eligibility Determination	40865	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall update the DER ID field in the CancelDER schema to be an optional field when the CancelDER is being sent to update COR for a California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) case.
Interfaces	Eligibility Determination	40866	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall add a new Update COR field to the CancelDER schema that shall be populated with the FIPS county code of the county the COR is being updated to when the CancelDER is used to update COR.
Interfaces	Eligibility Determination	40867	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall update BV 169 to accept a new cancel reason code that shall be used to indicate that a CancelDER is being used to update the COR for a California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) case.
Interfaces	Eligibility Determination	40868	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall update BV 164 and 165 to be suppressed when a CancelDER is being used to update the COR for a California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) case based on the cancel reason code provided.

Appendix A-4 - SOW Exhibit A - System Requirements Specification
(Extracted from CalHEERS RTM)

Category	Sub Category	Req ID	Requirement
Interfaces	Eligibility Determination	40869	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall update BV 164 to be triggered when California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) receives a CancelDER with no DER ID when the cancel reason code provided is one of the following: - 01 – Application opened in error - 04 – Duplicate case
Interfaces	Eligibility Determination	40870	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall update BV 178 to be triggered when California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) receives a CancelDER to update the COR for an inactive California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) case.
Interfaces	Eligibility Determination	40871	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall update the COR for a California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) case using the information provided on a CancelDER when the cancel reason code is 'Update COR' and redetermine eligibility using the updated COR to send a DER-U to the updated COR.
Interfaces	Eligibility Determination	40872	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall update the COR Reassignment Enablement batch to delink a California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) case from its linked SAWS case when the COR is released.
Interfaces	Eligibility Determination	40873	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall perform a one time data fix to end date SAWS case linkage for all California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) cases where the COR has been enabled to be reassigned.
Interfaces	Eligibility Determination	40874	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall update the EDR transaction to provide SAWS the functionality to override case linkage outside of the current ICT process.
Interfaces	Eligibility Determination	40875	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall add a case linkage override indicator to the EDR schema for SAWS to indicate that the existing case linkage for a case should be updated to the case linkage provided in the EDR.
Interfaces	Eligibility Determination	40876	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall add a new BV 194 that will trigger if either the SAWS case or California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) case provided in the EDR for a case linkage override have ongoing or pending Medi-Cal eligibility in a different county than the associated California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) case.
Interfaces	Eligibility Determination	40877	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall update BVs 9, 15, and 86 to be suppressed when California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) receives an EDR with a case linkage override flag.
Interfaces	Eligibility Determination	40878	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall add logic to BV 7 to trigger the BV when California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) receives an EDR with no California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) case info and a case linkage override flag.
Interfaces	Eligibility Determination	40879	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall turn off BV 139 so it is no longer triggered when California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) receives an EDR linking a California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) case with no prior case linkage or referral to a SAWS case.
Interfaces	Eligibility Determination	40880	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall suppress the newly added BV 194 when the EDR provided includes a California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) case that has ongoing or pending Medi-Cal eligibility (including eligibility that is under review) and both a case linkage override flag and an ICT flag sent as 'Y'.
Interfaces	Eligibility Determination	40881	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall process an EDR when both the case linkage override flag and ICT flag are set as 'Y' by updating case linkage based on the California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) and SAWS case information sent in the EDR as long as the SAWS case sent in the EDR is currently associated to a different California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) case with no ongoing or pending Medi-Cal eligibility (including eligibility that is under review).
Interfaces	Eligibility Determination	40882	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall have the functionality to inactivate an individual from a case from SAWS access channel or update the SAWS Person Number.
Interfaces	Eligibility Determination	40883	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall only be able to inactivate an individual from a case if they have no ongoing or pending eligibility (including any eligibility that is under review) to both Medi-Cal and Covered California programs.
Interfaces	Eligibility Determination	40884	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall add a new field 'Update SAWS Person Association' to the eHIT schema for an EDR transaction for SAWS to indicate that the SAWS Person Number for an individual on a case is being updated.
Interfaces	Eligibility Determination	40885	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall update BV 19 to validate that all active individuals with ongoing or pending eligibility (including any eligibility that is under review) on a case are received for an EDR being processed for the current month or a future month.
Interfaces	Eligibility Determination	40886	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall update the SAWS Case Person Numbers for any person on the case where an 'Update SAWS Person Association' flag has been provided as 'Y' using the SAWS Case Person Number provided in the EDR.
Interfaces	Eligibility Determination	40887	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall add a business validation that will trigger if the SAWS Case Person Numbers updated on a case using the 'Update SAWS Person Association' flag results in active members that do not have unique valid SAWS Case Person Numbers.
Interfaces	Eligibility Determination	40888	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall add a business validation that will trigger if the 'Update SAWS Person Association' flag is set as 'Y' when no California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) Case Person Number is provided for the person.
Interfaces	Eligibility Determination	40889	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall update BV 77 to be suppressed for a person with an 'Update SAWS Person Association' flag set as 'Y'.
Interfaces	Eligibility Determination	40890	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall process Dispositions that include an inactive member by bypassing all BVs for inactive California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) Case Person Numbers and the inactive member included in the Disposition shall not be reactivated when California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) processes the Disposition.
Interfaces	Eligibility Determination	40891	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall add functionality to reactivate an inactive individual on a case from SAWS access channel when the inactive individual has no prior person linkage (no existing SAWS Case Person Number)
Interfaces	Eligibility Determination	40892	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall add an "Eligibility Date" field to the Search Request that shall provide the current or future date that shall be used to determine which time period eligibility statuses should be provided for in the Search Response.
Interfaces	Eligibility Determination	40898	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall send the language codes "W" for Hindi and "X" for Punjabi to MEDS when selected as a preferred spoken and/or written language on the following transactions where preferred spoken or written language is a data element: HX12, HX18, HX20 ESAC-1, HX34, and RX20
Interfaces	Eligibility Determination	40899	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall send and receive the Punjabi and Hindi languages when selected for either spoken or written language preferences to SAWS in the California Healthcare Eligibility, Enrollment and Retention System (CalHEERS)-SAWS eHIT Interface
Interfaces	Eligibility Determination	40922	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall update mock services to mock COA codes MIS, PAL, and FSM being returned from VLP.

Appendix A-4 - SOW Exhibit A - System Requirements Specification
(Extracted from CalHEERS RTM)

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Category	Sub Category	Req ID	Requirement
Interfaces	Eligibility Determination	40936	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall send the new Source(s) to SAWS in a DER/DER-U via eHIT.
Interfaces	Eligibility Determination	40984	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall add new eHIT language codes for Punjabi and Hindi languages.
Interfaces	Eligibility Determination	40986	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall send “eng” in the RIDP – Initial Request for a written language preference of Punjabi or Hindi
Interfaces	Eligibility Determination	41123	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall implement code changes to support splitting of eHIT transactions.
Interfaces	Eligibility Determination	41124	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall provide testing support and other resources required for SAWS to facilitate PHE automation as required by DHCS.
Interfaces	Eligibility Determination	41323	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall update the COR Reassignment Enablement Batch to stage and process cases that are Non MAGI Medi-Cal eligible only with no open referrals.
Interfaces	Eligibility Determination	41324	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall implement a new BV to be triggered when the SAWS case provided in an EDR is actively linked to multiple California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) cases.
Interfaces	Eligibility Determination	41471	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall support all California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) related changes required for CalWIN to migrate to the CalSAWS System for Placer, Contra Costa, and Yolo Counties.
Interfaces	Eligibility Determination	42899	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) SAWS eHIT interface for California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) Outbound #7 SFTP Document transfer shall execute a bundling and zip process, known as Zip of Zip.
Interfaces	Eligibility Determination	42900	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) SAWS eHIT interface for California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) Outbound #7 SFTP Document transfer shall execute two patterns for the Zip of Zip process, inner zip encryption or outer zip encryption.
Interfaces	Eligibility Determination	42901	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall prepare the Outbound #7 SFTP for the Zip of Zip process for C-IV as inner zip encrypted and outer zip bundle.
Interfaces	Eligibility Determination	42902	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall prepare the Outbound #7 SFTP for the Zip of Zip process for CalWIN as inner zip encrypted and outer zip bundle.
Interfaces	Eligibility Determination	42903	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall prepare the Outbound #7 SFTP for the Zip of Zip process for LEADER as outer zip encrypted and outer zip bundle.
Interfaces	Eligibility Determination	43215	"California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall reinstate inactive individuals to the prior California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) Case Person Number, when received in Eligibility Determination Request (EDR), when the following occurs: 1. California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) Case Number and California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) Person Number match; OR 2. SAWS Case Number and SAWS Person Number match when California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) Case Number and California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) Person Number are missing from the EDR"
Interfaces	Eligibility Determination	43222	The Contractor shall provide support for the testing of the EDD Income Verification Service.
Interfaces	Eligibility Determination	43269	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall have the ability to send the 0D aid code to MEDS on initial transaction (ESAC-1) HX20
Interfaces	Eligibility Determination	43270	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall have the ability to update demographic information on the HX12 transaction for MCAP consumers
Interfaces	Eligibility Determination	43271	the California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall have the ability to discontinue aid code 0D in MEDS for MCAP program on the HX40 transaction
Interfaces	Eligibility Determination	43272	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall have the ability to send an application transaction HX18 to MEDS for MCAP program determination
Interfaces	Eligibility Determination	43280	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) SAWS eHIT interface shall send MCAP eligibility status through the APTC eligibility status code when the consumer is found Eligible or Pending Eligible for the MCAP program.
Interfaces	Eligibility Determination	43335	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall have the ability to discontinue aid code 2C in MEDS for CCHIP program on the HX40 transaction.
Interfaces	Eligibility Determination	43366	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall have the ability to update demographic information on the HX12 transaction for CCHIP consumers.
Interfaces	Eligibility Determination	43367	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall have the ability to send HX20 (ESAC-2) for eligibility updates for CCHIP consumers.
Interfaces	Eligibility Determination	43369	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall have the ability to send the 2C aid code to MEDS on initial transaction HX20 (ESAC-1).
Interfaces	Eligibility Determination	43379	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall send the CCHIP aid code via the California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) MEDS Interface on the HX20, HX12 and HX40 transactions.
Interfaces	Eligibility Determination	44851	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) SAWS eHIT interface shall include the Administrative Verification for Former Foster Youth applicants.
Interfaces	Eligibility Determination	44852	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) SAWS eHIT interface shall include the following elements in the eHIT Schema: - Document Category of "TBD" - Document Types within Document Category of TBD of: a) California Verification Documents b) Out of State Verification Documents c) American Indian or Alaska Native Tribal Verification Documents
Interfaces	Eligibility Determination	44853	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) SAWS eHIT interface shall include the CaretakerRelationship element in the PersonDemographicInfo node.
Interfaces	Eligibility Determination	44854	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) SAWS eHIT interface shall add the new element to the schema for "Foster Care Person Location" and the element values listing all "US States", "US Territories", "District of Columbia", "I don't know", and "An American Indian or Alaska Native Tribe".
Interfaces	Eligibility Determination	44855	"The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) SAWS eHIT interface shall include the following: - new program status for CCHIP - CCHIP start and end date - CCHIP renewal date - CCHIP contingent end date (verifications)"

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(Extracted from CalHEERS RTM)

Category	Sub Category	Req ID	Requirement
Interfaces	Eligibility Determination	44856	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) SAWS eHIT Interface shall include the MAGI Income.
Interfaces	Eligibility Determination	44857	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) SAWS eHIT Interface shall include the MAGI Income Limit.
Interfaces	Eligibility Determination	44858	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) SAWS eHIT Interface shall remove the NaturalCitizenInd element.
Interfaces	Eligibility Determination	44859	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) SAWS eHIT Interface shall update the Image Document Type Table code H3 to Non-MAGI NOA for Batch Document Transfer #7
Interfaces	Eligibility Determination	44860	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) SAWS eHIT Interface shall update the Image Document Type Codes Table to include MAGI/Mixed MAGI NOA for Batch Document Transfer #7
Interfaces	Eligibility Determination	44973	For the California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) MEDS Interface, the HX18 Create Application and HX20 Create Eligibility services shall populate the California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) Primary Applicant residence County Code for all case members in the provided for County of Responsibility field per service.
Interfaces	Eligibility Determination	45086	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) SAWS eHIT Interface for eligibility determination request companion (EDR-C) processing shall provide sequential processing of a unique county/case identifier to mitigate the concurrency issue.
Interfaces	Eligibility Determination	45109	The Contractor shall validate the connectivity between the California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) test environment and the EDD Pre-Production Test environment to ensure testing can proceed.
Interfaces	Eligibility Determination	45110	The Contractor shall conduct system testing of the EDD Income Verification Service using test scenarios shared with the EDD testing team.
Interfaces	Eligibility Determination	45111	The Contractor shall conduct performance testing of the EDD Income Verification Service using test scenarios shared with the EDD testing team.
Interfaces	Eligibility Determination	45240	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall support CalACES in the TM05 environment from 9/28/18 through 11/14/18 in validating the results associated with EDRs with Rescind reason code processing.
Interfaces	Eligibility Determination	45241	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall support CalACES with time shifting activities and back end validations.
Interfaces	Eligibility Determination	45788	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall support all California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) related changes and support required for Santa Clara, Tulare and Contra Costa counties to migrate from CalWIN to CalSAWS System.
Interfaces	Eligibility Determination	45868	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall establish RJ74 connectivity service with CMS.
Interfaces	Eligibility Determination	45869	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall implement new 3scale policies and CMS OAuth token for RJ74 service.
Interfaces	Eligibility Determination	45870	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall implement new Fuse application for RJ74 service.
Interfaces	Eligibility Determination	45871	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall implement token refresh in CMS RJ74 service calls.
Interfaces	Eligibility Determination	45872	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall update VCI service from a SOAP Based service (H138) to a REST (JSON) based service (RJ138), based on schema from CMS.
Interfaces	Eligibility Determination	45873	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall enforce schema validations as provided in the BSD as provided by CMS for the JSON VCI Service.
Interfaces	Eligibility Determination	45874	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall not populate an empty optional tags for the request parameters to avoid schema transmission rejections.
Interfaces	Eligibility Determination	45875	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall utilize the LW_VCI component to invoke the REST service in place of SOAP calls.
Interfaces	Eligibility Determination	45876	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall update the VIED to incorporate the VCI request and response for real-time REST API.
Interfaces	Eligibility Determination	45877	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall update VCI Fuse(Migrated OSB service) service.
Interfaces	Eligibility Determination	45878	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall transmit data to CMS via the REST API Channel using a TLS 1.2-encrypted endpoint.
Interfaces	Eligibility Determination	45879	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall update the 3Scale/Fuse policies to host the Context Path and process VCI Payload (RJ138) Service.
Interfaces	Eligibility Determination	45880	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall implement OAuth token based authentication with CMS for VCI (RJ138) service.
Interfaces	Eligibility Determination	45881	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall remove the leading and trailing spaces from Request input parameters for VCI (RJ138) Service.
Interfaces	Eligibility Determination	45882	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall replace the First, Middle, Last Name containing only the following unallowable special characters (~!@#%^(*)_+=[\] ';:/?.,) with Unknown so the record does not error out.
Interfaces	Eligibility Determination	45883	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall strip and concatenate any unallowable special characters to CMS/VCI for all the Name Fields (FN, MN, LN).
Interfaces	Eligibility Determination	45884	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall create the new Mock Services to simulate responses from the REST based VCI service in order to support testing.
Interfaces	Eligibility Determination	45893	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall update the SSA Composite Service from a SOAP Based service (H3) to a REST (JSON) based service (RJ3), based on schema from CMS.
Interfaces	Eligibility Determination	45894	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall enforce schema validations as provided in the BSD as provided by CMS for the JSON SSA Service.
Interfaces	Eligibility Determination	45895	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall not populate an empty optional tags for the request parameters to avoid schema transmission rejections.
Interfaces	Eligibility Determination	45896	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall utilize the LW_SSA component to invoke the REST service in place of SOAP calls.
Interfaces	Eligibility Determination	45897	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall update the VIED to incorporate the SSA request and response for real-time REST API.
Interfaces	Eligibility Determination	45898	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall update SSA Fuse(Migrated OSB service) service.
Interfaces	Eligibility Determination	45899	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall transmit data to CMS via the REST API Channel using a TLS 1.2-encrypted endpoint.
Interfaces	Eligibility Determination	45902	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall normalize SSA request and response received from CMS in HBX Database.
Interfaces	Eligibility Determination	45903	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall remove the leading and trailing spaces from Request input parameters for SSA (RJ3) Service.
Interfaces	Eligibility Determination	45904	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall replace the First, Middle, Last Name containing only the following unallowable special characters (~!@#%^(*)_+=[\] ';:/?.,) with "Unknown" so the record does not error out.

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Interfaces	Eligibility Determination	45905	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall strip and concatenate any unallowable special characters to CMS/SSA for all the Name Fields (FN, MN, LN).
Interfaces	Eligibility Determination	45906	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall create the new Mock Services to simulate responses from the REST based SSA service in order to support testing.
Interfaces	Eligibility Determination	45941	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall replace the First, Middle, Last Name of names that contain exclusively special characters (^~!@#\$\$%^*()_ +-=[]{}<&\ '";:/?>,.) with "Unknown" so the record does not error out for PVC Batches.
Interfaces	Eligibility Determination	45942	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall not send any special characters (^~!@#\$\$%^*()_ +-=[]{}<&\ '";:/?>,.) to CMS for all the Name Fields (FN, MN, LN) for Medicare PVC Payload.
Interfaces	Eligibility Determination	45948	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall exclude the individuals with an active or expired Medicare ROP date for the current benefit year from the automated PVC process for Medicare.
Interfaces	Eligibility Determination	45949	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall exclude the individuals with an active or expired Deceased ROP date for the current benefit year from the automated PVC process for Deceased.
Interfaces	Eligibility Determination	46096	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall support all California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) related changes and support required for San Diego, San Mateo, Santa Cruz and Solano counties to migrate from CalWIN to CalSAWS System.
Interfaces	Eligibility Determination	46122	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall support all California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) related changes and support required for Sacramento, San Luis Obispo and San Francisco counties to migrate from CalWIN to CalSAWS System.
Interfaces	Eligibility Determination	46328	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall generate a generic case note for the automated process that occurs after the Medicare and Deceased Verification Expiration date for the household members who have not responded.
Interfaces	Eligibility Determination	46329	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall exclude cases from the Periodic Verification process for Medicare, if the case has an Inactive case status or if the case has at least one individual that meets the following criteria: - In carry forward status; or - In QHP hold
Interfaces	Eligibility Determination	46330	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall have an automated process at the end of Medicare Verification Expiration date if the responses have not been provided for any household members: - Remove the Periodic Verification flag - Update the verification status to "Pending" to match the PVC response - Use the Medicare response to discontinue eligibility to exchange subsidy programs (APTC/CAPS) - Use the Medicare response to discontinue eligibility to financial based baseline Cost Sharing Reduction program for non AI/AN CSR. - Use the Medicare response to discontinue a financial based baseline Cost Sharing Reduction from X5/CS02 and transition to X6/CS03 Aid code for AI/AN CSR less than or equal to 300% FPL. - Suppress Non MAGI referrals for cases
Interfaces	Eligibility Determination	46331	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall exclude cases from the Periodic Verification (PVC) process for deceased, if the case has an Inactive case status or if the case has at least one individual meets the following criteria: - In carry forward status; or - In QHP hold
Interfaces	Eligibility Determination	46332	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall have an automated process at the end of the Deceased Verification Expiration date if the responses have not been provided for any household members: - Remove the Periodic Verification flag - Update the verification status to "Pending" to match the PVC response - Use the Deceased response to discontinue eligibility to all exchange programs (CCP/APTC/CAPS/CSR)
Interfaces	Eligibility Determination	46337	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall continue to send Other outstanding program referrals (CalFresh, CalWORKS and Medi-Cal) from prior system generated DER-U until program referral disposition is received from SAWS.
Interfaces	Eligibility Determination	46338	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall add the Spanish translation for field 'Same as home address' in Review Application - Household Address section
Interfaces	Eligibility Determination	46339	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall relax the schema validations for RRV Inbound Batch for all the four services (IRS, SSA, VCI and Medicare) to process the Manifest Response file received from CMS.
Interfaces	Eligibility Determination	46340	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall remove schema validations from RRV Inbound Batch context file.
Interfaces	Eligibility Determination	46341	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall implement validation logic to validate Manifest response file received from CMS.
Interfaces	Eligibility Determination	46342	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall implement RRV processing logic to process the Manifest Response file received from CMS.
Interfaces	Eligibility Determination	46358	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall display the Schema Validation issue for the response code HE007000 when received from CMS/SSA at the Individual Level on the Personal Verification Page in the Error Code(s) column.
Interfaces	Eligibility Determination	46378	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall update IFSV service from a SOAP Based service (H09) to a REST (JSON) based service (RJ09), based on schema from CMS.
Interfaces	Eligibility Determination	46379	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall enforce schema validations as provided in the BSD as provided by CMS for the JSON IFSV (RJ09) Service.
Interfaces	Eligibility Determination	46380	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall not populate an empty optional tags for the (RJ09) IFSV request parameters to avoid schema transmission rejections.
Interfaces	Eligibility Determination	46381	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall update IFSV(RJ09) Fuse(Migrated OSB service) service.
Interfaces	Eligibility Determination	46385	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall remove the leading and trailing spaces from Request input parameters for IFSV (RJ09) Service.

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Interfaces	Eligibility Determination	46386	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall strip and concatenate any unallowable special characters(`~!@#%^(*)_+ -=[]{}<&\\ '";:/?>,.) to CMS for all the Name Fields (FN, MN, LN, Suffix) for IFSV (RJ09) Service.
Interfaces	Eligibility Determination	46387	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall replace the First, Middle, Last Name containing only the following unallowable special characters (`~!@#%^(*)_+ -=[]{}<&\\ '";:/?>,.) with "Unknown" so the record does not error out for IFSV (RJ09) Service.
Interfaces	Eligibility Determination	46388	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall normalize IFSV(RJ09) request and response received from CMS in HBX Database.
Interfaces	Eligibility Determination	46389	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall create the new Mock Services to simulate responses from the REST based IFSV service (RJ09) in order to support testing.
Interfaces	Eligibility Determination	46390	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) will update the mock rules for all income source scenarios to replace the response codes HX000000 to HE020004.
Interfaces	Eligibility Determination	46392	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall update ESI service from a SOAP Based service (H14) to a REST (JSON) based service (RJ14), based on schema from CMS.
Interfaces	Eligibility Determination	46393	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall enforce schema validations as provided in the BSD as provided by CMS for the JSON ESI (RJ14) Service.
Interfaces	Eligibility Determination	46394	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall not populate an empty optional tags for the ESI (RJ14) request parameters to avoid schema transmission rejections.
Interfaces	Eligibility Determination	46395	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall update ESI (RJ14) Fuse(Migrated OSB service) service.
Interfaces	Eligibility Determination	46399	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall remove the leading and trailing spaces from Request input parameters for ESI (RJ14) Service.
Interfaces	Eligibility Determination	46400	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall strip and concatenate any unallowable special characters (`~!@#%^(*)_+ -=[]{}<&\\ '";:/?>,.) to CMS for all the Name Fields (FN, MN, LN, Suffix) for ESI (RJ14) Service.
Interfaces	Eligibility Determination	46401	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall replace the First, Middle, Last Name containing only the following unallowable special characters (`~!@#%^(*)_+ -=[]{}<&\\ '";:/?>,.) with "Unknown" so the record does not error out for ESI (RJ14) Service.
Interfaces	Eligibility Determination	46402	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall normalize ESI (RJ14) request and response received from CMS in HBX Database.
Interfaces	Eligibility Determination	46403	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall create the new Mock Services to simulate responses from the REST based ESI (RJ14) service in order to support testing.
Interfaces	Eligibility Determination	46404	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall perform Integration performance testing for (RJ14) ESI service.
Interfaces	Eligibility Determination	46405	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall update Non-ESI service from a SOAP Based service (H31) to a REST (JSON) based service (RJ31), based on schema from CMS.
Interfaces	Eligibility Determination	46406	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall enforce schema validations as provided in the BSD as provided by CMS for the JSON Non-ESI (RJ31) Service.
Interfaces	Eligibility Determination	46407	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall not populate an empty optional tags for the request parameters to avoid schema transmission rejections for Non-ESI (RJ31) Service.
Interfaces	Eligibility Determination	46408	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall update Non-ESI (RJ31) Fuse(Migrated OSB service) service.
Interfaces	Eligibility Determination	46412	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall remove the leading and trailing spaces from Request input parameters for Non-ESI (RJ31) Service.
Interfaces	Eligibility Determination	46413	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall strip and concatenate any unallowable special characters (`~!@#%^(*)_+ -=[]{}<&\\ '";:/?>,.) to CMS for all the Name Fields (FN, MN, LN, Suffix) for ESI (RJ14) Service.
Interfaces	Eligibility Determination	46414	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall replace the First, Middle, Last Name containing only the following unallowable special characters (`~!@#%^(*)_+ -=[]{}<&\\ '";:/?>,.) with "Unknown" so the record does not error out for Non-ESI (RJ31) Service.
Interfaces	Eligibility Determination	46415	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall normalize Non-ESI (RJ31) request and response received from CMS in HBX Database.
Interfaces	Eligibility Determination	46416	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall create the new Mock Services to simulate responses from the REST based Non-ESI service (RJ31) in order to support testing.
Interfaces	Eligibility Determination	46417	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall create new mock rules for HE007000 response code for (RJ31) Non-ESI service.
Interfaces	Eligibility Determination	46418	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall perform Integration performance testing for (RJ31) Non-ESI service.
Interfaces	Eligibility Determination	46419	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall deprecate the following Error Response Code, their interpretations on the personal verification screen and their mock rules for IFSV Service as they are deprecated at CMS end. HX021000, HX021001, HX021101, HX021102, HX021103, HX021104, HX021108,HX021110, HX021109, HX021111, HX023000, HX023001, HX005000
Interfaces	Eligibility Determination	46421	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall deprecate the following Error Response Code, their interpretations on the personal verification screen and their mock rules for ESI Service as they are deprecated at CMS end. HE090001, HE090002, HE090003, HE090004, HE090005, HE090006, HE090007,HX005001, HE090008, HE090009, HE090010, HE090011, HE090012, HE090013, HE090014, HE090015, HE090016, HE090019, HE090020.
Interfaces	Eligibility Determination	46422	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall deprecate the following Error Response Code, their interpretations on the personal verification screen and their mock rules for NESI Service as they are deprecated at CMS end. HE060001, HE060002, HE060003, HE060004, HE060005, HE060006, HE060007, HE060009, HE060010, HE060011, HE060012, HE060013, HE060014, HE060015, HE060016, HE060017, HE060018, HE060019, HE060020
Interfaces	Eligibility Determination	46423	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall update the following Error Response Code and their interpretations on the personal verification screen for NESI Service. HE009999, HX005001, HX009000, HE000002, HE000100, HE040001, HE040002, HE040003, HE040004, HE040006, HE040007, HE040008, HE040009, HE040010, HE070006, HE080001, HE080002, HX070001, HX070002, HX070003, HX080001, HX080002, HX080003, HX080004
Interfaces	Eligibility Determination	46661	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall add mock services for MEC MEDS where individual has MEC for MAGI Medi-Cal benefits

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Interfaces	Eligibility Determination	46662	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall add a mock service where individual has MEC MEDS for MAGI Medi-Cal (MEC as Y) with a future start date (Current +1 month)
Interfaces	Eligibility Determination	46663	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall add a mock service where individual has MEC MEDS for MAGI Medi-Cal (MEC as Y) with a future future start date (Current +2 month)
Interfaces	Eligibility Determination	46664	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall add a mock service where individual has MEC MEDS for MAGI Medi-Cal (MEC as Y) with benefit end date as current month and the individual has no benefits from future month
Interfaces	Eligibility Determination	46728	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall update the Verify Lawful Presence Service Suite (VLP: Step 1, Step 2, Step 3, Close Case, Retrieve Step 2 and Step 3, Get Case Details and Get Country of Issuance) from a SOAP Based service to a REST "RX142" based service, based on schema provided from CMS.
Interfaces	Eligibility Determination	46729	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall enforce schema validations as provided in the BSD as provided by CMS for the REST XML(RX142) VLP Service.
Interfaces	Eligibility Determination	46730	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall not populate empty optional tags for VLP (RX142) request parameters to avoid schema transmission rejections.
Interfaces	Eligibility Determination	46734	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall deprecate Step 1a and 1b as CMS deprecated the service in September of 2019.
Interfaces	Eligibility Determination	46735	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall block invalid Alien Numbers with the following patterns: xxx123456, 123456xxx, xx123456x, x123456xx from being sent to CMS.
Interfaces	Eligibility Determination	46736	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall update the No call run reason (01) to include the Invalid Alien Patterns that shall be blocked from being sent to CMS.
Interfaces	Eligibility Determination	46737	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall persist the new COA codes in the California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) Database when received from VLP Service:
Interfaces	Eligibility Determination	46738	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall normalize the request sent to CMS and response when received from CMS for all the VLP suite service.
Interfaces	Eligibility Determination	46739	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall close the DHS case when the CMS request for additional documentation from the individual for the Agency Action ESC Code 13, 128, 328, or 386 with COA code PI is returned in Step 1.
Interfaces	Eligibility Determination	46740	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall Invoke or InitiateThirdVerif Web method for ESC code 39 received in Step 1.
Interfaces	Eligibility Determination	46741	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall obtain documentation from the individual prior and then Invoke or InitiateThirdVerif Web method for Major Code 015 or 026 in Step 2.
Interfaces	Eligibility Determination	46742	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall Invoke InitiateThirdVerif Web method and shall indicate the Applicant, Enrollee, or Beneficiary's Cuban/Haitian status and upload a document for status verification ESC Code 328 or 386 returned in Step 1 with following COAs: CC, CH, CP, DT, IN, ML, OP, PR and QNC or Five-Year Bar Indicators set to P.
Interfaces	Eligibility Determination	46743	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall close the DHS case when the CMS request for additional documentation from the individual for the Agency Action ESC Code 328 or 386 returned in Step 1 with following COA: CP and individual attests to Victim of Trafficking.
Interfaces	Eligibility Determination	46744	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall close the DHS case when the CMS request for additional documentation from the individual for the Agency Action ESC Code 385 returned in Step 1 and LPV indicator is set to P.
Interfaces	Eligibility Determination	46745	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall close the DHS case when the CMS request for additional documentation from the individual for the Agency Action ESC Code 368 returned in Step 1 and LPV or QNC indicator is set to P.
Interfaces	Eligibility Determination	46746	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall close the DHS case when the CMS request for additional documentation from the individual for the Agency Action ESC 370 returned in Step 1 and LPV or QNC indicator is set to P.
Interfaces	Eligibility Determination	46747	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall close the DHS case when the CMS request for additional documentation from the individual for the Agency Action ESC 377, 378, 379 in Step 1 and Five-Year Bar Met indicator set to P.
Interfaces	Eligibility Determination	46748	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall close the DHS case when the CMS request for additional documentation from the individual for the Agency Action ESC Code 250, 288, 381, 401, 402 at Step 1 and non-citizen country of birth (NonCitCountryBirthCd) or non-citizen country of citizenship (NonCitCountryCitCd) value is CUB or HITI, and paroled under 1 year, set QNC to P, or ESC Code 250, 288, 381, 401, 402 at Step 1 and non-citizen country of birth (NonCitCountryBirthCd) or non-citizen country of citizenship (NonCitCountryCitCd) value is CUB or HTI, and paroled for any time period set Five-Year Bar to P.
Interfaces	Eligibility Determination	46749	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall close the DHS case when the CMS request for additional documentation from the individual for the Agency Action ESC Code 250, 288, 381, 401, 402 at Step 1 and COA Code is UHP and non-citizen country of birth (NonCitCountryBirthCd) and non-citizen country of citizenship (NonCitCountryCitCd) are null, set Five-Year Bar to P.
Interfaces	Eligibility Determination	46750	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall close the DHS case when the CMS request for additional documentation from the individual for the Agency Action ESC 128, returned with COA Code T1, ST6 in Step 1, or Form I-766 Category Code A16 with ESC 10 and grant date is less than 5 years, Five-Year Bar indicator set to P.
Interfaces	Eligibility Determination	46751	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall Invoke or InitiateThirdVerif Web method for ESC 128 returned in Step 1 with COA Code T1 or ST6, or Form I-766 Category Code A16 with ESC 10, missing the grant date, and Five-Year Bar indicator set to P .
Interfaces	Eligibility Determination	46752	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall close the DHS case when the CMS request for additional documentation from the individual for the Agency Action Major code 07b or 07e with COA Code UHP in Step 2 or Step 3 and any indicator set to P.

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Interfaces		46753	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall deprecate the following logic: 1. California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall close the DHS case when the CMS request for additional documentation from the individual for the Agency Action ESC Code 10 with COA code PI is returned in Step 2. 2. California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall Invoke InitiateThirdVerif Web method and shall indicate the Applicant, Enrollee, or Beneficiary's Cuban/Haitian status and upload a document for status verification ESC Code 10 returned in Step 1 and Five-Year Bar Indicators set to P. 3. California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall Invoke InitiateThirdVerif Web method and shall indicate the Applicant, Enrollee, or Beneficiary's Cuban/Haitian status and upload a document for status verification ESC Code 10 returned in Step 1 with following COAs: CC, CH, CP, DT, IN, ML, OP, PR and QNC or Five-Year Bar Indicators set to P. 4. California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall close the DHS case when the CMS request for additional documentation from the individual for the Agency Action ESC Code 10 returned in Step 1 with following COA: CP and individual attests to Victim of Trafficking. 5. California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall close the DHS case when the CMS request for additional documentation from the individual for the Agency Action ESC 10 or 13 and grant date is less than 5 years, Five-Year Bar indicator set to P 6. California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall Invoke or InitiateThirdVerif Web method for ESC 10 or 13 returned in Step 1 with COA Code T1, ST6 missing the grant date, and Five-Year Bar indicator set to P
	Eligibility Determination		
Interfaces	Eligibility Determination	46754	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall not implement the re-try logic for HE004000 and HE004001 response code when received from CMS.
Interfaces	Eligibility Determination	46755	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall map the response code HE004000 and HE004001 response code when received from CMS at the Individual Level on the Personal Verification Page in the Error Code(s) column.
Interfaces	Eligibility Determination	46756	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall remove the leading and trailing spaces from Request input parameters for VLP (RX142) Service.
Interfaces	Eligibility Determination	46757	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall replace the First, Middle, Last Name containing only the following unallowable special characters (^~!@#%\$%^*()_+ -=[]{}<&\ '";:/?>.,) with "Unknown" so the record does not error out for VLP Service (RX142) Suite
Interfaces	Eligibility Determination	46758	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall strip and concatenate any unallowable special characters to CMS/VLP for all the Name Fields (FN, MN, LN).
Interfaces	Eligibility Determination	46759	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall create the new CMS Mock Services to simulate responses from the REST based VLP service in order to support testing.
Interfaces	Eligibility Determination	46760	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall update the California Healthcare Eligibility, Enrollment and Retention System (CalHEERS)-SAWS VLP Outbound Notify Interface from a SOAP-Based service to a REST-Based service.
Interfaces	Eligibility Determination	46761	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall update the California Healthcare Eligibility, Enrollment and Retention System (CalHEERS)-SAWS VLP Inbound Interface from a SOAP-Based service to a REST-Based service.
Interfaces	Eligibility Determination	46762	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall deprecate Step 1a and 1b from California Healthcare Eligibility, Enrollment and Retention System (CalHEERS)-SAWS VLP Interface as CMS deprecated the service in September of 2019.
Interfaces	Eligibility Determination	46768	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall create the new Mock Services for California Healthcare Eligibility, Enrollment and Retention System (CalHEERS)-SAWS VLP Interface to simulate responses from the REST based service.
Interfaces	Eligibility Determination	46769	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall capture the name (First Name, Middle Name, Last Name, Suffix and Date of Birth) on the document when a consumer attests to being Naturalized or Derived citizen in the HBX Database.
Interfaces	Eligibility Determination	46770	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall create fields on the California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) Portal to allow consumers attesting to being a Naturalized or Derived Citizen in the HBX Database.
Interfaces	Eligibility Determination	46771	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall call VLP with the Name on document or the case name, which ever is present.
Interfaces	Eligibility Determination	46772	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall update the I-94Number data type to include alphanumeric characters up to 11 characters.
Interfaces	Eligibility Determination	46773	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall close the DHS case when the CMS request for additional documentation from the individual for the Agency Action ESC Code 250, 288, 381, 401, or 402 is returned at Step 1 and individual attests to Victim of Trafficking, and paroled under 1 year set the QNC to P; or ESC Code 250, 288, 381, 401, 402 is returned at Step 1 and the individual attests to Victim of Trafficking and paroled for any time period, set Five-Year Bar to P.
Interfaces	Eligibility Determination	46919	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall exclude the individuals with an active or expired Medicare ROP date for the current benefit year from the automated PVC process for Medicare.
Interfaces	Eligibility Determination	46920	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall exclude the individuals with an active or expired Deceased ROP date for the current benefit year from the automated PVC process for Deceased.
Interfaces	Eligibility Determination	47057	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall support all California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) related changes and support required for San Diego, San Mateo, Santa Cruz and Solano counties to migrate from CalWIN to CalSAWS System.
Interfaces	Eligibility Determination	47582	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall support all California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) related changes and support required for Alameda, Fresno and Sonoma counties to migrate from CalWIN to CalSAWS System.
Interfaces	Eligibility Determination	47596	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall update MEDS with new COA codes received from VLP.
Interfaces	Eligibility Determination	47597	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall send DE2009 in the following Citizen/Alien Indicator MEDS Codes for the transaction types HX12, HX18, HX20 ESAC 1, HX20 ESAC 2, HX34, RX20 where applicable for the following COA codes when received from VLP.
Interfaces	Eligibility Determination	47598	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall send DE2009 as code R for COA Codes CQ2, CQ3, SQ4, SQ5, CQ1, OAR, CHP, HHP.
Interfaces	Eligibility Determination	47599	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall close the DHS case for the Agency Action ESC Code 4 and COA Codes HHP, CHP, RCU, RHT returned in Step 1.
Interfaces	Eligibility Determination	47600	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall close the DHS case for the Agency Action ESC Code 250 and COA Codes HHP, CHP, RCU, RHT returned in Step 1.

Appendix A-4 - SOW Exhibit A - System Requirements Specification
(Extracted from CalHEERS RTM)

OTSI CalHEERS RFP #73040873 Addendum 1
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Category	Sub Category	Req ID	Requirement
Interfaces	Eligibility Determination	47601	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall initiate Step 2 if indicators Qualified Non-Citizen or 5 Year Bar are set to P when ESC Code 250 or COA Codes HHP, CHP, RCU, or RHT are returned in Step 1.
Interfaces	Eligibility Determination	47602	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall close the DHS case for the Agency Action ESC Code 250 and COA Codes NHP, VHP returned in Step 1.
Interfaces	Eligibility Determination	47603	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall initiate Step 2 verifications if indicators Qualified Non-Citizen or 5 Year Bar are set to P when ESC Code 250 or COA Codes NHP or VHP are returned in Step 1.
Interfaces	Eligibility Determination	47604	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall close the DHS case for the Agency Action Major Code 07b and COA Codes CHP, HHP, RCU, RHT returned in Step 2.
Interfaces	Eligibility Determination	47605	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall close the DHS case for the Agency Action Major Code 07b and COA Codes CHP, HHP, RCU, RHT returned in Step 3 derived directly from Step 1.
Interfaces	Eligibility Determination	47606	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall close the DHS case for Agency Action Major Code 07b and COA Codes NHP, VHP in Step 2.
Interfaces	Eligibility Determination	47607	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall invoke InitiateThirdVerif Web Method for Agency Action Major Code 07b and COA Codes NHP, VHP in Step 2.
Interfaces	Eligibility Determination	47608	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall close the DHS case for the Agency Action Major Code 07e and COA Codes CHP, HHP, RCU, RHT returned in Step 2.
Interfaces	Eligibility Determination	47609	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall close the DHS case for the Agency Action Major Code 07e and COA Codes CHP, HHP, RCU, RHT returned in Step 3.
Interfaces	Eligibility Determination	47610	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall close the DHS case for the Agency Action Major Code 07e, and COA Codes NHP, VHP returned in Step 2.
Interfaces	Eligibility Determination	47611	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall invoke InitiateThirdVerif Web method for the Agency Action Major Code 07e and COA Codes NHP, VHP in Step 2.
Interfaces	Eligibility Determination	47612	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall close the DHS case for the Agency Action Major Code 07b and COA Codes NHP, VHP returned in Step 3.
Interfaces	Eligibility Determination	47613	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall close the DHS case for the Agency Action Major Code 07e and COA Codes NHP, VHP returned in Step 3.
Interfaces	Eligibility Determination	47614	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall mark a case as closed when HE010058 or HE010052 is returned.
Interfaces	Eligibility Determination	47615	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall review the Step request from SAWS or California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) portal and reject the step request if the step is not appropriate based on the agency action from prior step.
Interfaces	Eligibility Determination	47616	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall send only the Required data elements to CMS when submitting Step 2 or Step 3.
Interfaces	Eligibility Determination	47617	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall create new mock rules to simulate responses from the REST based VLP service for the new COA Codes (CHP, VHP, NHP, HHP, RCU, RHT) in order to support testing.
Interfaces	Eligibility Determination	47618	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall deprecate the following Error Response Code, their interpretations on the personal verification screen and their mock rules for VLP as they are deprecated at CMS end: HX010001, HX010002, HX010003, HX010004, HX010005, HX010006, HX010007, HX010008, HX010009, HE010001, HE010002, HE010003, HE010004, HE010005, HE010006, HE010007, HE010008, HE010009, HE010010, HE010011, HE010012, HE010013, HE010014, HE010015, HE010016, HE010017, HE010018, HE010019, HE010020, HE010021, HE010022, HE010023, HE010024, HE010025, HE010026, HE010027, HE010028, HE010029, HE010030, HE010031, HE010032, HE010033, HE010034, HE010035, HE010036, HE010037, HE010038, HE001033, HE001035, HE001043, HE001048, HE001054, HE001055, HE001057, HE001073, HE001096, HE001098, HE001100, HE001112, HE001114, HE001115, HE001122, HE001123, HE001125, HE001127, HE001166, HE001167, HE001173, HE001197, HE001200, HE001202, HE001203, HE001313, HE001314, HE003012, HE003018
Interfaces	Eligibility Determination	47619	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall update the following Error Response Code and their interpretations on the personal verification screen for VLP: HE001041, HE003011, HE010056
Interfaces	Eligibility Determination	47620	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall update the Get Country of Issuance batch to incrementally update the Country table instead of dropping the table and replacing it with the response, leaving existing Get Country of Issuance codes and adding new Get Country of Issuance codes when applicable.
Interfaces	Eligibility Determination	47621	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall close the DHS case when the CMS request for additional documentation from the individual for the Agency Action ESC Code 13, 128, 328, or 386 with COA code PI is returned in Step 1.
Interfaces	Eligibility Determination	47622	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall Invoke or InitiateThirdVerif Web method for ESC code 39 received in Step 1.
Interfaces	Eligibility Determination	47623	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall obtain documentation from the individual prior and then Invoke or InitiateThirdVerif Web method for Major Code 015 or 026 in Step 2.
Interfaces	Eligibility Determination	47624	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall Invoke InitiateThirdVerif Web method and shall indicate the Applicant, Enrollee, or Beneficiary's Cuban/Haitian status and upload a document for status verification ESC Code 328 or 386 returned in Step 1 with following COAs: CC, CH, CP, DT, IN, ML, OP, PR and QNC or Five-Year Bar Indicators set to P.
Interfaces	Eligibility Determination	47625	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall close the DHS case when the CMS request for additional documentation from the individual for the Agency Action ESC Code 328 or 386 returned in Step 1 with following COA: CP and individual attests to Victim of Trafficking.
Interfaces	Eligibility Determination	47626	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall close the DHS case when the CMS request for additional documentation from the individual for the Agency Action ESC Code 385 returned in Step 1 and LPV indicator is set to P.
Interfaces	Eligibility Determination	47627	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall close the DHS case when the CMS request for additional documentation from the individual for the Agency Action ESC Code 368 returned in Step 1 and LPV or QNC indicator is set to P.
Interfaces	Eligibility Determination	47628	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall close the DHS case when the CMS request for additional documentation from the individual for the Agency Action ESC 370 returned in Step 1 and LPV or QNC indicator is set to P.
Interfaces	Eligibility Determination	47629	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall close the DHS case when the CMS request for additional documentation from the individual for the Agency Action ESC 377, 378, 379 in Step 1 and Five-Year Bar Met indicator set to P.

Appendix A-4 - SOW Exhibit A - System Requirements Specification
(Extracted from CalHEERS RTM)

Category	Sub Category	Req ID	Requirement
Interfaces	Eligibility Determination	47630	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall close the DHS case when the CMS request for additional documentation from the individual for the Agency Action ESC Code 250, 288, 381, 401, or 402 is returned at Step 1 and individual attests to Victim of Trafficking, and paroled under 1 year set the QNC to P; or ESC Code 250, 288, 381, 401, 402 is returned at Step 1 and the individual attests to Victim of Trafficking and paroled for any time period, set Five-Year Bar to P.
Interfaces	Eligibility Determination	47631	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall invoke InitiateThirdVerif Web method when the CMS request for additional documentation from the individual for the Agency Action ESC Code 250, 288, 381, 401, 402 at Step 1 and non-citizen country of birth (NonCitCountryBirthCd) or non-citizen country of citizenship (NonCitCountryCitCd) value is CUB or HITI, and paroled under 1 year, set QNC to P, or ESC Code 250, 288, 381, 401, 402 at Step 1 and non-citizen country of birth (NonCitCountryBirthCd) or non-citizen country of citizenship (NonCitCountryCitCd) value is CUB or HTI, and paroled for any time period set Five-Year Bar to P.
Interfaces	Eligibility Determination	47632	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall close the DHS case when the CMS request for additional documentation from the individual for the Agency Action ESC Code 250, 288, 381, 401, 402 at Step 1 and COA Code is UHP and non-citizen country of birth (NonCitCountryBirthCd) and non-citizen country of citizenship (NonCitCountryCitCd) are null, set Five-Year Bar to P.
Interfaces	Eligibility Determination	47633	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall close the DHS case when the CMS request for additional documentation from the individual for the Agency Action ESC 128, returned with COA Code T1, ST6 in Step 1, or Form I-766 Category Code A16 with ESC 10 and grant date is less than 5 years, Five-Year Bar indicator set to P.
Interfaces	Eligibility Determination	47634	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall Invoke InitiateAdditionalVerif for ESC 128 returned in Step 1 method for ESC 128 returned in Step 1 with COA Code T1 or ST6, or Form I-766 Category Code A16 with ESC 10, missing the grant date, and Five-Year Bar indicator set to P.
Interfaces	Eligibility Determination	47635	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall close the DHS case when the CMS request for additional documentation from the individual for the Agency Action Major code 07b or 07e with COA Code UHP in Step 2 or Step 3 and any indicator set to P.
Interfaces	Eligibility Determination	47636	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall deprecate the following logic: 1. California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall close the DHS case when the CMS request for additional documentation from the individual for the Agency Action ESC Code 10 with COA code PI is returned in Step 2. 2. California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall Invoke InitiateThirdVerif Web method and shall indicate the Applicant, Enrollee, or Beneficiary's Cuban/Haitian status and upload a document for status verification ESC Code 10 returned in Step 1 and Five-Year Bar Indicators set to P. 3. California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall Invoke InitiateThirdVerif Web method and shall indicate the Applicant, Enrollee, or Beneficiary's Cuban/Haitian status and upload a document for status verification ESC Code 10 returned in Step 1 with following COAs: CC, CH, CP, DT, IN, ML, OP, PR and QNC or Five-Year Bar Indicators set to P. 4. California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall close the DHS case when the CMS request for additional documentation from the individual for the Agency Action ESC Code 10 returned in Step 1 with following COA: CP and individual attests to Victim of Trafficking. 5. California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall close the DHS case when the CMS request for additional documentation from the individual for the Agency Action ESC 10 or 13 and grant date is less than 5 years, Five-Year Bar indicator set to P 6. California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall Invoke or InitiateThirdVerif Web method for ESC 10 or 13 returned in Step 1 with COA Code T1, ST6 missing the grant date, and Five-Year Bar indicator set to P
Interfaces	Eligibility Determination	47637	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall send the updated VLP ESC Code, VLP Agency Action Codes to SAWS when received from CMS.
Interfaces	Eligibility Determination	47638	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall update the mock rules for the Grant Date Logic to append the the tax years from 2020 to 2024
Interfaces	Eligibility Determination	47650	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall add the overridden FPL and budget worksheet overridden FPL flag as data elements FPLFlagInd and OverriddenFPLValue to eHIT in DER/DER-U transactions when California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) overrides an FPL.
Interfaces	Eligibility Determination	47651	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall create a DER type data element "DERTypeCode" to be sent in DER/DER-U transactions that will be used as a value to indicate whether the DER is a solicited, unsolicited, referral or referral-only type.
Interfaces	Eligibility Determination	47652	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall add a new BV to check that the qualifying life event date received in an EDR is within (+/-) one year of the requested benefit year.
Interfaces	Eligibility Determination	47653	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall update California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) Portal and eHIT to allow a consumer to indicate that they do not know their SSN at time of completing their application.
Interfaces	Eligibility Determination	47654	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall update the following California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) Portal screens to make SSN an optional field when a user selects that the individual has an SSN: - Citizenship Info - Individual Information Review Form - Flexible Application - Household Members
Interfaces	Eligibility Determination	47655	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall add a new code to the "ReasonForNoSSNCode" data element on eHIT that will be used to indicate if a consumer does not know their SSN in EDR/DER/DER-U transactions.
Interfaces	Eligibility Determination	47656	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall add the following SSN validation to the SSN data element on eHIT to not allow invalid SSNs: •Numbers with all zeros in any digit group (000-##-####, ###-00-####, ###-##-0000) •Numbers with 666 or 900–999 (Individual Taxpayer Identification Number) in the first digit group •Repeat of the same number (111-11-1111, 222-22-2222, 333-33-3333, etc.)
Interfaces	Eligibility Determination	47657	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall initiate a SSN inconsistency for a consumer who has indicated they have an SSN but an SSN has not been provided.
Interfaces	Eligibility Determination	47658	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall update the Portal to not allow invalid SSNs in the following format: •Repeat of the same number (111-11-1111, 222-22-2222, 333-33-3333, etc.)
Interfaces	Eligibility Determination	47659	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall update BV 197 to prevent invalid number formats of ZIP codes.
Interfaces	Eligibility Determination	47660	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall update BV 197 in eHIT to not allow an all zero entry for the Zipcode data element.
Interfaces	Eligibility Determination	47661	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall update the maximum character length of the NoOfBabiesExpected data element on eHIT to 2.

Appendix A-4 - SOW Exhibit A - System Requirements Specification
(Extracted from CalHEERS RTM)

Category	Sub Category	Req ID	Requirement
Interfaces	Eligibility Determination	47662	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall add a validation to the NoOfBabiesExpected data element to prevent SAWS from sending a value larger than 10.
Interfaces	Eligibility Determination	47663	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall update the Portal and eHIT to prevent invalid Special Characters in name and address fields.
Interfaces	Eligibility Determination	47664	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall update the Portal to not allow special character of Period (.) for the data elements Last Name, Middle Name, and First Name.
Interfaces	Eligibility Determination	47665	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall update eHIT to only allow the special characters Hyphen (-), Apostrophe ('), Space () for the data elements Last Name, First Name, and Middle Name.
Interfaces	Eligibility Determination	47666	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall update the Portal to only allow a letter (a-z, A-Z) to be the first character of the data element Middle Name.
Interfaces	Eligibility Determination	47667	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall add an eHIT validation to only allow a letter (a-z, A-Z) to be the first character of the Middle Name data element.
Interfaces	Eligibility Determination	47668	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall update eHIT to only allow the characters of Letters (a-z, A-Z), Numbers, Period (.), Hyphen (-), Slash (/), Comma (,), Pound (#), Apostrophe ('), and Space () for the data elements related to Street Address.
Interfaces	Eligibility Determination	47669	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall update the Portal to not allow special character of Backwards Slash (\) for Street Address and Apartment or suite number fields and not allow Comma (,) to be entered as the first character of a field.
Interfaces	Eligibility Determination	47670	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall conduct a one-time data update to correct current invalid address data field entries.
Interfaces	Eligibility Determination	47671	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall conduct a one-time data update to correct current invalid name data field entries.
Interfaces	Eligibility Determination	47672	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall update eHIT to only allow the characters of Letters (a-z, A-Z) and Spaces () for the data element of City.
Interfaces	Eligibility Determination	47673	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall add logic to remove any commas received in address line 1 and address line 2 data elements in eHIT and replace them with a Space () before the values are stored in the California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) database.
Interfaces	Eligibility Determination	47674	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall add logic to remove any commas received in the "Street Address" or "Apt. or Suite Number" fields in Portal and replace them with a Space () before the values are stored in the California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) database.
Interfaces	Eligibility Determination	47675	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall not store phone numbers that are received from SAWS in the California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) database if the phone number includes one of the following invalid formats. - Phone number begins with a 0 or 1 - Phone number is any length other than 10 - Phone number contains any non-numeric (0-9) characters
Interfaces	Eligibility Determination	47676	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall default a person's preferred contact method to email (if available) or mailing address (if email is not available) if the person's preferred contact method is phone and California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) received a phone number from SAWS in an invalid format.
Interfaces	Eligibility Determination	47677	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall perform a one-time data update to remove any phone numbers in the following formats from all consumers in California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) and update their preferred method of contact to email (if available) or mailing address (if email is not available): - Phone number begins with a 0 or 1 - Phone number is any length other than 10 - Phone number contains any non-numeric (0-9) characters - Phone number is null and phone number is the preferred contact method
Interfaces	Eligibility Determination	47678	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall add a new validation to the phone number field on California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) Portal to not allow phone numbers that begin with 1.
Interfaces	Eligibility Determination	47679	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall reactivate "ReasonForNoSSNCode" code of "01" (Child Under Age 1) and allow SAWS to send this reasoning code on EDR transactions.
Interfaces	Eligibility Determination	47680	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall display a new SSN waiver reason of "Child Under Age 1" on California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) Portal that is not selectable and only displayed when California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) receives a ReasonForNoSSNCode of 01 (Child Under Age 1) via EDR for the individual.
Interfaces	Eligibility Determination	47681	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall remove the "TitleXXIPremium" data element from the eHIT schema
Interfaces	Eligibility Determination	47751	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall send uploaded verification documents for Medi-Cal and Mixed Household cases to SAWS.
Interfaces	Eligibility Determination	47752	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall send uploaded verification documents to SAWS when a verification document is uploaded to California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) through the following methods: 1. User uploads of verification documents on the Documents & Correspondence page 2. User uploads of verification documents on the Upload Eligibility page 3. Verification documents that are received by mail/fax, which are scanned and uploaded to California Healthcare Eligibility, Enrollment and Retention System (CalHEERS)
Interfaces	Eligibility Determination	47753	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall send uploaded verification documents to SAWS if the household includes at least one member that has an ongoing eligibility status of eligible/pending eligible/conditionally eligible to MAGI Medi-Cal at the time when files are sent to SAWS.

Category	Sub Category	Req ID	Requirement
Interfaces	Eligibility Determination	47754	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall send documents that are classified as one of the following document types: Proof of Age Proof of American Indian/Alaska Native Status Proof of California Residency Proof of Citizenship Proof of Citizenship (Secondary, list 1) Proof of Immigration Status Proof of Citizenship (Secondary, list 2) Proof of Non-Incarceration Status Proof of Income Proof of Minimum Essential Coverage Proof of SSN Waiver Proof of Former Foster Youth Status Proof of Medicare Coverage Proof of Individual Verification Manual Verifications General Correspondence Deceased
Interfaces			California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall have an error handling process to resend files to SAWS in case of errors.
Interfaces			California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall send information corresponding to each file sent to SAWS to identify which California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) case the file is associated with and the verification type the file has been used for admin verification.
Interfaces			California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall send the verification files to SAWS using the SAWS imaging verification API.
Interfaces			California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall create mock services for the new process to send files from California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) to SAWS.
Interfaces			California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall update the value of a name or address data field to 'UNKNOWN' if the original value is only Space () or special characters that would be replaced with Space () (such as commas in address fields).
Interfaces			California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall have an ability to turn ON/OFF the Verify Current Income (VCI) Income source.
Interfaces			California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall have an ability to turn ON/OFF the Verify Current Income (VCI) real-time API.
Interfaces			California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall have an ability to turn ON/OFF the VCI-RRV request file during the renewals when the VCI configuration switch is turned OFF.
Interfaces			
Interfaces			
Interfaces			California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall include case status in the Account Transfer when a case is closed as a duplicate
Interfaces			California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall send the Punjabi and Hindi languages when selected for either spoken or written language preferences for consumers in the Household Search response transaction to Salesforce.
Interfaces			California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall send and receive the Punjabi and Hindi languages when selected for spoken and/or written language preferences to GI in the following transactions: IND52 and Account Transfer.
Interfaces			California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall send the Punjabi and Hindi languages in an EDI 834 transaction to the carrier, when selected for either spoken or written language preferences
Interfaces			California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall update the spoken language code for Cantonese from “cesm” to “yue” and the spoken and written language codes for Cambodian from "khmr" to "khm" in EDI 834 transactions
Interfaces	Enrollment	44520	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall configure the SEP Verification Interface to HCV system "Off".
Interfaces	Enrollment	45760	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall update the 1095 BSD to ignore the following errors as these records are being accepted by IRS: AIRBR235 -Monthly Premium Amount is zero (0.00) and Monthly Advance Payment of Premium Tax Credit is present AIRBR237 -Monthly Premium of Second Lowest Cost Silver Plan is zero (0.00) and Monthly Advance Payment of Premium Tax Credit is present AIRBR234 - Monthly Premium Amount is zero (0.00) in all rows for all months AIRTN500 - TIN Validation Failed
Interfaces			California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall perform CMS Focused Integration Testing for the tax year 2022.
Interfaces			California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall perform FTB Focused Integration Testing for the tax year 2022.
Interfaces			California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall update the logic to generate 1095/3895 forms/submissions on the basis of confirmation date(date the policy is effectuated/first payment is made) along with the existing enrollment status.
Interfaces			California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall populate the SLCSF amount on 1095/3895 form/submissions with the SLCSF that was used to determine combined household subsidy for all the enrolled members (irrespective of whether all members enroll together or custom group).
Interfaces			California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall use the CA Premium Credit while calculating the SLCSF amount to be populated on 1095/3895 forms/submissions.
Interfaces			California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall not include the spouse details in 1095/3895 tax forms/submissions when the Inactive Spouse has been removed.
Interfaces			
Interfaces			
Interfaces			

Category	Sub Category	Req ID	Requirement
Interfaces	Enrollment	46968	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall update the IRS-2000-DD-01 to ensure that no duplicate records are inserted in the HBX Tables for the same individuals.
Interfaces	Enrollment	46969	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall populate SLCSP amount in <SLCSPAdjMonthlyPremiumAmt> tag in <AssociatedPolicy> node for APTC Eligible individuals and in <SLCSPMonthlyPremiumAmt> tag in <InsurancePolicy> node for APTC Ineligible individuals in the monthly XML file to IRS.
Interfaces	Enrollment	46970	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall enhance the script that loops to process all of the 1095 file generations.
Interfaces	Enrollment	46971	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall perform CMS Focused Integration Testing for the tax year 2023.
Interfaces	Enrollment	46972	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall perform FTB Focused Integration Testing for the tax year 2023.
Interfaces	Enrollment	48258	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) MEDS Interface shall be updated to include health plan information for the consumer in the InquireMember transaction
Interfaces	Enrollment	48259	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall update MEDS Inquire Member with new Medi-Cal/ MCAP/CCHIP plan information received
Interfaces	Enrollment	48260	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall persist new Medi-Cal/MCAP/CCHIP Plan information in the California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) Database when received in MEDS Inquire Member service.
Interfaces	Enrollment	48261	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall create the new Mock Services to simulate responses with Medi-Cal/MCAP/CCHIP plan information from the MEDS Inquire Member service to support testing.
Interfaces	General Requirement		
Interfaces	General Requirement	38177	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall introduce and populate new data elements to the California Healthcare Eligibility, Enrollment and Retention System (CalHEERS)-SAWS interface to support the IAP transition process and SAWS generated notices.
Interfaces	General Requirement	38218	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) system will display an error message pop-up when a logged in user tries to access the California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) site in a new tab on the same browser window to minimize multiple browsing issues.
Interfaces	General Requirement	38428	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) system shall trigger HX05 transaction to convert existing cases where a county of responsibility change is required up through the implementation of this change request.
Interfaces	General Requirement	38466	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall transmit health care, income employer, Non-ESI verification data and hub responses codes and description for Medicare, Tricare, Veterans, and Peace Corps to the California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) data warehouse.
Interfaces	General Requirement	38467	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) SAWS interface Other Health Care node will be modified to align with the portal changes introduced with this change.
Interfaces	General Requirement	38469	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) SAWS interface shall be updated with a new business validations to ensure conditional data elements within the Other Health Care node are send when the certain data within the Other Health Care node is sent.
Interfaces	General Requirement	38784	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall send and receive a military service indicator to and from SAWS.

Category	Sub Category	Req ID	Requirement
Interfaces		38785	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall include all of the following updated and re-worded immigration statuses in a selectable drop down menu: 1) Lawful Permanent Resident (LPR/Green Card holder) 2) A non-citizen with an approved visa petition, who has a pending application for adjustment to LPR status 3) A non-citizen, without a visa petition, who has a pending application for adjustment to LPR Status, with Employment Authorization 4) A non-citizen who has a pending application for adjustment to LPR status, without Employment Authorization 5) Refugee 6) Asylee 7) Cuban/Haitian Entrant 8) Amerasian Immigrant 9) Granted withholding of deportation or removal 10) Granted a stay of deportation 11) Granted suspension of deportation whose departure USCIS does not contemplate enforcing 12) Conditional Entrant granted before 1980 13) Paroled into the United States for one year or more 14) Paroled into the United States for less than one year 15) Battered non-citizen, or parent or child of battered non-citizen 16) Granted Deferred Action (but not under Deferred Action for Childhood Arrivals - DACA) 17) Granted Deferred Action for Childhood Arrivals – (DACA) 18) Granted Order of Supervision, with Employment Authorization 19) Granted Order of Supervision, without Employment Authorization 20) An immigrant who entered and has continuously resided in the United States since before January 1, 1972, who would be eligible for an adjustment of status to lawful permanent resident (eligible as a Registry immigrant). 21) Registry applicant, with Employment Authorization 22) Pending application for Creation of Record of Lawful Admission for Permanent Residence, with Employment Authorization 23) Granted voluntary departure and awaiting issuance of a visa 24) A non-citizen on whose behalf an immediate relative petition (I-130) has been approved and who is entitled to voluntary departure 25) Granted withholding of removal under the Convention against Torture – CAT 26) Granted for a Victim of Trafficking visa (T visa), or spouse, child, sibling, or parent 27) Pending application for a Victim of Trafficking visa (T visa), or spouse, child, sibling, or parent 28) Taking steps to apply for a T visa or for certification by the Office of Refugee Resettlement 29) Granted U visa 30) Filed for a U visa 31) Granted Student Visa (e.g. F or M visa) 32) Granted Work Visa (e.g. H-1, L-1, O, P, R visa)
Interfaces	General Requirement	38786	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall update the eHIT schema to include all immigration statuses, including "Document or Status Not Listed".
Interfaces	General Requirement	38787	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall update the eHIT schema to include all documents from the document list.
Interfaces	General Requirement	38796	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall request Grant Date through VLP if sufficient document information is provided to make a VLP request and Grant Date is missing from previous cache for the following immigration statuses: - oLawful Permanent Resident (LPR/Green Card holder) - o Conditional Entrant granted before 1980 - o Paroled into the United States for one year or more - o Battered non-citizen, or parent or child of battered non-citizen

Category	Sub Category	Req ID	Requirement
Interfaces		38797	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall update the appropriate citizen/alien indicator to MEDS in accordance with DHCS mapping for the following immigration statuses: 1) Lawful Permanent Resident (LPR/Green Card holder) 2) A non-citizen with an approved visa petition, who has a pending application for adjustment to LPR status 3) A non-citizen, without a visa petition, who has a pending application for adjustment to LPR Status, with Employment Authorization 4) A non-citizen who has a pending application for adjustment to LPR status, without Employment Authorization 5) Refugee 6) Asylee 7) Cuban/Haitian Entrant 8) Amerasian Immigrant 9) Granted withholding of deportation or removal 10) Granted a stay of deportation 11) Granted suspension of deportation whose departure USCIS does not contemplate enforcing 12) Conditional Entrant granted before 1980 13) Paroled into the United States for one year or more 14) Paroled into the United States for less than one year 15) Battered non-citizen, or parent or child of battered non-citizen 16) Granted Deferred Action (but not under Deferred Action for Childhood Arrivals - DACA) 17) Granted Deferred Action for Childhood Arrivals – (DACA) 18) Granted Order of Supervision, with Employment Authorization 19) Granted Order of Supervision, without Employment Authorization 20) An immigrant who entered and has continuously resided in the United States since before January 1, 1972, who would be eligible for an adjustment of status to lawful permanent resident (eligible as a Registry immigrant). 21) Registry applicant, with Employment Authorization 22) Pending application for Creation of Record of Lawful Admission for Permanent Residence, with Employment Authorization 23) Granted voluntary departure and awaiting issuance of a visa 24) A non-citizen on whose behalf an immediate relative petition (I-130) has been approved and who is entitled to voluntary departure 25) Granted withholding of removal under the Convention against Torture – CAT 26) Granted for a Victim of Trafficking visa (T visa), or spouse, child, sibling, or parent 27) Pending application for a Victim of Trafficking visa (T visa), or spouse, child, sibling, or parent 28) Taking steps to apply for a T visa or for certification by the Office of Refugee Resettlement 29) Granted U non-immigrant visa 30) Filed for a U visa 31) Student Visa – Granted a student visa (e.g. F or M visa)
Interfaces	General Requirement	38798	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall add an Administrative Verification labeled "Immigration Category Verification" to eHIT
Interfaces	General Requirement	38799	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall add an Administrative Verification labeled ""PRUCOL Last Category"" to eHIT.
Interfaces		38800	In order to ensure that immigrants may attest to their immigration status without providing a document at the time of application, the following fields must be made optional throughout the portal: • Alien Number / USCIS Number • I 94 Number • Passport Number • SEVIS ID • Naturalization Number • Citizenship Number • Receipt Number • Doc Expiration Date • Doc Desc Required • Country of Issuance.
Interfaces	General Requirement	38808	In order to ensure that immigrants may attest to their immigration status without providing a document at the time of application, the "Document Type" field must be made optional in the eHIT schema
Interfaces	General Requirement	38809	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall provide the VLP Response, when available, to SAWS via EHIT.
Interfaces	General Requirement	38810	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall send to SAWS an individuals immigration status and corresponding verification information via eHIT transactions.
Interfaces		38811	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall remove the current messaging above the immigration status and document type dropdown menus on the Household Members page and replace it with the following text: Please select your current immigration document and status. We can process your application faster if you enter your immigration document information now. If you cannot provide that information now, you will have the chance to provide it at a later date.
	General Requirement		

Appendix A-4 - SOW Exhibit A - System Requirements Specification
(Extracted from CalHEERS RTM)

OTSI CalHEERS RFP #73040873 Addendum 1
October 31, 2025

Category	Sub Category	Req ID	Requirement
Interfaces	General Requirement	38812	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall log the reason for making or not making a VLP call based, at a minimum, on the following criteria: 1. Availability of minimum data required for a VLP HUB call 2. SAWS Administrative Verification 3. Cached Administrative Verification 4. Need for Grant Date 5. Is the immigration status on the VLP Hub call exclusion list 6. Document Type value is 'Document or Status Not Listed'
Interfaces	General Requirement	38813	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall auto populate the VLP with leading zeroes when less than 9 characters are entered on the Alien Number/USCIS Number on the Household Members page.
Interfaces	General Requirement	38814	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall provide sample read-only greyed-out text preview samples in the input boxes for the card number and receipt field on the Household Member Page corresponding to the VLP service specification. Note: Patterns moved to Design Considerations
Interfaces	General Requirement	38815	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall update "First Name on the Document" to "First Name/Given Name on the Document" field label on the Household Members page.
Interfaces	General Requirement	38816	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall update "Last Name on the document" to "Last Name/Surname on the document" field label on the Household Members page.
Interfaces	General Requirement	38817	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall remove the ""Are you a Qualified Non Citizen"" radio button from the Household Member Page.
Interfaces	General Requirement	38818	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) SAWS Interface shall removed the Qualified Non-Citizen indicator from the EHIT EDR transaction.
Interfaces	General Requirement	38819	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall separate the following document ""Cuban/Haitian Entrant, Document indicating withholding of removal"" into two separate documents in the Portal document type dropdown menu: ? Document indicating Cuban/Haitian Entrant ? Document indicating withholding of removal
Interfaces	General Requirement	38825	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) SAWS Interface shall separate the existing document ""Cuban/Haitian Entrant, Document Indicating Withholding of Removal"" into two separate documents: -Document indicating Cuban/Haitian Entrant -Document indicating withholding of removal
Interfaces	General Requirement	38826	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall make the complete text (wrap text if needed) available for each document type and immigration status
Interfaces	General Requirement	38827	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) SAWS Interface shall modify current business validations to account for EDRs providing the Eligible Immigrant indicator or the immigration statuses from the immigration status drop-down menu
Interfaces	General Requirement	38828	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall not request verification through the VLP interface for the following immigration statuses even if a Document is provided with sufficient information to make a call to VLP: 1) A non-citizen who has a pending application for adjustment to LPR status, without Employment Authorization 2) Granted Order of Supervision, without Employment Authorization 3) An immigrant who entered and has continuously resided in the United States since before January 1, 1972, who would be eligible for an adjustment of status to lawful permanent resident (eligible as a Registry immigrant). 4) Granted voluntary departure and awaiting issuance of a visa 5) A non-citizen on whose behalf an immediate relative petition (I-130) has been approved and who is entitled to voluntary departure 6) Taking steps to apply for a T visa or for certification by the Office of Refugee Resettlement 7) Filed for a U visa
Interfaces	General Requirement	38829	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall add Grant Date to the eHIT schema.
Interfaces	General Requirement	38830	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) system shall display the following message on the Eligibility Results page to consumers who are eligible or conditionally eligible for restricted-scope Medi-Cal and also eligible or conditionally eligible for APTC/CSR with household income less than or equal to 138%FPL: You may qualify for limited Medi-Cal coverage. You also qualify for full health care coverage in a Covered California plan with financial assistance. If you would like to buy a Covered California plan, click on the "Choose Your Health Plan" button.
Interfaces	General Requirement	39115	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) system shall conduct coordinated volume-metric performance testing of eHIT for all SAWS consortia's (C-IV, CalWIN, LRS) for R18.2.
Interfaces	General Requirement	39116	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) system shall support eHIT related post implementation activities and support California Healthcare Eligibility, Enrollment and Retention System (CalHEERS)/SAWS Deep dive sessions for all SAWS consortia's (C-IV, CalWIN, LRS) post R 18.2.
Interfaces	General Requirement	39190	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall add messaging to the Eligibility Results page when the new Eligibility Evaluation Reasons are produced for MAGI Medi-Cal individuals who are determined Ineligible or Discontinued because of one or more assigned administrative verifications.
Interfaces	General Requirement	39191	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) SAWS interface shall send the new Eligibility Evaluation Reasons when California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) determines the MAGI Medi-Cal individuals Ineligible or Discontinued because of one or more assigned administrative verifications.

Category	Sub Category	Req ID	Requirement
Interfaces	General Requirement	39193	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System will be updated to rename the following LTNA Negative Action Reasons code descriptions : - "Written Withdrawal" to "Requested Withdrawal" - "Requested Disc. - Written" to "Requested Disc."
Interfaces	General Requirement	39197	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS)-SAWS Interface shall send Eligibility Evaluation Reason code to SAWS for Parent/Caretaker Relative individuals with FPL greater than 114% up to and including 138% who are discontinued/ineligible for MAGI Medi-Cal because a dependent child who lives in the home does not have minimum essential coverage (MEC).
Interfaces	General Requirement	39199	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) system shall only send numeric values to the Federal Hub for Alien Number.
Interfaces	General Requirement	39202	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) Verify Lawful Presence interface for Green Card - I-551 documents shall make requests to FDSH VLP as an "I-551 Document" or "Other Document with Alien Number" based on the Receipt or Card Number provided.
Interfaces	General Requirement	39225	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall only recall the SSA Composite service when the SSN changes.
Interfaces	General Requirement	39226	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall only recall the IRS, FTB and EDD interface when the income amount and SSN is changed.
Interfaces	General Requirement	39227	A VLP call will be made if there is any change in any of the following document information: - Alien Number - Card Number - Document Expiration Date - I94 Number - Citizenship Number - Naturalization Number - Passport Number - Country of Issuance - SEVIS ID - Visa Number.
Interfaces	General Requirement	39230	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall only make a VLP call when an individual attests to being a naturalized or derived citizen and required document information is provided.
Interfaces	General Requirement	39231	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall send the naturalized or derived citizenship information to SAWS via eHIT.
Interfaces	General Requirement	39232	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall send the naturalized or derived citizenship information to MEDS.
Interfaces	General Requirement	39233	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall only recall ESI MEC service when SSN changes.
Interfaces	General Requirement	39234	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall only recall Non-ESI MEC for one of the following reasons: - When there is a change in SSN - When there is a change in answer to the questions: - Is this person currently enrolled in any of these Health Plans/Health Coverage?"" - Is this person eligible for free Medicare Part A?
Interfaces	General Requirement	39235	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall limit the number of SSA requests made to the SSA Composite service to no more than once per refresh cycle when no request element has changed.
Interfaces	General Requirement	39242	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall update the technical components for the California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) SAWS Interface for communication with the SAWS for the following CR. - CR 109700
Interfaces	General Requirement	39266	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall limit the number of VLP requests made to the VLP Service to no more than once per refresh cycle when no request element has changed.
Interfaces	General Requirement	39267	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall limit the number of requests made to the ESI-MEC Interface to no more than once per refresh cycle when no request element has changed.
Interfaces	General Requirement	39268	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall limit the number of requests made to the Non-ESI-MEC Interface to no more than once per refresh cycle when no request element has changed.
Interfaces	General Requirement	39269	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall log the reason for making or not making FDSH service calls based on the each service's caching rules
Interfaces	General Requirement	39322	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall request and store Social Security Administration (SSA) Title II income information from the federal data services hub (FDSH).
Interfaces	General Requirement	39343	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) SAWS Interface shall update the BV 136 to provide additional information on the closed case.
Interfaces	General Requirement	39344	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall update the eHIT Business Validation design document to align with production (R18.2.0.0.1).
Interfaces	General Requirement	39345	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall not throw a Business Validation on eHIT when SAWS sends Life Event Type as 'None of the Above'.
Interfaces	General Requirement	39346	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall Modify the 435.119(c) MEC detection to include an admin MEC verification.
Interfaces	General Requirement	39352	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall send the Eligibility Evaluation Reason Code (EERC) to SAWS for the usage of the Verify Lawful Presence U.S. citizenship verification.

Appendix A-4 - SOW Exhibit A - System Requirements Specification
(Extracted from CalHEERS RTM)

Category	Sub Category	Req ID	Requirement
Interfaces	General Requirement	39357	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) SAWS interface shall provide the ability to send and receive the following additional immigration statuses in addition to the 44 immigration statuses in the drop-down menu. - Battered non-citizen, or parent or child of battered non-citizen - Filed for a U Visa - Taking Steps to apply for a T Visa or for certification by the office of Refugee Resettlement
Interfaces	General Requirement	39364	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) Portal shall display any documents previously associated to the case for outstanding VLP verifications on the portal when Step 3 needs to be initiated.
Interfaces	General Requirement	39369	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall update the technical components for the California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) SAWS Interface for communication with the SAWS for the following CR. - CR 92298 - CR 109927 - CR 92295
Interfaces	General Requirement	39379	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall update the IRS XML library to aca_air-iep_1095-a_fs19_upstream_v0.4_xml_library_12212017-mktplc.
Interfaces	General Requirement	39380	Effective January 1, 2019, the California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall exclude optional elements from TY 2018 1095 if data value is blank or missing. Optional element with data value shall pass thru same XML schema validation as required elements. Empty, blank or null XML tags should not be sent in XML data files for IRS returns.
Interfaces	General Requirement	39381	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall use SHA-256 hash functions from SHA-2 family of hash functions for calculating checksum of payload for 1095 Monthly files. The width of ChecksumAugmentationNum needs to be adjusted to have width of 64 characters.
Interfaces	General Requirement	39382	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall use SHA-256 hash functions from SHA-2 family of hash functions for calculating checksum of payload for all Renewal and Redetermination Verification (RRV) files. The width of ChecksumAugmentationNum needs to be adjusted to have width of 64 characters.
Interfaces	General Requirement	39383	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall use SHA-256 hash functions from SHA-2 family of hash functions for calculating checksum of payload for all Policy Level Reporting (PLR) files. The width of ChecksumAugmentationNum needs to be adjusted to have width of 64 characters.
Interfaces	General Requirement	39384	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall support Pinnacle's SHOP file transmittal to IRS for Pinnacle to test their changes with IRS.
Interfaces	General Requirement	39388	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall maintain multiple schemas and files including current and prior years.
Interfaces	General Requirement	39389	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall parse new error codes returned by IRS and persist it in the database.
Interfaces	General Requirement	39460	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall call SSA at Intake, RAC, Renewals, Retro, Continuing (excluding ROP), Manual Verification, and Periodic Reverification to electronically verify SSN if - cache rules fail, or - passed electronic verification is not present (from previous SSA call) and admin verification is not fail
Interfaces	General Requirement	39461	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall not call SSA to electronically verify SSN if passed electronic verification is cached (from previous SSA call) or admin verification is fail
Interfaces	General Requirement	39462	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall use and maintain passed electronic verification (from previous SSA call) of SSN for evaluation during eligibility determination
Interfaces	General Requirement	39463	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall use and maintain admin verification of SSN for evaluation during eligibility determination if electronic verification is pending or not verified
Interfaces	General Requirement	39480	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall be able to receive and respond to requests from Salesforce Service Cloud
Interfaces	General Requirement	39481	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall be able to pass consumer information including basic contact information, eligibility, and enrollment data to the Salesforce Service Cloud
Interfaces	General Requirement	39482	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) system shall accept consumer search request with following search criteria: Case ID, App ID, Indv ID, First Name, Last Name, Last 4 SSN, email, DOB, Zip Code.
Interfaces	General Requirement	39483	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall reply to consumer search request with: First Name, Middle Name, Last Name, DOB, Last 4 SSN, Address, Email, Eligibility Information, Current Enrollment Information, Agent Information
Interfaces	General Requirement	39487	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) Team shall assist the Covered California team to move the current Quick Sort functionality from Oracle CRM to Salesforce Service Cloud
Interfaces	General Requirement	39501	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall call SSA for Title II income only if the SSA Title II Annual income is not stored for the individual for the requested tax year.
Interfaces	General Requirement	39510	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall have the functionality to send and receive an 11 character alpha numeric I-94 number on the SAWS-VLP Interface where the 10th character can be a letter or a number.
Interfaces	General Requirement	39511	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall have the functionality to send and receive an 11 character alpha numeric I-94 number on the eHIT Interface where the 10th character can be a letter or a number.
Interfaces	General Requirement	39536	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall use a new aid code for the State Subsidy.
Interfaces	General Requirement	39537	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall add the new State Subsidy data elements to the Account Transfer schema.
Interfaces	General Requirement	39546	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall send X9 (the State Subsidy aid code) on the HX05, HX12, HX20 (ESAC1, 2, 6 and 7), HX40, and RX20.
Interfaces	General Requirement	39574	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS)/SAWS eHIT Interface shall have a field to transmit the divorce or separation instrument order/execution/modification date for the Alimony Income.
Interfaces	General Requirement	39575	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall have functionality to require DateOfSeparation as a data element when Alimony Received is an income sent in a non-batch EDR.

Appendix A-4 - SOW Exhibit A - System Requirements Specification
(Extracted from CalHEERS RTM)

Category	Sub Category	Req ID	Requirement
Interfaces	General Requirement	39576	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS)/SAWS eHIT Interface shall have a field to transmit the divorce or separation instrument order/execution/modification date for the Alimony Paid Deduction.
Interfaces	General Requirement	39577	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall have functionality to require DateOfSeparation as a data element when Alimony Paid is a deduction sent in a non-batch EDR.
Interfaces	General Requirement	39579	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall add the State Subsidy data to the Salesforce interface.
Interfaces	General Requirement	39580	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall add "PlanName" to the elements being sent back to Salesforce interface.
Interfaces	General Requirement	39609	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall update the IRS XML library to ACA AIR IEP 5.0 1095A FS20 AIR-IEP 1095A upstream schema v3.0 for Marketplace.
Interfaces	General Requirement	40461	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall have the ability to invoke the new FTB webservice.
Interfaces	General Requirement	40462	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall request 540 Tax information from FTB via the real time service.
Interfaces	General Requirement	40463	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall request the following data elements as part of the request for 540 Tax Information: See Data elements Tab 540
Interfaces	General Requirement	40464	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall send TaxPayer SSN, First Name, Last Name and Date of Birth to request 540 form data.
Interfaces	General Requirement	40465	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall digitally sign each request for 540 form data.
Interfaces	General Requirement	40466	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall implement error response handling as part of the new FTB Webservice.
Interfaces	General Requirement	40467	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall adhere to the schema constraints as part of the new FTB Webservice.
Interfaces	General Requirement	40468	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall incorporate this real time request/response as part of the application submission.
Interfaces	General Requirement	40469	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall persist the request and response for the new FTB webservice in the new FTB schema. This FTB schema will be created in the California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) HBX Database.
Interfaces	General Requirement	40472	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall request the last tax return information submitted to FTB.
Interfaces	General Requirement	40473	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall update Mock Services for FTB logic results
Interfaces	General Requirement	40474	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall perform business data consistency checks of all submissions as defined by FTB for the 540 income call.
Interfaces	General Requirement	40475	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall ensure that all transmissions must have a unique transmission identifier (UTID). Along with the submission identifier, the UTID enables a concise method for identifying every element in a transmission.
Interfaces	General Requirement	40476	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall transmit data to FTB via the File Exchange API Channel using a TLS 1.2-encrypted RESTful endpoint.
Interfaces	General Requirement	40671	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall update the Salesforce interface to send additional data elements on the Household Search Response.
Interfaces	General Requirement	40672	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall provide Salesforce with Agent/Assister data in a new Agent/Assister Search service operation between California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) and Salesforce that includes request and response messages.
Interfaces	General Requirement	40673	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall receive Agent/Assister Search requests from Salesforce containing basic Agent/Assister information.
Interfaces	General Requirement	40674	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall send Agent/Assister Search responses to Salesforce containing demographic and contact information related to the requested Agent/Assister.
Interfaces	General Requirement	40893	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall only send EERC 'PS: QHP Pregnancy Hold – Has elected to switch' when an individual has elected to switch from QHP Pregnancy Hold to Medi-Cal.
Interfaces	General Requirement	40894	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall only send EERC 'MS: MCAP Pregnancy Hold ended – Consumer elected to switch to MAGI MC' when an individual has elected to switch from MCAP to Medi-Cal.
Interfaces	General Requirement	40895	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall send HX20-ESAC2 to MEDS when an individual transitions from MCAP to CCHIP, or vice versa.
Interfaces	General Requirement	41472	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall support CalWIN to CalSAWS mock cutover activity during CalWIN to CalSAWS migration.
Interfaces	General Requirement	41479	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall update the reference tables for Placer, Contra Costa, and Yolo to LRS.
Interfaces	General Requirement	41480	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall update the reference table containing FIPS county code.
Interfaces	General Requirement	41481	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall update the reference table containing consortia code.
Interfaces	General Requirement	41482	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall update the transactional table containing consortia code.
Interfaces	General Requirement	41483	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall modify EDR/ EDR-C/ CancelDER/ DER/ Disposition/ Update and VLP processing logic to support migration of CalWIN Counties of Placer, Contra Costa, and Yolo to LRS.
Interfaces	General Requirement	41484	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall implement the configurable logic to turn on/ off code changes related to CalWIN to CalSAWS migration of Placer, Contra Costa, and Yolo counties to support R22.10.X and CalSAWS migration go-live.
Interfaces	General Requirement	41485	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall programmatically generate 2 DER-Us for CalWIN and LRS format during cutover window.
Interfaces	General Requirement	41486	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall retrigger DER-Us post migration based on the list provided by CalWIN.
Interfaces	General Requirement	42961	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) system shall reuse existing Los Angeles County eHIT services, specifically EDR-C, DER, Disposition, Update Inbound/Outbound, Batch Documents Transfers, Logging, and SFTP Traffic and Error Detail Reports.
Interfaces	General Requirement	42962	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) system shall make eHIT services available to both LRS and LEADER simultaneously.
Interfaces	General Requirement	42963	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) system shall differentiate LRS inbound transactions from LEADER using existing fields within the eHIT schema.
Interfaces	General Requirement	42967	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) system shall re-trigger DERS for LRS selected cases during data conversion intervals specified by LRS data conversion calendar.

Appendix A-4 - SOW Exhibit A - System Requirements Specification
(Extracted from CalHEERS RTM)

Category	Sub Category	Req ID	Requirement
Interfaces	General Requirement	42968	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) system shall send all DERS tied to a specific Los Angeles County case during the data conversion intervals.
Interfaces	General Requirement	42969	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall update system case owners as LRS for DER-U identified by LRS during the data conversion intervals .
Interfaces	General Requirement	42970	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) system shall identify a case as LRS once LRS indicates a case as such.
Interfaces	General Requirement	42971	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) system shall maintain existing case and person linkage per California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) case structure.
Interfaces	General Requirement	42972	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) system shall maintain existing California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) case and person numbers as established by the LEADER system.
Interfaces	General Requirement	42973	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) system shall adhere to the approved security protocols established with Los Angeles County for Web Services and file transactions.
Interfaces	General Requirement	44828	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall have the ability to automatically store information received from SAWS. California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall then attempt to update case information using the Automated Case Update Process. A manual process will be invoked for all cases that cannot be created or updated automatically.
Interfaces	General Requirement	44831	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall interface with DHCS/ITSD Intermediary to transmit and obtain client information in batch and real-time for the California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) business process implementation. DHCS/ITSD will route transactions to/from associated systems (MEDS, SCI, App Tracking, IEVS, SAVE).
Interfaces	General Requirement	44839	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall interface with each of the Statewide Automated Welfare Systems (e.g. CalWIN, C-IV, LEADER) to transfer client/case information.
Interfaces	General Requirement	44840	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) SAWS Interface eHIT Schema shall include updates to data element annotations for relationships, income, or newly added elements as defined in the Interface Design Document.
Interfaces	General Requirement	44841	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) SAWS Interface eHIT Schema shall include updates to the Disposition record to change SAWSCaseDetails CountyCode to ServicingFIPSCountyCode.
Interfaces	General Requirement	44842	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) SAWS Interface eHIT Schema shall include updates to change "AffordablItSHOPInd" to "AffordableSHOPInd".
Interfaces	General Requirement	44843	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) SAWS Interface eHIT Schema shall remove the change indicator element from Authorized Representative Phone Type element as this is not supported functionality.
Interfaces	General Requirement	44844	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) SAWS Interface eHIT Schema shall remove the Incorrect DocumentManifest element.
Interfaces	General Requirement	44845	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) SAWS Interface eHIT Schema shall include differential indicators for US citizens and eligible immigrants.
Interfaces	General Requirement	44847	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) SAWS eHIT Interface shall include a Change Indicator at the Person Node.
Interfaces	General Requirement	44848	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) SAWS eHIT Interface shall include the user role in OriginationCode, for unsolicited Determination Eligibility Reponse and Update transactions from California Healthcare Eligibility, Enrollment and Retention System (CalHEERS).
Interfaces	General Requirement	44849	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) SAWS eHIT Interface shall include up to 2 years of historic data for income and deductions.
Interfaces	General Requirement	44850	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) SAWS eHIT Interface shall include new reasons for Eligibility Evaluation Reason Code: • No Qualifying Life Event • Life Event is not within Period. • Life Event needs Verification
Interfaces	General Requirement	44868	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) SAWS Interface eHIT Schema shall provide a common logging messaging service to report transaction status.
Interfaces	General Requirement	44869	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) SAWS Interface eHIT Schema shall provide referential information as to the transaction being sent in the common messaging transaction service.
Interfaces	General Requirement	44870	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) SAWS Interface eHIT Schema shall allow for 12 EDR-C requests defined.
Interfaces	General Requirement	44871	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) SAWS Interface eHIT Schema shall make the WorkerNumber in the BRE node a required element in the Eligibility Determination Requests as to be able to identify worker driven requests.
Interfaces	General Requirement	44872	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) SAWS Interface eHIT Schema shall include an optional element to assist in environment designation.
Interfaces	General Requirement	44873	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) SAWS Interface eHIT Schema shall include field labels to distinguish between Servicing county and the Case Member's address county.
Interfaces	General Requirement	44874	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) SAWS Interface eHIT Schema shall remove the unused Transfer Comments element.
Interfaces	General Requirement	44875	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) SAWS Interface eHIT Schema shall include updates to data elements used for VLP Step 1.
Interfaces	General Requirement	44876	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) SAWS Interface eHIT Schema shall include life event options for special enrollment.
Interfaces	General Requirement	44877	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) SAWS Interface eHIT Schema shall include a Date of Death element
Interfaces	General Requirement	44878	"The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) SAWS Interface eHIT Schema shall include Eligibility Type codes in Determination: Regular and Read-Only"
Interfaces	General Requirement	44879	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) SAWS Interface eHIT Schema shall include SoftPauseLiftAdminIndicator in EDR BRE Node.
Interfaces	General Requirement	44880	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) SAWS Interface eHIT Schema shall update to add MAGI Medi-Cal evaluation reasons as available, but not including Federal Tax Information.
Interfaces	General Requirement	44881	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) SAWS Interface eHIT Schema shall include elements for primary, secondary and tertiary aid codes

Category	Sub Category	Req ID	Requirement
Interfaces	General Requirement	44882	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) SAWS Interface eHIT Schema shall allow for 50 character length for PersonGivenName, PersonMiddleName, PersonSurName, and PersonMaidenName elements.
Interfaces	General Requirement	44883	"The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) SAWS Interface eHIT Schema shall update NOA Generation elements from Required to Optional, including the following: CountyFaxNumber AdditionalCountyPhone WorkerPhoneNumber"
Interfaces	General Requirement	44884	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) SAWS Interface eHIT Schema shall include a Caretaker Relationship element
Interfaces	General Requirement	44885	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) SAWS Interface eHIT Schema shall include an element for the Dependent Tax Return Benefit Year.
Interfaces	General Requirement	44886	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) SAWS Interface eHIT Schema shall include updates to the language for MEC, Death and Incarceration Indicators to remove double negatives.
Interfaces	General Requirement	44887	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) SAWS Interface eHIT Schema shall expand the Disposition transaction elements to include the Primary Applicants first name, last name, social security number, date of birth, and gender as a means of verifying case linkage.
Interfaces	General Requirement	44888	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) SAWS Interface eHIT Schema shall include a SSN waiver admin flag for those consumers who don't qualify for an SSN and have a valid reason
Interfaces	General Requirement	44889	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) SAWS Interface eHIT schema shall include begin and end dates for the Applying For Health Coverage Ind
Interfaces	General Requirement	44890	Add element "PlanToFileThisYearInd" at the individual level.
Interfaces	General Requirement	44891	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) SAWS Interface eHIT Schema shall deprecate the Naturalized Citizen indicator.
Interfaces	General Requirement	44892	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) SAWS Interface eHIT Schema shall deprecate the prior year tax information elements.
Interfaces	General Requirement	44893	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) SAWS Interface eHIT Schema shall align the Reasons for no SSN with those in the Single Streamline Application.
Interfaces	General Requirement	44894	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) SAWS Interface eHIT Schema shall include a new element indicating a Case Worker has seen the letter from SSA when the applicant has applied for a SSN.
Interfaces	General Requirement	44895	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) SAWS Interface eHIT Schema shall include updates to Other Healthcare elements including enrollment, expected changes, and termination in other coverage to align with the Single Streamline Application.
Interfaces	General Requirement	44896	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) SAWS Interface eHIT Schema shall include new elements for Employee Sponsored Insurance information to align with the Single Streamline Application.
Interfaces	General Requirement	44897	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) SAWS Interface eHIT Schema shall include updates to Income and Deduction types to align with the Single Streamline Application.
Interfaces	General Requirement	44898	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) SAWS Interface eHIT Schema shall include updates to Tax Household Information to include a Non-Custodial parent not on the application to align with the Single Streamline Application.
Interfaces	General Requirement	44899	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) system shall capture Projected Annual Income.
Interfaces	General Requirement	44900	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) SAWS Interface eHIT Schema and system shall include updates to pass and store the information on whether a person is expected to be required to file taxes this year.
Interfaces	General Requirement	44901	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) SAWS Interface shall include business validation updates to align with the California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) system which restricts contradictory Tax Filing statuses.
Interfaces	General Requirement	44902	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) SAWS Interface eHIT schema shall include the Pregnancy End Date.
Interfaces	General Requirement	44903	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) SAWS Interface eHIT Schema shall include suffix elements as currently defined and provided by the California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) Access channel.
Interfaces	General Requirement	44904	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) SAWS Interface eHIT Schema shall include an option to add Deduction Type of type Other.
Interfaces	General Requirement	44905	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) SAWS Interface eHIT Schema shall update Everified and Admin Verifications elements in the Eligibility Determination from Required to Optional.
Interfaces	General Requirement	44906	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall have the ability to send SAWS the following information: - application data - verifications - accepted EDBC results - non-MAGI screening results - generated MAGI Medi-Cal Notice of Action (.PDF and PCL5) - California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) case # - APTC/CSR disposition (for mixed households) - documents

Category	Sub Category	Req ID	Requirement
Interfaces	General Requirement	44907	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall have the ability to accept from SAWS: - disposition of non-MAGI Medi-Cal eligibility determination - disposition of MAGI Medi-Cal eligibility determination - SAWS case # - case data changes - application data - verifications - generated non-MAGI Medi-Cal Notice of Action (.PDF) - documents
Interfaces			California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall provide a web service through the Enterprise Service Bus for SAWS to request verifications and eligibility determination together.
Interfaces	General Requirement	44909	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall have the ability to send SAWS "Client Information Change" information including, but not limited to: - California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) case # - SAWS case # - type of change - new information - effective date of change - new eligibility determination - documents - generated MAGI Medi-Cal Notice of Action (.PDF and PCL5) - case notes
Interfaces			California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall have the ability to accept from SAWS "Client Information Change" information including, but not limited to: - California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) case # - SAWS case # - type of change - new information - effective date of change - new eligibility determination - documents - generated MAGI Medi-Cal Notice of Action (.PDF) - case notes
Interfaces	General Requirement	44912	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) SAWS Interface eHIT Schema shall include Negative Action reasons.
Interfaces	General Requirement	44913	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) SAWS Interface eHIT Schema shall restrict the BusinessName element to 50 characters.
Interfaces	General Requirement	44914	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) SAWS eHIT Interface shall send solicited determination eligibility response Error messages through the logging transaction.
Interfaces			The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) SAWS eHIT Interface shall update transaction #5 to include residential address.
Interfaces	General Requirement	44916	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) SAWS eHIT Interface shall update transaction #5 to include mailing address.
Interfaces	General Requirement	44917	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) SAWS eHIT Interface shall include an indicator for removing a person on the case.
Interfaces	General Requirement	44918	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) SAWS eHIT Interface shall include an optional element for person Removal Reason.
Interfaces	General Requirement	44919	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) SAWS eHIT Interface shall include an optional element for person Removal Date.
Interfaces	General Requirement	44920	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) SAWS eHIT Interface shall include an indicator for adding a person on the case.
Interfaces	General Requirement	44921	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) SAWS eHIT Interface shall include a change indicator at the Application Node.
Interfaces	General Requirement	44922	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) SAWS eHIT interface shall include a unique message ID for all outbound transactions.
Interfaces	General Requirement	44923	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) SAWS eHIT interface shall include an unbounded element for Consumer Protection Programs at the person level.
Interfaces	General Requirement	44924	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) SAWS eHIT Interface shall include the WasInFosterCareInd at the person level.
Interfaces	General Requirement	44925	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) SAWS eHIT Interface schema shall include the Application Identifier for the SAWS system.
Interfaces	General Requirement	44926	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) SAWS eHIT Interface schema shall rename ApplicationID to California Healthcare Eligibility, Enrollment and Retention System (CalHEERS)ApplicationID.
Interfaces			The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) SAWS eHIT Interface shall accept and send the data within the Environment element for transactions.
Interfaces	General Requirement	44928	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) SAWS eHIT interface shall align the address length with the max length allowed for the same fields in the California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) portal.
Interfaces			The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) SAWS eHIT interface shall deprecate the Tax Filing Status of "DE"
Interfaces	General Requirement	44930	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) SAWS eHIT Interface IDD shall remove the reference to Status Codes Table under the PrimaryAidCode element.
Interfaces	General Requirement	44931	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) SAWS eHIT Interface IDD shall include CountyCasePeriodDate as repeatable.

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(Extracted from CalHEERS RTM)

OTSI CalHEERS RFP #73040873 Addendum 1
October 31, 2025

Category	Sub Category	Req ID	Requirement
Interfaces	General Requirement	44932	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) SAWS eHIT Interface IDD shall include EthnicCodes as repeatable.
Interfaces	General Requirement	44933	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) SAWS eHIT Interface shall include the USCitizenInd element at the person level.
Interfaces	General Requirement	44934	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) SAWS eHIT Interface shall include the EligibleImmigrationInd element at the person level.
Interfaces	General Requirement	44935	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) SAWS eHIT Interface shall include the QualifiedNonCitizenAttestationInd element at the person level.
Interfaces	General Requirement	44936	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) SAWS eHIT Interface schema shall include a repeatable list for Administrative Verifications.
Interfaces	General Requirement	44937	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) SAWS eHIT Interface schema shall include a repeatable list for eVerifications.
Interfaces	General Requirement	44938	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) SAWS eHIT Interface schema shall update element ImageCode to unbounded.
Interfaces	General Requirement	44939	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) SAWS eHIT Interface schema shall update element ReapplyLifeEventCode to unbounded.
Interfaces	General Requirement	44940	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) SAWS eHIT Interface schema shall update element DeductionCode to unbounded.
Interfaces	General Requirement	44941	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) SAWS eHIT Interface schema shall update element RelationshipCode to unbounded.
Interfaces	General Requirement	44942	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) SAWS eHIT Interface schema shall update element Income SourceCode to unbounded.
Interfaces	General Requirement	44943	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) SAWS eHIT Interface schema shall update ReferralProgramTypeCode to unbounded.
Interfaces	General Requirement	44944	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) SAWS eHIT Interface schema shall update element MessageStatusCode to unbounded.
Interfaces	General Requirement	44945	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) SAWS eHIT Interface schema shall update element DocTypeCode to unbounded.
Interfaces	General Requirement	44946	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) SAWS eHIT Interface schema shall update element ReasonForNoSSNCode to unbounded.
Interfaces	General Requirement	44947	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) SAWS eHIT Interface shall update element USCitizenInd from required to optional.
Interfaces	General Requirement	44948	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) SAWS eHIT Interface shall update element EligibleImmigrationInd from required to optional.
Interfaces	General Requirement	44949	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) SAWS eHIT Interface shall update element QualifiedNonCitizenAttestationInd from required to optional.
Interfaces	General Requirement	44950	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) SAWS eHIT interface shall validate LifeEventChangeDate, if ReapplyLifeEventCode is provided.
Interfaces	General Requirement	44951	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) SAWS eHIT interface shall validate ReasonForNoSSNCode, if no SSN is provided.
Interfaces	General Requirement	44952	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) SAWS eHIT interface shall validate TribeNameCode, if American Indian or Alaska Native is selected for EthnicCode.
Interfaces	General Requirement	44953	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) SAWS eHIT interface shall validate PregnancyExpectedDueDate, if PregnancyInfo is provided.
Interfaces	General Requirement	44954	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) SAWS eHIT interface shall validate NoOfBabiesExpected, if PregnancyInfo is provided.
Interfaces	General Requirement	44955	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) SAWS eHIT interface shall validate DepntTaxRetrnBenefitYrInd, if TaxFilingInfo is provided.
Interfaces	General Requirement	44956	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) SAWS eHIT interface shall validate PlanToFileThisYearInd, if TaxFilingInfo is provided.
Interfaces	General Requirement	44957	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) SAWS eHIT interface shall validate IncomeFrequencyCode, for all Income provided.
Interfaces	General Requirement	44958	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) SAWS eHIT interface shall validate HaveOrOfferedOtherHealthProg, if the individual is applying for health coverage.
Interfaces	General Requirement	44959	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) SAWS eHIT interface shall validate ReceiveMediCareBenefitsInd, if the individual is applying for health coverage.
Interfaces	General Requirement	44960	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) SAWS eHIT Interface shall include a Change Indicator for CasePersonDateRange.
Interfaces	General Requirement	44964	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall interface the with a designated financial institution or other payment issuers for the issuance of payments and receipt of payment information for reconciliations.
Interfaces	General Requirement	44965	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall interface with the Employment Development Department (EDD) to obtain and verify State Employer ID number and other appropriate information.
Interfaces	General Requirement	44967	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) MEDS Interface shall include CountyCode data element under the CountyOfResponsibility complex type on the HX18 Web Service Transaction
Interfaces	General Requirement	44968	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) MEDS Interface shall include CountyCode data element under the CountyOfResponsibility complex type on the HX20 Web Service Transaction
Interfaces	General Requirement	45004	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall interface with QHP Issuers to achieve automated exchange of plan and premium data.
Interfaces	General Requirement	45094	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) system shall not archive the generated reports.
Interfaces	General Requirement	45095	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall provide fault tolerance on failed transmissions.
Interfaces	General Requirement	45101	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) system in conjunction with LRS shall conduct network routing exercises to establish environment connectivity for LRS testing and production rollout.
Interfaces	General Requirement	45103	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) system shall provide a mechanism to report on the operational status of the file exchange.
Interfaces	General Requirement	45140	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall update the technical components for the California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) SAWS Interface for communication with the SAWS. CR 70782 and CR 70497 are scoped for this activity.
Interfaces	General Requirement	45141	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall update the technical components for the California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) MEDS Interface for communication with the MEDS. CR 70497 is scoped for this activity.

Appendix A-4 - SOW Exhibit A - System Requirements Specification
(Extracted from CalHEERS RTM)

Category	Sub Category	Req ID	Requirement
Interfaces	General Requirement	45168	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall support LRS in the TM03 environment 6/4/18-6/29/18 to create a new master data set.
Interfaces	General Requirement	45169	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall support LRS validation activities after the data creation (150 cases) for 2 weeks (7/2/2018 - 7/13/2018).
Interfaces	General Requirement	45181	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall update the technical components for the California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) SAWS Interface for communication with the SAWS. CR 69974 is scoped for this activity.
Interfaces	General Requirement	45189	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall turn off the FDSH ESI MEC service until such time the full upgrade to version 2 is completed.
Interfaces	General Requirement	45194	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall upgrade the ESI-MEC schema to version 2
Interfaces	General Requirement	45195	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall turn on the ESI-MEC service
Interfaces	General Requirement	45196	CalHERS shall test new endpoint and provide proof of testing to CMS
Interfaces	General Requirement	45211	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall update e-HIT schema to add a Naturalized or Derived Indicator
Interfaces	General Requirement	45212	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall undeprecate document type codes U1 - Certificate of Citizenship (N-560, N- 561)
Interfaces	General Requirement	45213	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall undeprecate document type codes V1 - Naturalization Certificate (N-550, N-570)
Interfaces	General Requirement	45214	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall update the minimum and maximum value lengths of each document type based on interface requirements.
Interfaces	General Requirement	45215	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall undeprecate the Naturalization certificate number (N-550, N-570)
Interfaces	General Requirement	45216	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall undeprecate the Derived Citizenship certificate number (N-550, N-570)
Interfaces	General Requirement	45284	Effective January 1, 2019, the California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall exclude optional elements from TY 2018 1095 if data value is blank or missing. Optional element with data value shall pass thru same XML schema validation as required elements. Empty, blank or null XML tags should not be sent in XML data files for IRS returns.
Interfaces	General Requirement	45285	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall validate all tags, elements and data with XML Schema definitions
Interfaces	General Requirement	45286	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall not put leading or trailing spaces in TaxYr element. The TaxYr element is defined by the YearType schema definition.
Interfaces	General Requirement	45287	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall not put leading or trailing spaces in DateType elements starting TY 2018. DataType elements shall contain legitimate date.
Interfaces	General Requirement	45288	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall put two decimal points (i.e. ""0.00"") for all elements defined by AmountType XML schema definition of TY2018 & future. Specific elements include: MonthlyPremiumAmt, MonthlyPremiumSLCSPAmt, MonthlyAdvancedPTCAmt, AnnualPremiumAmt, AnnualPremiumSLCSPAmt, AnnualAdvancedPTCAmt
Interfaces	General Requirement	45289	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall always include both recordType and lineNum elements in XML file. The recordType is of type string and lineNum is integer.
Interfaces	General Requirement	45290	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall not exceed RecordSequenceNum value more than 15 digits. The maximum limit is 15 digits.
Interfaces	General Requirement	45309	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) Shall adhere to the schema in all validations. If the information does not conform to the schema, then a call will not be made. The pattern validation is applied to all document numbers and name lengths: Alien number is min/max 9 (zero filled if less than 9 digits) Card/Receipt Number is min/max 13 (3 alpha - 10 digit) SEVIS ID is min/max 10 (10 digits) Natualized/Derived min 6 max 12 (alpha numeric) I-94 is min/max 11 (11 digits) Passport is min 6 max 12 (alpha numeric) Visa is min/max 8 (alpha numeric) First name max 25 (truncated) Middle Name max 25 (truncated) Last Name max 40 (truncated)
Interfaces	General Requirement	45354	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) Team shall reconfigure quick sort client configuration to accept calls from Salesforce.
Interfaces	General Requirement	45545	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall implement 3 scale and FUSE on REDHAT OpenShift container platform
Interfaces	General Requirement	45546	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall migrate CalSAWS interfaces from OAG to 3 scale+ FUSE API gateway solution
Interfaces	General Requirement	45547	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall migrate the existing CalSAWS South (CalSAWS - LRS/C-IV) SOAP Webservice inbound interface from OAG to 3Scale + FUSE API gateway solution
Interfaces	General Requirement	45548	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall migrate the existing CalSAWS South (CalSAWS - LRS/C-IV) SOAP Webservice outbound interface from OAG to 3Scale + FUSE API gateway solution
Interfaces	General Requirement	45549	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall migrate the existing CalSAWS - (CalWIN) SOAP Webservice inbound interface from OAG to 3Scale + FUSE API gateway solution
Interfaces	General Requirement	45550	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall migrate the existing CalSAWS - (CalWIN) SOAP Webservice outbound interface from OAG to 3Scale + FUSE API gateway solution
Interfaces	General Requirement	45551	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall migrate the existing CalSAWS South (CalSAWS LRS/C-IV) File inbound interface from OAG to 3Scale + Fuse API gateway solution
Interfaces	General Requirement	45552	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall migrate the existing CalSAWS South (CalSAWS LRS/C-IV) File outbound interface from OAG to 3Scale + Fuse API gateway solution

Appendix A-4 - SOW Exhibit A - System Requirements Specification
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Category	Sub Category	Req ID	Requirement
Interfaces	General Requirement	45553	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall migrate the existing SAWS (CalWIN) File inbound interface from OAG to 3Scale + Fuse API gateway solution
Interfaces	General Requirement	45554	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall migrate the existing SAWS (CalWIN) File outbound interface from OAG to 3Scale + Fuse API gateway solution
Interfaces	General Requirement	45555	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall migrate the existing EDD SOAP Webservice outbound interface from OAG to 3Scale+ FUSE API gateway solution
Interfaces	General Requirement	45556	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall migrate the FTB interfaces from OAG to 3Scale + FUSE API gateway solution
Interfaces	General Requirement	45557	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall migrate the FTB 3895 REST API outbound interface from OAG to 3Scale + FUSE API gateway solution
Interfaces	General Requirement	45558	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall migrate the FTB 540 REST API outbound interface from OAG to 3Scale + FUSE API gateway solution
Interfaces	General Requirement	45559	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall migrate the existing InfoCap/DIVS SOAP Webservice interface from OAG to 3Scale + FUSE API gateway solution
Interfaces	General Requirement	45560	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall migrate the existing InfoCap/DIVS SOAP Webservice inbound interface from OAG to 3Scale + FUSE API gateway solution
Interfaces	General Requirement	45561	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall migrate the existing InfoCap/DIVS SOAP Webservice outbound interface from OAG to 3Scale + FUSE API gateway solution
Interfaces	General Requirement	45562	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall migrate the existing MEDS SOAP Webservice outbound interface from OAG to 3Scale + FUSE API gateway solution
Interfaces	General Requirement	45563	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall migrate the existing IVR REST API Webservices inbound interface from OAG to 3Scale + FUSE API gateway solution
Interfaces	General Requirement	45564	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall migrate the existing Salesforce Marketing Cloud outbound interface to 3Scale + FUSE API Gateway for outbound transactions
Interfaces	General Requirement	45565	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall migrate the existing WhoisXMI API interface outbound interface from OAG to 3Scale + FUSE API gateway solution
Interfaces	General Requirement	45566	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall migrate the existing GoogleRe-captcha API outbound interfaces from OAG to 3Scale + FUSE API gateway solution
Interfaces	General Requirement	45567	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall migrate the existing Salesforce CRM inbound interfaces from OAG to 3Scale + FUSE API gateway solution
Interfaces	General Requirement	45568	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall migrate the existing OpenMarket interfaces from OAG to 3Scale + FUSE API gateway solution
Interfaces	General Requirement	45569	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall migrate the existing OpenMarket outbound interfaces from OAG to 3Scale + FUSE API gateway solution
Interfaces	General Requirement	45570	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall migrate the existing AIM/Maximus SOAP Webservice inbound interface from OAG to 3Scale + FUSE API gateway solution
Interfaces	General Requirement	45571	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall migrate the existing CMS FEDHUB Webservice interfaces from OAG to 3Scale + FUSE API gateway solution
Interfaces	General Requirement	45572	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall migrate the existing CMS VLP Webservice inbound interface from OAG to 3Scale + FUSE API gateway solution
Interfaces	General Requirement	45573	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall migrate the existing CMS VLP Webservice outbound interface from OAG to 3Scale + FUSE API gateway solution
Interfaces	General Requirement	45574	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall migrate the existing CMS IRS Webservice outbound interface from OAG to 3Scale + FUSE API gateway solution
Interfaces	General Requirement	45575	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall migrate the existing CMS SSA Webservice outbound interface from OAG to 3Scale + FUSE API gateway solution
Interfaces	General Requirement	45576	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall migrate the existing CMS ESI Webservice outbound interface from OAG to 3Scale + FUSE API gateway solution
Interfaces	General Requirement	45577	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall migrate the existing CMS Non-ESI Webservice outbound interface from OAG to 3Scale + FUSE API gateway solution
Interfaces	General Requirement	45578	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall migrate the existing CMS RIDP Webservice outbound interface from OAG to 3Scale + FUSE API gateway solution
Interfaces	General Requirement	45579	archive data older from business tables
Interfaces	General Requirement	45580	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall migrate the existing CMS FARS Webservice outbound interface from OAG to 3Scale + FUSE API gateway solution
Interfaces	General Requirement	45581	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall implement the CMS Equifax Webservice outbound interface in 3Scale + FUSE API gateway solution
Interfaces	General Requirement	45582	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall implement the Smarty Street Webservice outbound interface in 3Scale + FUSE API gateway solution
Interfaces	General Requirement	45583	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall migrate the KPCorp File interface from OAG to 3Scale + Fuse API gateway solution
Interfaces	General Requirement	45584	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall migrate the KPCorp File inbound interface from OAG to 3Scale + Fuse API gateway solution
Interfaces	General Requirement	45585	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall migrate the KPCorp File outbound interface from OAG to 3Scale + Fuse API gateway solution
Interfaces	General Requirement	45586	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall migrate the existing MEDS File interface from OAG to 3Scale + Fuse API gateway solution
Interfaces	General Requirement	45587	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall migrate the existing MEDS File inbound interface from OAG to 3Scale + Fuse API gateway solution
Interfaces	General Requirement	45588	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall migrate the existing MEDS File outbound interface from OAG to 3Scale + Fuse API gateway solution
Interfaces	General Requirement	45589	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall migrate the existing DHCS-Reports File interface from OAG to 3Scale + Fuse API gateway solution
Interfaces	General Requirement	45590	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall migrate the existing DHCS-Reports File inbound interface from OAG to 3Scale + Fuse API gateway solution

Appendix A-4 - SOW Exhibit A - System Requirements Specification
(Extracted from CalHEERS RTM)

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Appendix A-4 - SOW Exhibit A - System Requirements Specification
(Extracted from CalHEERS RTM)

Category	Sub Category	Req ID	Requirement
Interfaces	General Requirement	45635	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall migrate the existing SharpFile interface from OAG to 3Scale + Fuse API gateway solution
Interfaces	General Requirement	45636	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall migrate the existing SharpFile inbound interface from OAG to 3Scale + Fuse API gateway solution
Interfaces	General Requirement	45637	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall migrate the existing SharpFile outbound interface from OAG to 3Scale + Fuse API gateway solution
Interfaces	General Requirement	45638	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall migrate the existing Western Health File interface from OAG to 3Scale + Fuse API gateway solution
Interfaces	General Requirement	45639	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall migrate the existing Western Health File inbound interface from OAG to 3Scale + Fuse API gateway solution
Interfaces	General Requirement	45640	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall migrate the existing Western Health File outbound interface from OAG to 3Scale + Fuse gateway solution
Interfaces	General Requirement	45641	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall migrate the existing Valley File interface from OAG to 3Scale + Fuse API gateway solution
Interfaces	General Requirement	45642	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall migrate the existing Valley File inbound interface from OAG to 3Scale + Fuse API gateway solution
Interfaces	General Requirement	45643	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall migrate the existing Valley File outbound interface from OAG to 3Scale + Fuse API gateway solution
Interfaces	General Requirement	45795	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall update the reference tables for Santa Clara, Tulare and Contra Costa to LRS.
Interfaces	General Requirement	45796	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall update the reference table containing consortia code.
Interfaces	General Requirement	45797	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall update the transactional table containing consortia code.
Interfaces	General Requirement	45798	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall modify EDR/ EDR-C/ CancelDER/ DER/ Disposition/ Update and VLP processing logic to support CalWIN Counties of Santa Clara, Tulare and Contra Costa to LRS.
Interfaces	General Requirement	45799	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall update OSB views to remove Santa Clara, Tulare and Contra Costa counties from CalWIN views and add them to the CalSAWS views.
Interfaces	General Requirement	45800	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall convert CalSAWS DER-Us (for migrating counties generated during cutover window) to CalWIN format via PCR in the event of Rollback.
Interfaces	General Requirement	45801	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall support all California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) related changes and support required for Orange, Santa Barbara and Ventura counties to migrate from CalWIN to CalSAWS System.
Interfaces	General Requirement	45808	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall update the reference tables for Orange, Santa Barbara and Ventura counties to LRS.
Interfaces	General Requirement	45809	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall update the reference table containing consortia code.
Interfaces	General Requirement	45810	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall update the transactional table containing consortia code.
Interfaces	General Requirement	45811	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall modify EDR/ EDR-C/ CancelDER/ DER/ Disposition/ Update and VLP processing logic to support CalWIN Counties of Orange, Santa Barbara and Ventura to LRS.
Interfaces	General Requirement	45812	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall update OSB views to remove Orange, Santa Barbara and Ventura counties from CalWIN views and add them to the CalSAWS views.
Interfaces	General Requirement	46091	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall convert CalSAWS DER-Us (for migrating counties generated during cutover window) to CalWIN format via PCR in the event of Rollback.
Interfaces	General Requirement	46103	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall update the reference tables for San Diego, San Mateo, Santa Cruz and Solano to LRS.
Interfaces	General Requirement	46104	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall update the reference table containing consortia code.
Interfaces	General Requirement	46105	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall update the transactional table containing consortia code.
Interfaces	General Requirement	46106	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall modify EDR/ EDR-C/ CancelDER/ DER/ Disposition/ Update and VLP processing logic to support CalWIN Counties of San Diego, San Mateo, Santa Cruz and Solano to LRS.
Interfaces	General Requirement	46107	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall update OSB views to remove San Diego, San Mateo, Santa Cruz and Solano counties from CalWIN views and add them to the CalSAWS views.
Interfaces	General Requirement	46108	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall convert CalSAWS DER-Us (for migrating counties generated during cutover window) to CalWIN format via PCR in the event of Rollback.
Interfaces	General Requirement	46129	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall update the reference tables for Sacramento, San Luis Obispo and San Francisco to LRS.
Interfaces	General Requirement	46130	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall update the reference table containing consortia code.
Interfaces	General Requirement	46131	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall update the transactional table containing consortia code.
Interfaces	General Requirement	46132	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall modify EDR/ EDR-C/ CancelDER/ DER/ Disposition/ Update and VLP processing logic to support CalWIN Counties of Sacramento, San Luis Obispo and San Francisco to LRS.
Interfaces	General Requirement	46133	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall update OSB views to remove Sacramento, San Luis Obispo and San Francisco counties from CalWIN views and add them to the CalSAWS views.
Interfaces	General Requirement	46134	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall convert CalSAWS DER-Us (for migrating counties generated during cutover window) to CalWIN format via PCR in the event of Rollback.
Interfaces	General Requirement	46775	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall implement a secure file transfer interface with CalSAWS to receive the MAGI Medi-Cal Renewals Reverification Request file(s).
Interfaces	General Requirement	46776	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall accept the MAGI Medi-Cal Renewals Reverification Request file(s) no later than 20 calendar days prior to the end of the month.
Interfaces	General Requirement	46777	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall have the functionality to receive the encrypted and compressed zipped file not exceeding 500 MB containing MAGI Medi-Cal Renewals Reverification Request file(s) using PGP encryption standards.

Appendix A-4 - SOW Exhibit A - System Requirements Specification
(Extracted from CalHEERS RTM)

Category	Sub Category	Req ID	Requirement
Interfaces	General Requirement	46778	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall receive the MAGI Medi-Cal Renewals Reverification Request file(s) from CalSAWS ensuring each file does not exceed more than 100 MB when uncompressed.
Interfaces	General Requirement	46779	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall create a decryption and decompression batch to decrypt the zipped file containing MAGI Medi-Cal Renewals Reverification Request file(s) received from CalSAWS using PGP decryption standards.
Interfaces	General Requirement	46780	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall receive the MAGI Medi-Cal Renewals Reverification Request file(s) in the form of JSON format containing the following data elements: SAWS Transmission ID, SAWS Transmission Count, SAWS Record Count, Transmission Timestamp,Record ID, California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) Case Number, SAWS Case Number and ServicingFipsCountyCode.
Interfaces	General Requirement	46785	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall perform the file level validations on the monthly MAGI Medi-Cal Renewals Reverification request file(s) received from CalSAWS and shall respond with a response file.
Interfaces	General Requirement	46786	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall have the functionality to stop processing and staging the records in a monthly MAGI Medi-Cal Renewals Reverification request file(s) that has a file level validation error.
Interfaces	General Requirement	46787	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall perform the file level validation to ensure that the folder size does not exceed 500 MB and the request file placed in the folder should not exceed 100 MB.
Interfaces	General Requirement	46788	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall perform the file level validation to ensure that the credentials are authorized to receive the transmission via SFTP.
Interfaces	General Requirement	46789	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall perform the file level validation to ensure that CalSAWS adheres to file naming convention.
Interfaces	General Requirement	46790	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall perform the file level validation to ensure that the file extension is valid.
Interfaces	General Requirement	46791	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall perform the file level validation to ensure that the archive file is encrypted as per PGP standards.
Interfaces	General Requirement	46792	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall perform the file level validation to ensure that MMRRV request file is received from CalSAWS no later than 20 calendar days before the end of the month.
Interfaces	General Requirement	46793	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall perform schema level validation for the monthly MAGI Medi-Cal Renewals Reverification request file(s) received from CalSAWS.
Interfaces	General Requirement	46794	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall perform file level validation if transmission timestamp is not unique for each file placed in the batch (folder).
Interfaces	General Requirement	46795	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall create a batch and perform the record level validations for the monthly MAGI Medi-Cal Renewals Reverification request file(s) received from CalSAWS.
Interfaces	General Requirement	46796	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall have the functionality to continue processing subsequent records if any record has a record level validation and shall a generate a corresponding error at the record level in the response file generated by California Healthcare Eligibility, Enrollment and Retention System (CalHEERS).
Interfaces	General Requirement	46797	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall perform the record level validation to ensure that the California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) case is only staged once for SAWS MAGI Medi-Cal Renewals processing.
Interfaces	General Requirement	46798	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall perform the record level validation to ensure that there is an active case linkage between the California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) case and the CalSAWS case.
Interfaces	General Requirement	46799	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall perform the record level validation to ensure that the California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) case is not closed.
Interfaces	General Requirement	46800	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall perform the record level validation to ensure that the California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) case has on-going MAGI Medi-Cal eligibility.
Interfaces	General Requirement	46801	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall perform the record level validation to ensure that the SAWS case number and the FIPS county code is unique.
Interfaces	General Requirement	46802	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall perform the record level validation to ensure that the California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) case number is unique in the file.
Interfaces	General Requirement	46803	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall send the compressed zipped monthly MAGI Medi-Cal Renewals Reverification response file(s) to CalSAWS SFTP location ensuring the file size does not exceed a maximum of 500 MB.
Interfaces	General Requirement	46804	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall send a monthly MAGI Medi-Cal Renewals Reverification response file(s) to CalSAWS with the following data elements: SAWS Transmission ID, SAWS Transmission Count, SAWS Record Count, Transmission Timestamp, Transmission Status, Error Message, RequestZipFileName, Rule Number if a file level error is identified.
Interfaces	General Requirement	46805	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall send a MAGI Medi-Cal Renewal Reverification response file(s) to CalSAWS with the following data elements: SAWS Transmission ID, SAWS Transmission Count, Transmission Timestamp, Transmission Status, SAWS Successful Record Count, SAWS Error Record Count, Record ID, Error Message, Rule Number if record level error(s) are identified.
Interfaces	General Requirement	46806	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall send a MAGI Medi-Cal Renewal Reverification response file(s) to CalSAWS with the following data elements: SAWS Transmission ID, SAWS Transmission Count, SAWS Record Count, Transmission Timestamp, Transmission Status if the request file was processed without any file or record level validation errors.
Interfaces	General Requirement	46807	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall send the monthly MAGI Medi-Cal Renewals Reverification response file(s) to CalSAWS ensuring each file does not exceed more than 100 MB when uncompressed.
Interfaces	General Requirement	46808	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall create a batch to compress the file(s) to be sent to CalSAWS.
Interfaces	General Requirement	46809	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall have the ability to receive a resubmission request file from CalSAWS within 1 business day upon sending the MAGI Medi-Cal Renewals Reverification Response file to CalSAWS.

Category	Sub Category	Req ID	Requirement
Interfaces	General Requirement	46810	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall normalize the data elements received from CalSAWS for the monthly MAGI Medi-Cal Renewals Reverification request in the California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) database.
Interfaces	General Requirement	46811	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall normalize the data elements sent to CalSAWS for the monthly MAGI Medi-Cal Renewal Reverification response in the California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) database.
Interfaces	General Requirement	46812	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) and CalSAWS shall adhere to California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) standard folder and file naming conventions.
Interfaces	General Requirement	46813	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall receive the folder from CalSAWS as per defined request folder naming convention.
Interfaces	General Requirement	46814	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall receive the file from CalSAWS as per defined request file naming convention.
Interfaces	General Requirement	46815	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall adhere to MAGI Medi-Cal Renewal response folder naming conventions.
Interfaces	General Requirement	46816	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall adhere to the MAGI Medi-Cal Renewal response file naming conventions.
Interfaces	General Requirement	46817	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall update the Federal HUB Renewal and Redetermination Verification (RRV) service for MAGI Medi-Cal Renewal cases received from CalSAWS.
Interfaces	General Requirement	46818	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall stage individuals for the MAGI Medi-Cal RRV Process that have E-verified SSN.
Interfaces	General Requirement	46819	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall stage the active applying healthcare individuals for Income (SSA Income, IRS, VCI) as part of SAWS RRV Process.
Interfaces	General Requirement	46820	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall include all the individuals in the MAGI Medi-Cal RRV bulk service who are eligible to MAGI Medi-Cal for Medicare and Deceased.
Interfaces	General Requirement	46821	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall only stage individuals for all verification attributes whose cached verifications are greater than the valid cache period for Income, Medicare, Deceased, and Incarceration attributes from the date that the Renewal EDR is processed.
Interfaces	General Requirement	46822	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall follow the existing CMS process identified for Exchange RRV batches to generate the request and process the response file to renew the MAGI Medi-Cal population in the existing secured schemas.
Interfaces	General Requirement	46823	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall utilize the existing RRV request batches to generate the RRV request file for CMS.
Interfaces	General Requirement	46824	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall utilize the existing RRV response batches to persist the RRV response received from CMS.
Interfaces	General Requirement	46825	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall normalize the RRV request sent to CMS as well normalize the RRV response received from CMS for the MAGI -Medi-Cal RRV Batches in the secured schema.
Interfaces	General Requirement	46826	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall utilize the existing batch for incarceration calls for MAGI Medi-Cal Renewals utilizing staging batch by renewal month for MAGI Medi-Cal Renewals to initiate the calls.
Interfaces	General Requirement	46827	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall include all the individuals in the MAGI Medi-Cal RRV bulk service who are eligible to MAGI Medi-Cal for Incarceration.
Interfaces	General Requirement	46828	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall normalize the MAGI Medi-Cal RRV Incarceration request and response file received from CMS for the MAGI Medi-Cal Renewal individuals in the database.
Interfaces	General Requirement	46829	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall update the VIED to incorporate the RRV batch call for MAGI Medi-Cal Renewals processing.
Interfaces	General Requirement	46831	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall use the existing batches for the FTB Bulk Verification Service for MAGI Medi-Cal Renewals to invoke the API.
Interfaces	General Requirement	46832	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall stage all the individuals for the MAGI Medi-Cal FTB Bulk service.
Interfaces	General Requirement	46833	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall normalize the MAGI Medi-Cal RRV FTB Bulk request and response file received from FTB for the MAGI Medi-Cal Renewal individuals in the secured schema.
Interfaces	General Requirement	46834	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall update the VIED to incorporate the FTB Bulk batch call for MAGI Medi-Cal Renewals processing.
Interfaces	General Requirement	46837	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall normalize the SSA Disability indicator received from CMS during the Renewals from the secured schema into the California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) HBX schema.
Interfaces	General Requirement	46974	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall change the Technical architecture for effectively processing combined SAWS renewal volumes post CalWIN merge.
Interfaces	General Requirement	46975	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall increase the infrastructure for processing associated batch jobs like Passive renewals and ROP that execute in the same time frame as CalSAWS batch renewals.
Interfaces	General Requirement	46976	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall extend the batch window into the day to allow for more CalSAWS Batch renewals
Interfaces	General Requirement	46977	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall enhance reporting and tracking of system performance for anticipated increase in renewal batch volumes.
Interfaces	General Requirement	47064	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall update the reference tables for San Diego, San Mateo, Santa Cruz and Solano to LRS.
Interfaces	General Requirement	47065	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall update the reference table containing consortia code.
Interfaces	General Requirement	47066	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall update the transactional table containing consortia code.
Interfaces	General Requirement	47067	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall modify EDR/ EDR-C/ CancelDER/ DER/ Disposition/ Update and VLP processing logic to support CalWIN Counties of San Diego, San Mateo, Santa Cruz and Solano to LRS.
Interfaces	General Requirement	47068	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall update OSB views to remove San Diego, San Mateo, Santa Cruz and Solano counties from CalWIN views and add them to the CalSAWS views.
Interfaces	General Requirement	47069	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall convert CalSAWS DER-Us (for migrating counties generated during cutover window) to CalWIN format via PCR in the event of Rollback.

Appendix A-4 - SOW Exhibit A - System Requirements Specification
(Extracted from CalHEERS RTM)

Category	Sub Category	Req ID	Requirement
Interfaces	General Requirement	47589	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall update the reference tables for Alameda, Fresno and Sonoma to LRS.
Interfaces	General Requirement	47590	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall update the reference table containing consortia code.
Interfaces	General Requirement	47591	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall update the transactional table containing consortia code.
Interfaces	General Requirement	47592	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall modify EDR/ EDR-C/ CancelDER/ DER/ Disposition/ Update and VLP processing logic to support CalWIN Counties of Alameda, Fresno and Sonoma to LRS.
Interfaces	General Requirement	47593	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall update OSB views to remove Alameda, Fresno and Sonoma counties from CalWIN views and add them to the CalSAWS views.
Interfaces	General Requirement	47594	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall convert CalSAWS DER-Us (for migrating counties generated during cutover window) to CalWIN format via PCR in the event of Rollback.
Interfaces	General Requirement	48107	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall have the functionality for all users to override the failed to file federal tax return/reconcile indicator by attesting to have filed or planning to file tax return for a year.
Interfaces	General Requirement	48108	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall create the new Mock Services for FTR Code to simulate responses for testing purposes.
Interfaces	General Requirement	48109	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall create the new Mock Services for FTR Code HE020011 to simulate responses returned from the REST based service.
Interfaces	General Requirement	48110	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall create the new Mock Services for FTR Code 011 to simulate responses returned from the RRV-IRS service.
Interfaces	General Requirement	48138	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall not display any IRS response code received from IRS Federal Hub on the Manual Verification screen.
Interfaces	General Requirement	48140	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall update the technical components for the California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) SAWS Interface (known as EHIT) for communication with the SAWS for functional changes made to the system for the following functional CRs: - 206195 - Alternative Formats - 227922 Vefication Phase IV
Interfaces	General Requirement	48214	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall utilize the new Managed File Transfer User Interface for the Federal Interfaces as hosted by CMS.
Interfaces	General Requirement	48215	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall update the endpoints for MFT Bulk transfer files.
Interfaces	General Requirement	48216	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall update the Login credentials.
Interfaces	General Requirement	48217	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall update Legacy folder Inbound30 for all the "User Upload Bulk Files to" Outbox.
Interfaces	General Requirement	48218	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall update Legacy folder Outbound30 for all the "User Download Bulk Files from" Inbox.
Interfaces	General Requirement	48219	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall update Legacy folder archive for all the "User retransmit files from" archive.
Interfaces	General Requirement	48395	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall implement a queuing mechanism to place the Dispositions in a waiting queue and release them to the processing queue in the order of receipt from CalSAWS (First In First Out) on predetermined TBD frequency.
Interfaces	General Requirement	48484	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall populate LastStepInitiated as per the RX pattern shared by CMS per VLP V37.1 in the DER payload. The following services are listed as per RX pattern: RX142.1 - VLP InitialVerificationv37.1 (Step1) RX142.2 - VLP InitialVerificationv37.1 (Step2) RX142.3 – VLP InitiateThirdVerifv37.1 (Step3) RX142.4 - VLP Close Case v37.1
Interfaces	General Requirement	48485	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall update the eHIT and VLP SAWS schemas to increase maximum character length from 4 to 7 for the data element LastStepInitiated.
Interfaces	General Requirement	48509	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall update the triggering conditions for BV 19 to no longer trigger when an EDR is received which includes at least one California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) Case Person Number but no California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) Case Number.
Interfaces	General Requirement	48510	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall update the Business Validation message for BV 19 to remove the mention of the triggering condition involving an EDR being received which includes at least one California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) Case Person Number but no California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) Case Number.
Interfaces	General Requirement	48511	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall trigger a new Business Validation when an EDR is received which includes at least one California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) Case Person Number but no California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) Case Number is provided.
Interfaces	General Requirement	48512	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall send a new Business Validation Error Message to SAWS when an EDR is received which includes at least one California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) Case Person Number but no California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) Case Number is provided.

Category	Sub Category	Req ID	Requirement
Interfaces	General Requirement	48513	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall enhance the Business Validation Logging Request sent to SAWS for BV 19 and BV 77 to include the below information for the individual causing the BV to be triggered: - California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) Case Person Number in California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) - SAWS Case Person Number in California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) - California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) Case Person Number on the EDR which triggered the BV - SAWS Case Person Number on the EDR which triggered the BV - APTC Eligibility Status in California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) - CSR Eligibility Status in California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) - MAGI Medi-Cal Eligibility Status in California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) - Non-MAGI Medi-Cal Eligibility Status in California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) - QHP Eligibility Status in California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) - Exchange Enrollment Status in California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) - Primary Aid Code in California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) - MAGI Medi-Cal Awaiting Review status in California Healthcare Eligibility, Enrollment and Retention System (CalHEERS)
Interfaces	General Requirement	48514	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall enhance the Business Validation Logging Request sent to SAWS for BV 9 to include the below information: - SAWS Case Number that is currently linked to the California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) Case Number provided in the EDR which triggered the BV. - California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) Case Number that is currently linked to the SAWS Case Number provided in the EDR which triggered the BV. - FIPS County Code associated with the SAWS Case Number that is currently linked to the California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) Case provided in the EDR.
Interfaces	General Requirement	48515	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall enhance the Business Validation messaging for BV 9 to mention that the EDR did not request an ICT or Case Linkage Override.
Interfaces	General Requirement	48516	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall enhance the Business Validation Logging Request sent to SAWS for BV 159 to include the below case-level information and person-level information for all active individuals on the California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) Case: Case-level information: - SAWS Case Number that the California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) Case is currently linked to - FIPS County Code associated with the SAWS Case Number that is currently linked to the California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) Case. Person-level information: - California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) Case Person Number in California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) - SAWS Case Person Number in California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) - Primary Contact Indicator in California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) - Person Demographic Information in California Healthcare Eligibility, Enrollment and Retention System (CalHEERS)
Interfaces	General Requirement	48517	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall enhance the Business Validation messaging for BV 159 to mention that no California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) Case Person Number was provided for any existing case member.
Interfaces	General Requirement	48518	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall enhance the Business Validation messaging for BV 86 to mention that the EDR did not request an ICT or Case Linkage Override.
Interfaces	General Requirement	48519	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall suppress the triggering of BV 77 when the Case Linkage Override flag is provided as 'Y' on the EDR and the California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) Case is not actively linked to any SAWS Case.
Interfaces	General Requirement	48520	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall consider a demographic field on an EDR to pass the matching check for BV 145 if the value of the field is established as NULL in California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) and is also provided as NULL on the EDR.
Interfaces	General Requirement	48521	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall enhance the triggering conditions of BV 145 to only compare the demographic information provided on the EDR with what is currently established in California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) for the California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) Case ID provided on the EDR.
Interfaces	General Requirement	48522	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall trigger a new Business Validation when an EDR is received which changes the Primary Contact on a California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) Case and removes the previous Primary Contact from the case.
Interfaces	General Requirement	48523	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall send a new Business Validation Error Message to SAWS when an EDR is received which changes the Primary Contact on a California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) Case and removes the previous Primary Contact from the case.
Interfaces	General Requirement	48524	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall enable the County of Responsibility and delink a SAWS case from a California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) case when the California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) case has been closed as a duplicate through the California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) portal or through a CancelDER received from SAWS.
Interfaces	General Requirement	48525	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall include the BV number in the Business Validation Logging Request sent to SAWS for all BVs.

Category	Sub Category	Req ID	Requirement
Interfaces	General Requirement	48526	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall release the County of Responsibility and delink all California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) Cases which are linked to a SAWS Case and satisfy all the following criteria: - The latest BRE run was prior to 1/1/2016, and - All case members are IE/DS/UN for MAGI Medi-Cal, and - There are no open Non-MAGI Medi-Cal referrals on the case
Interfaces	General Requirement	48527	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall update the Business Validation message for BV 77 to replace the angled apostrophes with single quotes and remove the redundant “#” after the word “Number”.
Interfaces	General Requirement	48554	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall segregate the Exchange RRV and MAGI Medi-Cal RRV processes.
Interfaces	General Requirement	48555	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall segreagate batches for both the processes.
Interfaces	General Requirement	48556	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall segreagate database tables for both the processes.
Interfaces	General Requirement	49224	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall enhance the Business Validation Logging Request sent to SAWS for BV 19 to also include the person demographic information in California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) for the individual causing the BV to be triggered.
Interfaces	Interfaces		
Interfaces	Interfaces	39902	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall update the technical components for the California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) SAWS Interface (known as EHIT) for communication with the SAWS for functional changes made to the system on a per release basis. For Release 20.9, the California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) project shall create a technical change to meet the schema change needs for the following functional CRs: CR 158675
Interfaces	Interfaces	39906	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall include verification data in the DER transaction sent to SAWS for each verification attribute, if available.
Interfaces	Interfaces	39907	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall include the verification value in the DER transaction.
Interfaces	Interfaces	39908	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall include the verification status in the DER transaction.
Interfaces	Interfaces	39909	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall include the verification source in the DER transaction.
Interfaces	Interfaces	39910	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall include the verification begin date in the DER transaction.
Interfaces	Interfaces	39911	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall include the verification end date in the DER transaction.
Interfaces	Interfaces	39912	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall include the verification Reasonable Opportunity Period Expiration Date in the DER transaction.
Interfaces	Interfaces	39913	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall include the verification of Household Income - Subsidy attribute in the DER transaction.
Interfaces	Interfaces	39914	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall include the verification of American Indian/ Alaskan Native attribute in the DER transaction.
Interfaces	Interfaces	39915	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall include the verification of Household Income – CA Subsidy attribute in the DER transaction.
Interfaces	Interfaces	40032	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall send information on 100% of all individual market health plan policies (excluding dental and catastrophic plans) purchased in a submission, ensuring that each submission contains the most current information for each coverage month for the individual market and everyone who purchased coverage.
Interfaces	Interfaces	40033	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall only send one coverage year per file.
Interfaces	Interfaces	40034	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall ensure that the monthly data feed will be cumulative, containing monthly data for each month from the start of the coverage year in January through the most recent completed month and shall submit one valid submission per calendar month which includes data for each previous month of the current year. e.g., a monthly transmission produced in September will contain information for each month from January through August, enabling updates to prior months within each monthly submission.
Interfaces	Interfaces	40035	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall report the data it has on record at the time of the report generation. - A change that occurs during the year - either reported to California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) or identified by California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) - will be reflected in the next monthly transmission sent to the FTB.
Interfaces	Interfaces	40036	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall include policy data for the monthly 3895 file for the tax filer (or other relevant adult) to be transmitted electronically received by FTB no later than January 31 and will include data January through the end of December of the coverage year being reported. This will be considered the Annual file received by FTB in the month of January.
Interfaces	Interfaces	40037	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall submit the data elements that are identified as being reported monthly, including the Marketplace-Assigned Policy Number to be populated with the Exchange-Assigned Policy ID (aka Enrollment ID), as described in FTB Design Document (Tech publication).
Interfaces	Interfaces	40045	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall ensure each transmission will contain a manifest that identifies the Transmission ID, Transmission Category, File Size, and total number of files (SubmissionCount), Submission ID), Timestamp, TransmissionChecksum, TransmissionByteSize and FormType in the submission for the monthly data.
Interfaces	Interfaces	40046	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall ensure all of the required information for the entire year regarding a single tax household must be contained within a single transmitted file for the monthly (including January monthly) 3895 transmission.
Interfaces	Interfaces	40047	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) may transmit upto three monthly submissions, one for the prior/current coverage year (original submission), correction over original submission and void over original submission (correction and void for prior coverage year).
Interfaces	Interfaces	40048	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall adhere to the data transmission schedule set forth by FTB. This will ensure the data is transmitted to the FTB by the 15th of the month using the California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) FTB 3895 Interface.

Appendix A-4 - SOW Exhibit A - System Requirements Specification
(Extracted from CalHEERS RTM)

Category	Sub Category	Req ID	Requirement
Interfaces	Interfaces	40049	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall send subsequent annual January data transmissions to FTB with enough time for processing of the files to allow for submission to FTB by January 31 as this is considered the annual electronic representation of the 3895 form submission.
Interfaces	Interfaces	40050	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall submit only one valid 3895 submission (considered the annual electronic representation of the 3895 form) including data on all policies purchased through California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) for the previous coverage year which will be transmitted from California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) to FTB every January (January monthly submission).
Interfaces	Interfaces	40051	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall ensure that a transmission must: • Contain only one Manifest • Contain only one Form Data File • Contain one or more submissions in the Form Data File • Use the SHA-256 Checksum algorithm • Have the same number of actual submissions as reported in the manifest.
Interfaces	Interfaces	40052	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall transmit all errored out (missing, malformed etc.) transmission payloads (with unique SubmissionID) within 48 hours for the 3895, once notified of errored payloads in a submission.
Interfaces	Interfaces	40053	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall ensure all transmissions to have a valid identifiers and other header information as defined by FTB, and meet security standards for the 3895 Monthly file.
Interfaces	Interfaces	40054	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall, on a monthly basis, transmit individual market information to the Franchise Tax Board on individuals, tax households, policies purchased, organized by the existing IRS Group Identifier.
Interfaces	Interfaces	40055	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall utilize the existing logic to create the IRS Group Identifier as a 16-digit system-generated alpha numeric ID for all data to be reported to both IRS and FTB. - This number is unique within each exchange. - The IRS Group and its accompanying IRS Group Identifier is used to track tax households, policies and covered individuals over time (Including multiple cases as part of the group ID if on the same policy, two tax households on the same policy). - The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall ensure policies/tax households will not cross IRS Groups Identifiers, i.e. one policy cannot be spread across multiple IRS Groups, and a policy can only exist in one IRS Group. one tax household cannot be spread across multiple IRS Groups, and a tax household can only exist in one Group.
Interfaces	Interfaces	40056	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall create a new IRS Group and IRS Group Identifier whenever a change of circumstance generates a new household with coverage that is separate and not overlapping with an existing IRS Group (e.g. divorce, individual turns 26 and purchases a separate policy) as is currently done for IRS for FTB data.
Interfaces	Interfaces	40057	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall not use the IRS Group Identifier within the schema when reporting the 3895 data. This logic is only applied to organizing the data.
Interfaces	Interfaces	40058	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall report monthly activity for an IRS Group to FTB. - California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) will continue to report this activity in the remaining submissions for the calendar year (including the one-month correction period of the following calendar year). e.g. When a single individual purchases a plan through California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) for January, California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) will create an IRS Group for the single individual, and report it for January, 2021 (submission to the FTB by February 15, 2021). If he or she then terminates coverage such that he or she is not enrolled for February, 2021, California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) will continue to include his or her record in the January, 2021 component of each subsequent submission through January 15, 2022.
Interfaces	Interfaces	40059	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall ensure that entire IRS Groups (to include all applicable coverage months) must be contained within a single transmitted file. - The IRS Groups cannot be split across transmissions; and must be a API message (multi-part form data) and manifest that complies with FTB standards.
Interfaces	Interfaces	40060	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall retransmit entire transmission if an Error Code as descibed in the File Exchange API Error Codes for Transmission is received as a ReceiptID will not be returned by FTB.
Interfaces	Interfaces	40061	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall resubmit a corrected submission within 48 hours, if the submission is not accepted. - If the transmission is identified as having missing submissions California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall retransmit only the missing submissions, or if that is not possible, resubmit the entire monthly transmission
Interfaces	Interfaces	40062	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall process error messages returned on the transmissions and submission for the monthly file.
Interfaces	Interfaces	40063	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall request a transmission reports from FTB detailing error messages and error correction processing .
Interfaces	Interfaces	40064	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall use an automated informative mechanism for processing error messages either manually or electronically returned on the transmissions and submission from FTB based on processing business rules for specific error types listed in the Technical Error Library detailed in the FTB Design Document (Tech Publication).

Category	Sub Category	Req ID	Requirement
Interfaces	Interfaces	40065	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall perform business data consistency checks of all submissions as defined by FTB for the 3895 Monthly file.
Interfaces	Interfaces	40066	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall ensure each transmission will have an attached file that is well formed XML and adhere to the XML schema defined by the FTB for the 3895 Monthly file.
Interfaces	Interfaces	40067	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall ensure that each transmission is properly identified, threat and attack free, and error free before being submitted to the FTB.
Interfaces	Interfaces	40070	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall process a confirmation of acceptance of the transmission for the 3895 Monthly file.
Interfaces	Interfaces	40071	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall ensure transmissions sent must use the multipart/form-data content type and be encoded as described in the W3C HTML 4 specification (text/plain encoding is not supported). UTF-8 is the only supported character set.
Interfaces	Interfaces	40072	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall ensure that all transmissions must have a unique transmission identifier (UTID). Along with the submission identifier, the UTID enables a concise method for identifying every element in a transmission.
Interfaces	Interfaces	40073	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall include the following in a Unique Transmission Identifier (UTID) in each transmission payload, with a colon seperator: - Universally unique identifier (UUID) - FTB System ID (SYSID) - California Transmitter Control Code (CA-TCC) UUID:SYSID:CA-TCC
Interfaces	Interfaces	40074	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall use the Receipt ID (RECEIPTID) in order to request processing status.
Interfaces	Interfaces	40075	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall ensure that all transmissions to FTB contain a manifest as well as the form data.
Interfaces	Interfaces	40076	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall transmit data to FTB via the File Exchange API Channel using a TLS 1.2-encrypted RESTful endpoint.
Interfaces	Interfaces	40077	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall use the HTTP POST method on all transmissions to FTB for 3895 data.
Interfaces	Interfaces	40078	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall include a Content-Type header with the value multipart/form-data; boundary must be included on 3895 data.
Interfaces	Interfaces	40079	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall include two custom HTTP headers, APP_ID and APP_KEY, that contain credentials issued during registration and X-FtbApi-TrTs and X-FtbApi-TrsId, that provide a timestamp and the UTID respectively and participate in the signing process on 3895 data.
Interfaces	Interfaces	40080	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall have a field named manifest with an embedded XML document that complies with TransmissionManifest.xsd on 3895 data.
Interfaces	Interfaces	40081	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall have a field named transmission with an embedded XML document that complies with "HealthCareSubsidyTransmission.xsd".
Interfaces	Interfaces	40082	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall ensure a transmission does not exceed 100 MB of uncompressed and unencrypted XML
Interfaces	Interfaces	40083	A Submission must: • Contain only one Header • Contain only one form FTB 3895
Interfaces	Interfaces	40084	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall ensure that each submission have a unique submission identifier (SID). This value must be a positive integer starting at 1 for the first submission and should increase sequentially by 1 for each subsequent submission in the transmission. This number must not include leading zeroes. This number must be unique within a specific payload and manifest but the number can repeat in other payloads and manifest.
Interfaces	Interfaces	40085	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall process error responses from FTB using the following: Transmission ID, ReceiptID and SID.
Interfaces	Interfaces	40086	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall ensure that all transmissions are signed in accordance with the Amazon Web Services (AWS) Signature Version 4 and use AWS4-HMAC-SHA256 as the value of the Authorization header on 3895 data.
Interfaces	Interfaces	40087	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall employ an annual process to update the app key annually.
Interfaces	Interfaces	40088	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall ensure the signature and all supporting materials must be presented in the Authorization header and have the following form: [Algorithm] Credential=[Credential Scope], SignedHeaders=[Signed Headers], Signature=[Signature] Whitespace must be included as shown above.

Category	Sub Category	Req ID	Requirement
Interfaces	Interfaces	40089	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall ensure that the credential scope must be formed as follows: [CA-TCC]/[YYYYMMDD]/ftb/fx/aws4_request Where - CA-TCC is your California Transmitter Control Code - YYYYMMDD is the four-digit year, two digit month, and two digit day on which the transmission is sent e.g., if your CA-TCC is A0132 and the transmittal date is January 10th, 2020, then the credential scope is A0132/20200110/ftb/fx/aws4_request All alphabetic characters must be in lowercase as shown above.
Interfaces	Interfaces	40090	- California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall ensure that the signature is a hexadecimal-encoded string as described in the AWS documentation. - The Canonical Request (see https://docs.aws.amazon.com/general/latest/gr/sigv4-create-canonical-request.html) must include a hash of the transmission's payload. - Generate the payload by concatenating the value of the transmission field to the value of the manifest field. - California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) must not include any multipart/form-data constructs (e.g. boundary delimiters, Content-Disposition headers, etc.) in the signed payload.
Interfaces	Interfaces	40091	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall use Escape Characters for the following: &,',<",>. Escape Characters: & ' < " >
Interfaces	Interfaces	40092	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall set the VoidInd on every record to 1 when the internal California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) BatchCategoryCD is FTB_EOY_SUBMIT_VOID_RECORDS_REQ or FTB_EOY_RESUBMIT_VOID_RECORD_REQ.
Interfaces	Interfaces	40093	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall set the CorrectedInd on every record must be 0 when the internal California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) BatchCategoryCD is FTB_EOY_SUBMIT_VOID_RECORDS_REQ or FTB_EOY_RESUBMIT_VOID_RECORD_REQ.
Interfaces	Interfaces	40094	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall reference a VoidedRecordSequenceNum that includes a BatchID that matches a BatchID from a transmission that FTB has processed when voiding a record.
Interfaces	Interfaces	40095	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall reference a VoidedRecordSequenceNum that includes a DocumentSequenceNum that matches one of the DocumentSequenceNum received in the batch referenced by the BatchId.
Interfaces	Interfaces	40096	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall include the following as part of a void record: All of the form information from the referencing record that is being voided with the only changes being the metadata that marks the record as void and references the record being voided.
Interfaces	Interfaces	40097	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall not comingle original records, correction records or voided records.
Interfaces	Interfaces	40098	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall process records as follows in the case of a correction that needs to later be voided: If California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) transmitted an original record and subsequently transmitted two corrections to that record before it is discovered that the record needed to be marked void, California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) will populate the VoidedRecordSequenceNum with the Batch Id, the Document Sequence Number and the Record Sequence Number from the second correction record transmitted.
Interfaces	Interfaces	40099	The void indicator will be set to 0 when submitting an original or corrected submission.
Interfaces	Interfaces	40100	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall not send void records submission until acknowledgement of original submission has been received. If the record was then corrected, void record will not be sent until the correction submission acknowledgement has been received.
Interfaces	Interfaces	40101	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall add two new batch category codes at the payload level: FTB_EOY_SUBMIT_CORRECTED_RECORDS_REQ FTB_EOY_RESUBMIT_CORRECTED_RECORDS_REQ
Interfaces	Interfaces	40102	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall set the Corrected Indicator to 1 and the Void Indicator to 0 when sending a corrected 3895 record.
Interfaces	Interfaces	40103	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall indicate the corrected record with the Corrected Record Sequence Number (Batch Id Document Sequence Number Record Sequence Number)

Appendix A-4 - SOW Exhibit A - System Requirements Specification
(Extracted from CalHEERS RTM)

Category	Sub Category	Req ID	Requirement
Interfaces	Interfaces	40104	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall set the corrected indicator to 0 when submitting an original 3895 submission.
Interfaces	Interfaces	40105	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall not send corrected records submission until acknowledgement of original submission has been received.
Interfaces	Interfaces	40106	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall utilize the common data collection process as is used for IRS.
Interfaces	Interfaces	40107	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall update the common data collection process to include middle initial, if present for the primary tax filer, other relevant adult, spouse submitted in the 3895 file.
Interfaces	Interfaces	40108	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall add the Repayment cap may not apply.
Interfaces	Interfaces	40109	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall add the State Subsidy amount in 3895 submission
Interfaces	Interfaces	40110	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall transmit the "Repayment Cap May Not Apply" field as True to the Franchise Tax Board only if the tax household attested to income that was over 400% FPL for all months of the benefit year that they were enrolled with CCA.
Interfaces	Interfaces	40111	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) can send void or corrections for four years past the initial coverage year. For example, a Form sent on January 31, 2021 for coverage year 2020 can be voided or corrected until January 31, 2025.
Interfaces	Interfaces	40112	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall create a test only process to change the SSN captured during testing to a value acceptable by FTB on creation of test file as FTB specific SSN values are not supported by California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) test environment.
Interfaces	Interfaces	40129	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall replace the Recipient, Recipient Spouse and Covered Individual Name (First, Middle, Last) containing only the special characters (~!@#\$%^&*()_+~[]{}<&\ ";:/?>.,) with "Unknown" so the record does not error out.
Interfaces	Interfaces	40130	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall use number of files as an optional parameter in order to control, identify, process or hold transmission data to be sent to FTB (FTB-2020-FX-01).
Interfaces	Interfaces	40131	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall create a new Outbound Batch to enforce the 2021 schema validations as provided by FTB for 3895 payloads.
Interfaces	Interfaces	40327	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall send and receive the zip+4 code via eHIT.
Interfaces	Interfaces	40574	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall create a batch to call the online FTB income API call for the RRV population.
Interfaces	Interfaces	40575	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall spread total call volume to be under daily threshold set by FTB.
Interfaces	Interfaces	40576	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall attempt a retry up to 3 times to retrieve 540 form details using online FTB income API in case of technical errors received from FTB (HTTP response code 401, 403, 500, 503).
Interfaces	Interfaces	40577	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall update the VIED to incorporate the FTB batch call for California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) Renewal processing.
Interfaces	Interfaces	40579	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall perform performance testing of the max call volume load with FTB.
Interfaces	Interfaces	40688	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall update the FTB 2021 schema from "Subsidy_v1.0" to "Subsidy_v2.0" according to the updated schema package sent by FTB.
Interfaces	Interfaces	40689	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall update the FTB 2021 schema from "fx_2020" to "fx_2021" according to the updated schema package sent by FTB.
Interfaces	Interfaces	40690	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall add "IntegerIdType" into the FileExchangeTypes.xsd and will utilize this type in HealthCareSubsidyHeader.xsd
Interfaces	Interfaces	40691	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall replace hyphen with space in a hyphenated name (First Name, Middle Name and Last Name) for monthly, annual, resubmission, corrections and void processing of 3895 Payload.
Interfaces	Interfaces	40692	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall not populate an empty optional tags for monthly, annual, resubmission, corrections and void processing of 3895 payloads to avoid transmission rejections.
Interfaces	Interfaces	40693	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall persist the updated Asynchronous validations codes as updated by FTB and incorporate the business rules as per 2021 schema.
Interfaces	Interfaces	40805	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall persist the updated Synchronous validations codes as updated by FTB and incorporate the business rules as per 2021 schema.
Interfaces	Interfaces	40806	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall create new Inbound Batch to enforce the 2021 schema validations as provided in the xsd schema as provided by FTB for 3895 payloads.
Interfaces	Interfaces	40807	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall process the "Transmission Message" tag as per the updated Acknowledgment schema package sent by FTB.
Interfaces	Interfaces	40808	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall process the new transmission status "Accepted with Message" received from FTB.
Interfaces	Interfaces	40809	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall create new OAG Policies for v2 endpoints to transmit data to FTB via File Exchange API Channel using a TLS 1.2-encrypted RESTful endpoint.
Interfaces	Interfaces	40810	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall create new File Exchange (FX) Batch for V2 to send the payload to FTB over REST protocol via File Exchange API.
Interfaces	Interfaces	40811	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall poll FTB's new WebAPI Enpoints for V2 to retrieve the Acknowledgment Status for the transmission (Accepted, Accepted with Errors, Rejected, Accepted with Message) using the Receipt ID.
Interfaces	Interfaces	40815	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall update the IRS XML library to ACA AIR IEP 5.0 1095A FS21 AIR-IEP 1095A upstream schema v1.0 for Marketplace.
Interfaces	Interfaces	40816	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall maintain current implemented schemas for coverage year 2019 and prior year.
Interfaces	Interfaces	40817	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall implement the IRS XML library to ACA AIR IEP 5.0 1095A FS21 AIR-IEP 1095A upstream schema v1.0 for coverage year 2020 and future years.

Category	Sub Category	Req ID	Requirement
Interfaces	Interfaces	40818	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall update the “MarketPlacePolicyNum” to allow only alphanumeric values.
Interfaces	Interfaces	40819	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall update the elements in the IRS schema and persist it in the database.
Interfaces	Interfaces	40820	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall update the error codes removed by IRS and validate the business rules by the schema.
Interfaces	Interfaces	40821	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall parse new error codes returned by IRS and persist it in the database.
Interfaces	Interfaces	40932	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall update VIED to incorporate the Verify Current income request and response for real-time API.
Interfaces	Interfaces	40934	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall populate Response code and Description in DER/DER-U for each individual received from CMS at request level.
Interfaces	Interfaces	40935	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall populate the VCI response in DER/DER-U when a VCI service is invoked for each applicable individual on the case.
Interfaces	Interfaces	40937	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall have the functionality to invoke VCI service via FDSH and receive response from FDSH for each request.
Interfaces	Interfaces	40938	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall invoke the VCI call only for individuals that have e-verified SSN.
Interfaces	Interfaces	40939	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall have functionality to include multiple individuals for a VCI request made to CMS.
Interfaces	Interfaces	40940	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall implement Error Handling during request generation and response processing for VCI service.
Interfaces	Interfaces	40941	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall enforce schema validations as provided in the XSD schema as provided by CMS for the H138 - Verify Current Income service.
Interfaces	Interfaces	40942	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall transmit data to CMS via the SOAP API Channel using a TLS 1.2-encrypted endpoint.
Interfaces	Interfaces	40943	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall store the request and response made to the VCI Service in a new schema in the HBX database .
Interfaces	Interfaces	40944	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall normalize VCI response received from CMS
Interfaces	Interfaces	40946	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall escape the following characters in the request made from California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) to CMS VCI service: •& (ampersand) as & •< (less than) as < •> (greater than) as > •' (apostrophe) as ' •" (quotation mark) as "
Interfaces	Interfaces	40947	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall treat HE000001 as not having income from this source.
Interfaces	Interfaces	40948	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall consider response codes other than HE000001 and HS000000 as not verified as the call is failed at the CMS Gateway.
Interfaces	Interfaces	40949	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall update Mock Services to simulate responses from the VCI service in order to support testing.
Interfaces	Interfaces	41170	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall implement an API gateway policy to integrate with new EDD gateway interface.
Interfaces	Interfaces	41202	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall send up to 12 months of Pay Period Information to SAWS in a DER/DER-U via Ehit
Interfaces	Interfaces	41292	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall support EDD Performance testing on the new API Gateway.
Interfaces	Interfaces	42249	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall have the functionality to convert the following document types to PDF format and save the PDF file in California Healthcare Eligibility, Enrollment and Retention System (CalHEERS): 1. Excel 2. Word 3. Powerpoint 4. JPEG 5. JPG 6. TIFF 7. RTF 8. PNG 9. GIF 10. JFIF
Interfaces	Interfaces	42250	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall have the functionality to show the preview of the converted PDF file to the user and the original file shall not be stored in California Healthcare Eligibility, Enrollment and Retention System (CalHEERS).
Interfaces	Interfaces	42251	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall have the functionality to notify the user if the document conversion fails or errors out.
Interfaces	Interfaces	42252	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall add the functionality to allow user to upload documents in GIF, JFIF and PNG in addition to the existing file types of Excel, Word, PowerPoint, JPEG, JPG, TIFF, PDF or RTF on the following screens – 1. Documents and Correspondence 2. Confirm Identity 3. Flexi App 4. Upload Eligibility

Appendix A-4 - SOW Exhibit A - System Requirements Specification
(Extracted from CalHEERS RTM)

OTSI CalHEERS RFP #73040873 Addendum 1
October 31, 2025

Category	Sub Category	Req ID	Requirement
Interfaces	Interfaces	42253	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall add the functionality to allow user to upload documents in Excel, Word, PowerPoint, TIFF, RTF types on the VLP screen in addition to the existing file types of PDF, JPG, GIF, PNG, JPEG and JFIF.
Interfaces	Interfaces	42254	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall have the functionality to perform a one-time document conversion to convert the existing files in Production for all active/inactive cases to PDF. 1. Excel 2. Word 3. Powerpoint 4. JPEG 5. JPG 6. TIFF 7. RTF 8. PNG 9. GIF 10. JFIF
Interfaces	Interfaces	42255	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall display a county phone number that corresponds to a consumer's COR when a phone number is displayed to a consumer for file upload errors on the Upload Eligibility screen for an individual on their case with one of the following Medi-Cal eligibility statuses: - MAGI Medi-Cal Eligible/Conditionally Eligible/Pending - MAGI Medi-Cal Discontinued when also Exchange program ineligible - Non-MAGI Medi-Cal Eligible/Potentially Eligible
Interfaces	Interfaces	45509	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall have the ability to turn on/off document conversion technology used for user upload functionality.
Interfaces	Interfaces	46313	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall utilize AEM 6.5 as the conversion tool to convert documents upon upload from the following California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) screens to PDF format in real time: 1. Documents and Correspondence 2. Confirm Identity 3. Flexi App 4. Upload Eligibility 5. VLP
Interfaces	Interfaces	47304	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall use an inquire client information service in the following scenarios to load Family PACT case information for an existing client from the HAP database to the California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) Family PACT database: 1. An admin or provider user selects to access an existing client's application from the search results. 2. A consumer attempts to link their account to an existing HAP card during the account creation process.
Interfaces	Interfaces	47305	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall send the following data elements to HAP in an inquire client information service request: 1. HAP ID 2. Date of Birth
Interfaces	Interfaces	47306	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall receive the required Family PACT application data elements and eligibility information from HAP in an inquire client information service response if HAP identifies one existing client with a full match to the inquire client information service request.
Interfaces	Interfaces	47307	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall receive an inquire client information service response if no existing clients match the inquire request criteria.
Interfaces	Interfaces	47308	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall only receive the first 9 alphanumeric digits of the HAP ID from the HAP system.
Interfaces	Interfaces	47309	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall have the capability to handle errors with the inquire client information transaction including validation errors, error response codes, and technical exceptions.
Interfaces	Interfaces	47312	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall have the capability to handle errors with the identify client transaction including validation errors, error response codes, and technical exceptions.
Interfaces	Interfaces	47313	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall use a real-time Activate service to send HAP intake application information including newly generated HAP card number and eligibility information.
Interfaces	Interfaces	47314	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall only send the first 9 alphanumeric digits of the HAP ID to the HAP system.
Interfaces	Interfaces	47315	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall have the capability to handle errors with the Activate transaction including validation errors, error response codes, and technical exceptions.
Interfaces	Interfaces	47316	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall use a real-time Update service to send HAP any updates to application information and no eligibility information is sent during RAC applications.
Interfaces	Interfaces	47317	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall have the capability to handle errors with the Update transaction including validation errors, error response codes, and technical exceptions.
Interfaces	Interfaces	47318	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall use a real-time Recertify service to send HAP updates to application information and eligibility information that are received during Recertify/Reapply applications.
Interfaces	Interfaces	47319	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall have the capability to handle errors with the Recertify transaction including validation errors, error response codes, and technical exceptions.

Category	Sub Category	Req ID	Requirement
Interfaces	Interfaces	47320	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall use a real-time Deactivate service to send HAP updates to eligibility status when a client is determined ineligible or discontinued from Family PACT eligibility.
Interfaces	Interfaces	47321	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall have the capability to handle errors with the Deactivate transaction including validation errors, error response codes, and technical exceptions.
Interfaces	Interfaces	47322	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall receive a real-time API call from CA-MMIS with updates to the Provider Master File (PMF) for each provider site location that needs to be either activated or deactivated.
Interfaces	Interfaces	47323	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall receive the real-time API call of the PMF with the following data elements: 1. Action 2. Provider Number (NPI) 3. Location ID 4. Enrollment Status 5. Category of Service 6. Business Name 7. Service Address Line 1 8. Service Address Line 2 9. City 10. State 11. Zip
Interfaces	Interfaces	47324	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall process the Provider Master File transaction and depending on the action received, activate or deactivate the provider site location.
Interfaces	Interfaces	47325	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall receive the following provider site location statuses in the action field: 1. Activate 2. Deactivate
Interfaces	Interfaces	47326	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall activate a provider site location when California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) receives a PMF transaction from CA-MMIS that has the activate action field.
Interfaces	Interfaces	47327	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall deactivate a provider site location when California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) receives a PMF transaction from CA-MMIS that updates a provider's site location's status to deactivate.
Interfaces	Interfaces	47329	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall have the capability to handle errors with the Provider Master File (PMF) transactions including validation errors, error response codes, and technical exceptions.
Interfaces	Interfaces	47330	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall use the Smarty Streets service to validate address information entered on the Family PACT Portal.
Interfaces	Interfaces	47331	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall add mock services of interface transactions between the Family PACT system and its business partners.
Interfaces	Interfaces	47332	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall add mock services of interface transactions between the California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) Family PACT system and the Health Access Program (HAP) system.
Interfaces	Interfaces	47572	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall update the technical components for the California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) SAWS Interface (known as EHIT) for communication with the SAWS for functional changes made to the system for the following Release 24.6 functional CRs: - CR 178286 - Adding Data Elements to eHIT.
Interfaces	Interfaces	47642	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall close the DHS case for any unresolved V37 Step 2 and Step 3 and re-initiate Step 1 of the case in V37.1.
Interfaces	Interfaces	47725	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall persist multiple Effective Start and End Dates for Non-ESI real time API, RRV (Medicare) Process, and PVC (Medicare) response received from CMS at the Individual Level.
Interfaces	Interfaces	47748	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall update Mock Services to simulate the responses received from Non-ESI API, RRV (Medicare), PVC (Medicare) service in order to support testing.
Interfaces	Interfaces	47836	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall ensure that VER-2004-IB-01 RRV batch job should update INDV_ID and status details in IRS Response Tables.
Interfaces	Interfaces	47837	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall purge the data from all the request and response tables in the secured schema for MMRRV Service.
Interfaces	Interfaces	48100	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall add new failure to reconcile code HE020011, (returned from IFSV) when an individual did not reconcile APTC and/or did not file taxes for two consecutive years to the existing Failure to Reconcile code history table.
Interfaces	Interfaces	48101	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall add new failure to reconcile code 011, (returned from RRV) - when an individual did not reconcile APTC and/or did not file taxes for two consecutive years to the existing Failure to Reconcile code history table.
Interfaces	Interfaces	48154	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall send the plain language interpretation of Admin Pass/Fail to SAWS for all verifications.
Interfaces	Interfaces	48156	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall continue to send E-Verification Response and the E-Verification Response Date to SAWS for the most recent HUB response when a subsequent admin verification is received.
Interfaces	Interfaces	48158	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall continue to send error codes if applicable to SAWS for the most recent HUB response when an admin verification is present.
Interfaces	Interfaces	48176	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall create and display a no call reason for each verification attribute on the Personal Verification page.
Interfaces	Interfaces	48177	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall send the no call reason for each verification service in the system generated DER/DER-U
Interfaces	Interfaces	48178	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall introduce new mock rules across different data elements for No Call reason

Appendix A-4 - SOW Exhibit A - System Requirements Specification
(Extracted from CalHEERS RTM)

Category	Sub Category	Req ID	Requirement
Interfaces	Interfaces	48189	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall persist or not persist immigration receipt or card number in SAWS EDR if not in acceptable format.
Interfaces	Interfaces	48191	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall allow the retry process for the applicable electronic verification services if hub is down
Interfaces	Interfaces	48192	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall introduce new mock rules across different data elements for recreating hub down scenario
Interfaces	Interfaces	48193	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall implement retry service with configuration switch for ON/OFF capability
Interfaces	Interfaces	48203	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall send and receive the alternative format information collected via eHIT in the EDR, DER, Update Inbound, and Update Outbound transactions.
Interfaces	Interfaces	48204	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall have an ability to send the alternative formats to Salesforce (Consumer Search API) that are attested by the consumer on the California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) portal or sent from SAWS via eHIT.
Interfaces	Interfaces	48208	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall have the ability to consume and persist alternative format attestations sent by SAWS via eHIT while the alternative format attestation collection functionality is turned OFF.
Interfaces	Interfaces	48212	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall have the ability to turn on/off CR 173678 functionality.
Interfaces	Interfaces	48220	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall update filename structure to remove .IN suffixes from the Federal Interfaces
Interfaces	Interfaces	48221	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall able to process all the Outbound bulk files when received from CMS after CMS has updated the filename structure to remove the .OUT suffixes.
Interfaces	Interfaces	48222	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall update the CMS application ID for the Federal Interfaces as applicable.
Interfaces	Interfaces	48417	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall validate the exchange eligibility records in MEDS are in sync with California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) eligibility records, and the renewal eligibility has been extended to 12/31 of the renewal year in MEDS.
Interfaces	Interfaces	48528	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall have the ability to persist "No" alternative format attestations if SAWS does not send an alternative format attestation via eHIT in EDR transactions.
Interfaces	Interfaces	48530	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall update the technical components for the California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) SAWS Interface (known as EHIT) for communication with the SAWS for functional changes made to the system for the following functional CRs: 1. CR220303 - BREfS #5 High Impact Business Validations 2. CR252586 - Design Change Request (DCR) for R25.2
Interfaces	Interfaces	48626	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall create Mock Services for ESC, EAD and Major Code for VLP response.
Interfaces	Interfaces	48647	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall make Inquire Member call and utilize Eligibility Information to determine user's active Medi-Cal eligibility when user clicks on "Get Confirmation Letter" button on Individual Eligibility Details page.
Interfaces	Interfaces	48648	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall send real-time immediate need HX20 ESAC -1 transaction with Eligibility Approval Date field populated to MEDS if Inquire Member call results into Business Validation error or timed out.
Interfaces	Interfaces	48649	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall send real-time immediate need HX20 ESAC -1 transaction with Eligibility Approval Date field populated to MEDS when: 1. User clicks on "Get Confirmation Letter" button on Individual Eligibility Details page, and 2. MEDS does not return active Medi-Cal eligibility in response to Inquire Member call, or MEDS returns active Medi-Cal eligibility with 8E aid code in response to the Inquire Member call.
Interfaces	Interfaces	48650	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall populate Eligibility Approval Date field on the real-time immediate need HX20 ESAC-1 transaction, as the date the user clicks on "Get Confirmation Letter" button on Individual Eligibility Details page.
Interfaces	Interfaces	48651	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall receive and utilize the assigned temporary BIC Number from MEDS as response to real-time immediate need HX20 ESAC-1 transaction.
Interfaces	Interfaces	48652	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall populate the Identification Number field on the Medi-Cal Eligibility Confirmation letter in real-time with the the assigned temporary BIC number when California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) sends real-time immediate need HX20 ESAC -1 transaction to MEDS.
Interfaces	Interfaces	48653	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall display appropriate message to user reaching out to county in case MEDS returns active Medi-Cal eligibility except 8E aid code in response to the Inquire Member call.
Interfaces	Interfaces	48654	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall replay the real-time immediate need HX20 ESAC-1 once immediately if the transaction timed out the first time.
Interfaces	Interfaces	48657	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall create mock rules for Identity Member, Inquire Member, and real-time immediate need HX20 ESAC-1 transactions.
Interfaces	Interfaces	48674	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall enhance the SLCSP function to fetch data from the Enrollment Tables.
Interfaces	Interfaces	48675	For individuals eligible for APTC/CSR/CAPS, California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall enhance the SLCSP function to fetch the data from the Enrollment Tables.
Interfaces	Interfaces	48676	For individuals eligible for CCP only or AI/AN unsubsidized CSR, California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall continue to calculate the SLCSP values for tax years up to 2023, and from 2024 onwards, California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall retrieve SLCSP values from the enrollment tables.
Interfaces	Interfaces	48677	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall have the ability to report the addition or removal of a spouse for a particular tax year and generate the tax payloads as applicable.

Category	Sub Category	Req ID	Requirement
Interfaces			California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall add a new business validation to check the invalid SSN patterns with the following patterns: '111111111' '123456789' '333333333' '000000000' '222222222' '555555555' '666666666' '777777777' '999999999' '888888888' '444444444' '012345678' '000123456' '123004567' '123450000' Length less than 9 digits Contains alphabetic characters
	Interfaces		
Interfaces	Interfaces	48678	
Interfaces	Interfaces	48680	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall exclude Dental and Catastrophic plans and Pending Enrollments from the 1095 and 3895 batch processes.
Interfaces	Interfaces	48794	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall have an ability to send the alternative formats to MEDS that are attested by the consumer on the California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) portal or sent from SAWS via eHIT.
Interfaces	Interfaces	48796	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall have the ability to persist "No" alternative format attestations if SAWS does not send an alternative format attestation via eHIT in EDR transactions.
Interfaces			The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall update the technical components for the California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) SAWS Interface (known as EHIT) for communication with the SAWS for functional changes made to the system for the following functional CRs: 1. CR233034 - Inclusion of Resonable Explanation. 2. CR253663 - Enhancements to Awaiting Review and Disposition Functionality
	Interfaces	48837	
Interfaces	Interfaces	48920	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall send an Eligibility Evaluation Reason Code of "MAGI Medi-Cal: Awaiting Review" (RV) on the DER/DER-U when Eligibility Review is required by SAWS for Carry Forward consumers.
Interfaces	Interfaces	48921	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall deprecate the functionality of the CarryForwardLiftInd eHIT element.
Interfaces	Interfaces	48922	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall deprecate the EERC code of 'CX' (CFS Not Completed - Cannot determine prior IAPT Transition Month or three-month Retro period).
Interfaces			California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall update the business rules of the following EERC's to allow them to be triggered for prior benefit months: - CM (CFS Ended - MAGI Medi-Cal Ineligible) - CA (CFS Ended - Prospective APTC/CSR/CCP Eligibility) - CD (CFS Ended - MAGI Medi-Cal Eligible or Conditionally Eligible)
	Interfaces	48928	
Interfaces	Interfaces	48933	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall update the business rules for the IAP Transition End Date element to only be sent on the DER/DER-U after the individual's Carry Forward Status has ended.
Interfaces			California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall send the HX18, HX20 ESAC 1, HX15 (real-time immediate need HX20 ESAC 1), and HX34 transactions with the following data elements (First Name, Last Name, SSN and DOB) returned from the Inquire Member Service, if the data elements do not match the consumer-provided information for APTC/CSR/CCP/MCAP/CCHIP/MAGI Medi-Cal individuals.
	Interfaces	48957	
Interfaces	Interfaces	48958	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall update the HX40 with the date of death and the termination reason code: 01 sent for APTC/CSR/CCP/MCAP/CCHIP when the eligibility is determined as discontinued due to death as a result of the Periodic Death Verification process.
Interfaces	Interfaces	48959	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall send DE2086 in the HX18, nightly HX20 ESAC-1, and HX15 (real-time immediate need HX20 ESAC-1) MEDS transactions as "3E" when the consumer is verified by VLP as a US Citizen when the consumer originally attested to being lawfully present.
Interfaces	Interfaces	48960	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall not send the DE2068 (Alien Verification Code) in the HX18, nightly HX20 ESAC-1, HX15 (real-time immediate need HX20 ESAC-1), and RX20 MEDS transactions.
Interfaces	Interfaces	48969	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall send the eligibility of all active case members via a new eHIT transaction (Disposition Acknowledgment Transaction) when the Disposition is processed.
Interfaces	Maintain Operational Data		
Interfaces	Maintain Operational Data	38429	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) SAWS eHIT interface shall implement preventative measures to avoid demographic data overlay for person mismatches at the primary contact level.
Interfaces	Maintain Operational Data	38430	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) SAWS eHIT Interface shall use a series of demographic data points to identify person mismatches at the primary contact level.
Interfaces	Maintain Operational Data	38431	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) SAWS eHIT Interface shall create a logging event and reject the EDR transaction to inform SAWS of a person data mismatch at the primary contact level.

Appendix A-4 - SOW Exhibit A - System Requirements Specification
(Extracted from CalHEERS RTM)

Category	Sub Category	Req ID	Requirement
Interfaces	Maintain Operational Data	38432	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) SAWS eHIT Interface shall provide an administrative flag at the person level to bypass the matching criteria validation and allow for correcting demographic information within California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) by the SAWS.
Interfaces	Maintain Operational Data	38434	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) SAWS Interface shall provide an ability to update the designation of the Primary Applicant and Primary Contact with California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) by the SAWS.
Interfaces	Maintain Operational Data	38733	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) will create a batch Recon file containing RX20 transactions on a the first weekend of every month for the upcoming business day in MEDS.
Interfaces	Maintain Operational Data	38734	The RX20 transactions will include the data elements defined in the California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) interpretation of the MEDS IDD.
Interfaces	Maintain Operational Data	38735	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) will send the termination date (program effective end date) as determined by the Business Rules Engine (BRE) on the data element 0150 (termination date).
Interfaces	Maintain Operational Data	38736	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) generated Recon file will contain RX20 transactions only for members eligible to aid codes which are solely reported/managed by the California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) system.
Interfaces	Maintain Operational Data	38737	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) will send RX20 transactions for the programs below: -APTC -CSR -CCP -CCHIP and -MCAP programs
Interfaces	Maintain Operational Data	38738	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) generated Recon file will contain RX20 transactions for the recon month-specific Eligible and Conditional Eligible individuals (excludes Pending, Ineligible, and Discontinued).
Interfaces	Maintain Operational Data	38739	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) generated Recon file will only include individual transactions for Cases with a Status of Active
Interfaces	Notices		
Interfaces	Notices	38710	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) system shall generate a NEW reason snippet on the portal when a consumer is Ineligible or Discontinued for CCP/APTC/CSR due to CCHIP eligibility.
Interfaces	Notices	38716	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) system shall generate a NEW reason snippet on the notices when a consumer is Ineligible or Discontinued for CCP/APTC/CSR due to CCHIP eligibility.
Interfaces	Notices	38718	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) system shall update the portal snippets to match the verbiage in NOD01 snippets 695, 696, 697, 699, 700, and 701.
Interfaces	Notices	43102	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) system shall update the Business Rules to handle the following conditions for the 1095s: - If the "Multiple APTC Per Evernt Date" and "Multiple Gross per Event Date" fallout reasons and if there are multiple events posted with APTC and/or GROSS changes on the same day take the amount from the latest event. Policies with different APTC amounts tied to the same event will be set to error. - Extend sending the 2014 monthly and correction files though December 2015 We will need to update our configuration to support this. -Remove employer name from the monthly file submission
Interfaces	Notices	43312	"The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) system shall send the following information in the determination of eligibility response to SAWS at the individual level via ehit: -MAGI size, -MAGI Income, -MAGI Income Limit"
Interfaces	Notices	43313	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) SAWS eHIT Interface shall include DeterminationOfEligibilityResponseID for Batch Document Transfer #7.
Interfaces	Notices	45763	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall update 1095/3895 tax forms to display the correct SLCSP amount and shall not consider the inactive silver plans while choosing the second lowest silver plan for the given Service Area/ZIP code while calculating the SLCSP amount.
Interfaces	Notices	48839	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall transfer the NOD01 notice to CalSAWS when all the following conditions are met: 1. At least one individual on the case is determined Conditionally Eligible for 8E (Accelerated Enrollment) for a SAWS initiated application 2. At least one individual is Conditionally Eligible for 8E (Accelerated Enrollment) at the end of the day prior to the Notice batch run.
Interfaces	Notices	48840	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) will send the encrypted file via SFTP file transfer with additional parameters required by CalSAWS.
Interfaces	Notices	49324	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall minimize delay and ensure timely completion of the Notices generation and electronic delivery for NOD01 notices.
Interfaces	Notices	49325	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall optimize the NOD01 A/B - Intake , renewal notice generation process to cater increased load and to send timely notices to the users immediate next day after 12:01 am
Interfaces	Notices	49326	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall optimize the NOD01 C - RAC notice generation process to cater increased load and to send timely notices to the users immediate next day after 12:01 am
Interfaces	Notices	49327	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall send electronic communication - email notices to the consumers on a case by case basis once the notice for the case is generated.
Interfaces	Notices	49328	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall optimize the reprint of notices as part of this change
Interfaces	Renewal		

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(Extracted from CalHEERS RTM)

Category	Sub Category	Req ID	Requirement
Interfaces	Renewal	39556	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall include an “informational update” flag for DER-Us on mixed cases when the only change is to the aid code, subsidy amount, effective date, or eligibility status for an APTC/CSR/CCP member and no change to MAGI Medi-Cal members.
Interfaces	Renewal - SHOP		
Interfaces	Renewal - SHOP	42814	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) system shall be able to generate a Notice that will be included in the same envelope as Form 1095-A Health Insurance Marketplace Statement, which will describe the form and how it's to be used for tax filing purposes. The notice will provide the consumer with a description of: • Why the consumer is getting the notice • How Covered CA calculates financial assistance • How to obtain tax filing assistance • How the Consumer can adjust the amount of APTC claimed
Interfaces	Reports		
Interfaces	Reports	38226	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall report the amounts in Part III of the 1095 form, including Monthly Premium Amount (Column A), SLCS (Column B), and APTC (Column C) per IRS guidance for scenarios where the household is terminated due to non payment
Interfaces	Reports	38497	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall update the static language in NOD62A & NOD62B for consumer who may be impacted by termination due to non-payment
Interfaces	Reports	40021	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall make available for distribution to the Tax Filer, or Other Relevant Adult, a hardcopy, paper Form 1095-A Health Insurance Marketplace Statement on or before January 31st of each calendar year beginning with 2015 and every year thereafter.
Interfaces	Reports	42509	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall, on a monthly basis, transmit individual market information to the IRS through the CMS-managed Data Services Hub on individuals, tax households, policies purchased, and exemptions from the shared responsibility payment, organized by IRS Group Identifier.
Interfaces	Reports	42510	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall ensure that the monthly data feed will be cumulative, containing monthly data for each month from the start of the coverage year in January through the most recent completed month. For example, a monthly transmission produced in September will contain information for each month from January through August, enabling updates to prior months within each monthly submission.
Interfaces	Reports	42511	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall create the IRS Group Identifier as a 16-digit system-generated alpha numeric ID. This number is unique within each exchange. The IRS Group and its accompanying IRS Group Identifier is used to track tax households, exemptions, policies and covered individuals over time (Including multiple cases as part of the group ID if on the same policy, two tax households on the same policy).
Interfaces	Reports	42512	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall ensure policies will not cross IRS Groups, i.e., one policy cannot be spread across multiple IRS Groups, and a policy can only exist in one IRS Group.
Interfaces	Reports	42513	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall ensure tax households will not cross IRS Groups, i.e., one tax household cannot be spread across multiple IRS Groups, and a tax household can only exist in one Group. A new IRS Group and IRS Group Identifier is created whenever a change of circumstance generates a new household with coverage that is separate and not overlapping with an existing IRS Group (e.g. divorce, individual turns 26 and purchases a separate policy).
Interfaces	Reports	42515	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall report monthly activity for an IRS Group. California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) will continue to report this activity in the remaining submissions for the calendar year (including the three-month correction period of the following calendar year). Example: When a single individual purchases a plan through California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) for January, California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) will create an IRS Group for the single individual, and report it for January, 2014 (submission to the IRS by February 15, 2014). If he or she then terminates coverage such that he or she is not enrolled for February, 2014, California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) will continue to include his or her record in the January, 2014 component of each subsequent submission.
Interfaces	Reports	42528	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall adhere to the data transmission schedule set forth by the IRS to the Federal Data Services Hub. This will ensure the data is transmitted to the IRS by the 15th of the month using the Federal Data Services Hub.
Interfaces	Reports	42529	10) The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall submit the data elements that are identified as being reported monthly, as described in Exchange Version of Business Service Definition of Monthly Information and 1095 End of Year Information Return Part I, Table 3, Data Elements Table. The table also provides format and other reporting information for those elements that are included in the monthly feed.
Interfaces	Reports	42530	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall define a record for the monthly information and 1095 End of Year Information return as follows: A record is the collection of data, representing a single, complete IRS Group (used to track Tax Households, Exemptions, Policies and Covered Individuals over time) or a SHOP Employer for all of the applicable coverage months.
Interfaces	Reports	42531	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall define a transmission for the monthly information and 1095 End of Year Information return as follows: A transmission is a single SOAP message to IRS with a file attachment.
Interfaces	Reports	42532	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall define an Invalid transmission for the monthly information and 1095 End of Year Information return as follows: A transmission is determined to be invalid when a single SOAP message to IRS with a file attachment is identified as a potential threat, potential code injection, failed XML schema validation, or failed virus checks. An invalid transmission is rejected and not accepted by the IRS.
Interfaces	Reports	42533	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall define a submission year for the monthly information and 1095 End of Year Information return as follows: The submission year is the calendar year the monthly information is transmitted.
Interfaces	Reports	42534	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall define a submission month for the monthly information and 1095 End of Year Information return as follows: The submission month is the calendar month the monthly information is transmitted.
Interfaces	Reports	42535	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall define a submission for the monthly information and 1095 End of Year Information return as follows: A submission is one or more physical files transmitted to the IRS every month from California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) through the Data Services Hub containing the data described in the Exchange Version of Business Service Definition of Monthly Information and 1095 End of Year Information Return Part I for a given applicable coverage year.
Interfaces	Reports	42536	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall define a incomplete submission for the monthly information and 1095 End of Year Information return as follows: A submission is considered incomplete if the total number of files received by IRS is not equal to the number files expected.

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Category	Sub Category	Req ID	Requirement
Interfaces	Reports	42537	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall define an invalid submission for the monthly information and 1095 End of Year Information return as follows: An invalid submission is a submission with invalid submission characteristics (Submission Period, Coverage Period or Unidentified Originating Exchange). IRS will reject the entire submission.
Interfaces	Reports	42538	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall define a valid submission for the monthly information and 1095 End of Year Information return as follows: A valid submission is a complete submission with acceptable submission characteristics (Submission Period, Coverage Period, or Originating Exchange). IRS will process the entire valid submission.
Interfaces	Reports	42539	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall define a processed submission for the monthly information and 1095 End of Year Information return as follows: A processed submission is a valid submission that went thru IRS schema validation, TIN validation checks and consistency checks.
Interfaces	Reports	42540	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall submit one valid submission per calendar month which includes data for each previous months of the current year, noting that SHOP may provide data. If a submission is not accepted, the Exchange is expected to submit a corrected submission within 48 hours.
Interfaces	Reports	42541	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) may transmit two submissions, one for the current coverage year and the other for the previous coverage year, beginning in 2015 (during the three-month period of February through April).
Interfaces	Reports	42542	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall ensure that each submission contains the most current information for each coverage months for the individual market and will include everyone who was granted an exemption and everyone who purchased coverage, not just the recipients of APTC.
Interfaces	Reports	42543	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall send separate submissions for the individual market and SHOP.
Interfaces	Reports	42544	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall label multi-file submissions 1 of x, 2 of x...x of x.
Interfaces	Reports	42545	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall perform business data consistency checks of all submissions as specified in the Exchange Version of Business Service Definition of Monthly Information and 1095 End of Year Information Return Part I Tables 3 and 4.
Interfaces	Reports	42546	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall resubmit a submission if not accepted within 48 hours. If a submission is identified as having missing transmissions, The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall retransmit the transmission, or if that is not possible, resubmit the entire submission.
Interfaces	Reports	42550	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall ensure that each transmission will have an attached file that is well formed XML and adheres to the XML schema defined by the IRS.
Interfaces	Reports	42551	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall ensure that entire IRS Groups or SHOP Employers (to include all applicable coverage months) must be contained within a single transmitted file (e.g., IRS Groups cannot be split across transmissions; SHOP Employers cannot be split across transmissions and must be a SOAP message with MTOM attachment and manifest that complies with HHS ACA XML Library.) More detail regarding valid/invalid transmissions is available in appendix B of the Exchange Version of Business Service Definition of Monthly Information and 1095 End of Year Information Return Part I.
Interfaces	Reports	42552	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall ensure that each transmission is properly identified, threat and attack free, and error free before being submitted to the IRS.
Interfaces	Reports	42553	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall ensure all transmissions to have a valid Exchange identifier and other header information as defined by CMS/IRS, and meet security standards.
Interfaces	Reports	42554	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall process a confirmation of acceptance of the transmission.
Interfaces	Reports	42555	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall use an automated informative mechanism for processing error messages either manually or electronically returned on the transmissions and submission from the Federal Data Services Hub or IRS based on processing business rules for specific error types (see error table included in the Exchange Version of Business Service Definition of Monthly Information and 1095 End of Year Information Return Part II (see table 6 Error Codes and Descriptions).
Interfaces	Reports	42556	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall only send one coverage year per file.
Interfaces	Reports	42557	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall process errors returned from the IRS based on the Technical Error Library detailed in the BSD CMS – IRS ACA Integration Initiative Exchange Version of Business Services Definition of Monthly Information and 1095 End of Year Return Part II (see table 6 Error Codes and Descriptions).
Interfaces	Reports	42558	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall only report policy information for QHPs and associated pediatric dental plans sold through California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) (no information about exemptions granted by California Healthcare Eligibility, Enrollment and Retention System (CalHEERS)) for the 1095 End of Year Information Return.
Interfaces	Reports	42559	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall report the data it has on record at the time of the report generation. A change that occurs during the year—either reported to California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) or identified by California Healthcare Eligibility, Enrollment and Retention System (CalHEERS)—will be reflected in the next monthly transmission sent to the IRS. The Exchange 1095 End of Year Information Return will include data through the end of the year.
Interfaces	Reports	42560	After the close of the tax year, The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall report to the tax filer (or other relevant adult) and IRS on individual market policies purchased through California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) for the 1095 End of Year Information Return.
Interfaces	Reports	42561	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall generate a single 1095 for each policy issued to the applicable Tax Filer or Other Relevant Adult associated with the policy based on the required data elements identified in Exchange Version of Business Service Definition of Monthly Information and 1095 End of Year Information Return Part I Table 3. The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall electronically transmit to the IRS a copy of the Exchange 1095 End of Year Information Return that was sent to the tax filer (or other relevant adult).
Interfaces	Reports	42562	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall send subsequent annual data transmissions to the CMS Data Services Hub with enough time for processing of the files to allow for submission to IRS by January 31 for 1095 End of Year Information Return.
Interfaces	Reports	42563	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall send the data elements for the 1095 End of Year Information Return as identified and described in the Exchange Version of Business Service Definition of Monthly Information and 1095 End of Year Information Return Part I, Table 3, Data Elements Table. The table also provides format and other reporting information for those elements.
Interfaces	Reports	42564	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall not use the IRS Group Identifier with the 1095 End of Year Information Return reporting.

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(Extracted from CalHEERS RTM)

Category	Sub Category	Req ID	Requirement
Interfaces	Reports	42600	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall send the first Exchange 1095 End of Year Information Return to the tax filer (or other relevant adult) and a copy electronically received by IRS no later than January 31, 2015 and will include data through the end of December 2014.
Interfaces	Reports	42602	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall define record, in the context of the 1095 End of Year Information Return, as the collection of data about a single policy purchased via California Healthcare Eligibility, Enrollment and Retention System (CalHEERS).
Interfaces	Reports	42603	Every January, starting in 2015, The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall submit only one valid 1095 End of Year Information Return submission including data on all policies purchased through California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) for the previous coverage year.
Interfaces	Reports	42604	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall send information on 100% of all individual market policies purchased for the 1095 End of Year Information Return.
Interfaces	Reports	42605	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall label multi-file submissions 1 of x, 2 of x...x of x for the 1095 End of Year Information Return.
Interfaces	Reports	42606	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall perform business data consistency checks of all submissions as defined by CMS/IRS for the 1095 End of Year Information Return.
Interfaces	Reports	42607	If the submission is not accepted, The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall resubmit a corrected submission within 48 hours. If the submission is identified as having missing transmissions, The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall retransmit only the missing transmission, or if that is not possible, resubmit the entire submission for the 1095 End of Year Information Return.
Interfaces	Reports	42608	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall ensure each transmission will be limited to a file ? 100MB uncompressed with the manifest that identifies the valid trading partner (California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) or Covered California), batch number, sequence number, and total number of files in the submission for the 1095 End of Year Information Return.
Interfaces	Reports	42609	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall ensure each transmission will have an attached file that is well formed XML and adhere to the XML schema defined by the IRS for the 1095 End of Year Information Return.
Interfaces	Reports	42610	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall ensure All of the required information for the entire year regarding a single policy must be contained within a single transmitted file (e.g., a policy cannot be split across transmissions) for the 1095 End of Year Information Return.
Interfaces	Reports	42611	If a transmission is rejected by the IRS and CMS is unable to fix the condition, The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall correct the condition and retransmit within 48 hours for the 1095 End of Year Information Return.
Interfaces	Reports	42612	Once notified of missing files in a submission, The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall transmit all missing files within 48 hours for the 1095 End of Year Information Return.
Interfaces	Reports	42613	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall ensure that each transmission is properly identified, virus free, and error free before being submitted to the IRS for the 1095 End of Year Information Return.
Interfaces	Reports	42614	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall ensure all transmissions to have a valid Exchange identifier and other header information as defined by CMS/IRS, and meet security standards for the 1095 End of Year Information Return.
Interfaces	Reports	42615	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall process a confirmation of acceptance of the transmission for the 1095 End of Year Information Return.
Interfaces	Reports	42616	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall process error messages returned on the transmissions and submission for the 1095 End of Year Information Return.
Interfaces	Reports	42617	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall address any annual data correction activities quickly upon notification so the problem can be resolved and the data stored for the 1095 End of Year Information Return.
Interfaces	Reports	42618	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall use an automated informative mechanism for processing error messages either manually or electronically returned on the transmissions and submission from the Federal Data Services Hub or IRS based on processing business rules for specific error types listed in the Technical Error Library detailed in the BSD CMS – IRS ACA Integration Initiative Exchange Version of Business Services Definition of Monthly Information and 1095 End of Year Return Part II (see table 6 Error Codes and Descriptions).
Interfaces	Reports	42619	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall determine the Second Lowest Cost Silver Plan (SLCSP or Bench Mark Plan) by taking the number of silver plans open to enrollment to the taxpayer by the tax payer's residence (service area) and available to all members of the coverage household at the time of enrollment. (Note: SLCSP does not change if the QHP or the cheapest SP closes to enrollment or terminates after the coverage household enrolls).
Interfaces	Reports	42620	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) system shall capture and store the Second Lowest Cost Silver Plan (SLCSP) value and report the value both monthly and yearly for every Exchange member who enrolls in a QHP regardless if the member accepted APTC.
Interfaces	Reports	42806	After the close of the tax year, the California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) system shall generate a Form 1095-A Health Insurance Marketplace Statement for each individual (reflected as Recipient on the form) who purchased a policy through the Covered CA Marketplace regardless if financial assistance was accepted; there will be one (1) form per policy. If multiple families are enrolled in a single qualified health plan (QHP), a Form 1095-A must be distributed to each Tax Filer or Other Relevant Adult. For example, if a single QHP is shared among two or more households, each Tax Filer will receive a separate Form 1095-A which will report information about their household's enrollment in that policy.
Interfaces	Reports	42807	When generating the Form 1095-A Health Insurance Marketplace Statement, the California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) system shall use all known individual information for the previous calendar year and include 100% of records for all policies purchased through the CA. Marketplace. For example, if Form 1095-A is being generated in January 2017, then all individual data from calendar year 2016 will be used for its creation.
Interfaces	Reports	42808	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) system shall not generate a Form 1095-A Health Insurance Marketplace Statement for policies purchased through SHOP.
Interfaces	Reports	42809	When generating a Form 1095-A Health Insurance Marketplace Statement, the California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) system shall exclude any exemption related information.
Interfaces	Reports	42810	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) system shall be able to identify and capture (log) any system errors preventing the generation of all third-party Form 1095-A Health Insurance Marketplace Statement files.

Category	Sub Category	Req ID	Requirement
Interfaces	Reports	42811	When generating the Form 1095-A Health Insurance Marketplace Statement, the California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) system shall use data elements as defined in Exchange Version of Business Service Definition of Monthly Information and 1095 End of Year Information Return Part I, Table 3, Data Elements table. (reference Table 3 for additional data element reporting information)
Interfaces	Reports	42812	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) system shall always populate Form 1095-A Health Insurance Marketplace Statement with the Second Lowest Cost Silver Plan (SLCSP) regardless if the individual accepted APTC.
Interfaces	Reports	42815	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) system shall store all data used for producing the Form 1095-A Health Insurance Marketplace Statement according to the approved Covered CA and California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) Data Retention Policies.
Interfaces	Reports	42816	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall have the ability to resend one-to-many Form 1095-A Health Insurance Marketplace Statements without being required to regenerate all annual 1095-A forms.
Interfaces	Reports	42817	Outside of the California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) CR-8386 identified business requirements, the California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall generate and distribute all Form 1095-A Health Insurance Marketplace Statements in compliance with all applicable Federal level requirements and rules as identified with Federal documents: • Federal Data Services Hub (Federal DSH) Marketplace Generation of Monthly and 1095 End-of-Year (EOY) Reporting to the Internal Revenue Service (IRS) Business Service Definition (BSD), June 2014, Version 7.0 • Exchange Version of Business Service Definition of Monthly Information and 1095 End of Year Information Return, Part I, Version 2.0, July 24, 2014 • Exchange Version of Business Service Definition of Monthly Information and 1095 End of Year Information Return, Part II, Version 2.0, August 12, 2014
Interfaces	Reports	42818	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) system shall be able to receive and upload a third-party vendor's 1095-A file processing confirmation file.
Interfaces	Reports	42819	1095-A file processing discrepancies must be captured to denote which 1095-A forms where not processed or distributed by the third-party vendor and the discrepancy reason. All non-processed or distributed 1095-A forms must be corrected and retransmitted to the third-party vendor via established SLA guidelines.
Interfaces	Reports	42820	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) system shall have a mechanism to identify if any data change has occurred that would affect any data field on an already distributed Form 1095-A Health Insurance Marketplace Statement.
Interfaces	Reports	42821	On a bi-weekly basis (two times in a 7 calendar day range), the California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) system shall generate corrected versions of the Form 1095-A Health Insurance Marketplace Statement when a data change has ocured.
Interfaces	Reports	42822	"All envelopes that will be used to mail the CalNOD62A and CalNOD62B notices, regardless of the notice print language, will display a Covered CA. defined message and/or image in the English, Spanish, Chinese, Vietnamese, and Korean languages on the address facing side of the envelope."
Interfaces	Reports	42824	On or before January 31st of each calendar year beginning with 2015 and every year thereafter, the California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) system shall make available for distribution to the Tax Filer, or Other Relevant Adult, a hardcopy, paper Form 1095-A Health Insurance Marketplace Statement.
Interfaces	Reports	42827	To assist the Service Center with managing hardcopy Form 1095, a new Exela 'Document Category' of "IRS 1095" is required.
Interfaces	Reports	42865	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) system shall support IRS annual schema attributes 'recordType' and 'lineNum' as being a required attribute when transmitting to the IRS.
Interfaces	Reports	42882	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) system shall support using the December 2014 annual response file schema.
Interfaces	Reports	44599	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall receive a transmission reports from the Federal Data Services Hub detailing error messages and error correction processing.
Interfaces	Reports	45993	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall ensure that each transmission will be limited to a file ? 100MB uncompressed with a manifest that identifies the valid trading partner (California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) or Covered California), batch number, sequence number, and total number of files in the submission.
Interfaces	Reports	46003	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall define a file for the monthly information and 1095 End of Year Information return as follows: A file is XML data transmitted to the IRS as an attachment to a SOAP message with a maximum file size limitation of 100MB uncompressed. A file contains multiple, complete records. (A record cannot be split across files.)
Interfaces	Verify Application Information		
Interfaces	Verify Application Information	37909	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall recognize the California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) Case Number returned in the MEDS Alert file
Interfaces	Verify Application Information	38023	CalHEER shall send the following three alien fields to MEDS for all California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) managed programs: - Alien/INS Entry Date (DE2005) - Citizen/Alien Indicator (DE2009) - Alien Eligibility Code (DE2033)
Interfaces	Verify Application Information	38024	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall store the most recent Fed Hub VLP elements at an individual level from the Federal Data Hub Services Verify Lawful Presence v33 response message for use to send to MEDS.
Interfaces	Verify Application Information	38025	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall send Alien/INS Entry Date (DE2005), Citizen/Alien Indicator (DE2009), and Alien Eligibility Code (DE2033), Citizenship Doc Type (DE2081), Citizenship Doc Number (DE2082), Identity Doc Type (DE2086), and Identity Doc Number (DE2087) on the MEDS HX18, HX20,HX20U, HX12, and HX34 transactions when available.
Interfaces	Verify Application Information	38026	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) will continue to provide these data elements if present and associated to the California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) case individual.
Interfaces	Verify Application Information	38027	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall use the VLP response inputs 'QualfiedNonCitizenCode', 'FiveYearBarApplyCode', 'LawfulPresenceVerifiedCode', and 'USCitizenCode' to determine as per the policy translation defined for the Citizen Indicator, Alien Indicator, and the Alien Eligibility Code.

Category	Sub Category	Req ID	Requirement
Interfaces	Verify Application Information	38028	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall determinethe Citizen Indicator, Alien Indicator, and the Alien Eligibility Code based on inputs from the applicant's alleged immigration status and response to U.S. Military/Veteran question.
Interfaces	Verify Application Information	38029	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall determine the Citizen/Alien Indicator and/or the Alien Eligibility Code based on administrative verifications.
Interfaces	Verify Application Information	38030	When citizenship is verified by FDSH-SSA, California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall send Citizenship and Identity Verification Document information 3E defined in the MEDS Data Element Dictionary (DED) # 2081 and 2086.
Interfaces	Verify Application Information	38031	When citizenship is verified via FDSH-VLP (SAVE), California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall send Citizenship and Identity Verification Document Type'3F' and associated fields (DEs 2081, 2082, 2086, 2087).
Interfaces	Verify Application Information	39323	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall use SSA Title II Income in the reasonable compatibility calculation.
Interfaces	Verify Application Information	39324	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall use SSA composite as an income verification source.
Interfaces	Verify Application Information	39325	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall request and store the "disabled person indicator" from the SSA Composite Service of the FDSH.
Interfaces	Verify Application Information	39326	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall send the disabled person indicator to the SAWS via the eHIT interface.
Interfaces	Verify Application Information	39358	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall upgrade from Verify Lawful Presence (VLP) version 33 to VLP version 37 which includes following web methods: • Step 1 - Initial Verification – Step 1a - Re-Verification – Step 1b - Re-Submit With SEVIS ID • Step 2 - Initiate Additional Verificaiton • Step 3 - Initiate Third Verification • Get Case Details • Close Case • Notify Resolved Cases • Get Country of Issuance List • RetrieveStep2CaseResolution • RetrieveStep3CaseResolution
Interfaces	Verify Application Information	39359	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall store all the data elements of the request and response of the following VLP v37 services: • Step 1 - Initial Verification – Step 1a - Re-Verification – Step 1b - Re-Submit With SEVIS ID • Step 2 - Initiate Additional Verification • Step 3 - Initiate Third Verification • Get Case Details • Close Case • Notify Resolved Cases • Get Country of Issuance List • RetrieveStep2CaseResolution • RetrieveStep3CaseResolution
Interfaces	Verify Application Information	39360	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall have the ability for Adminstrative users to view both the request and response of the following VLP v37 web methods: • Step 1 - Initial Verification – Step 1a - Re-Verification – Step 1b - Re-Submit With SEVIS ID • Step 2 - Initiate Additional Verification • Step 3 - Initiate Third Verification • Get Case Details • Close Case • RetrieveStep2CaseResolution • RetrieveStep3CaseResolution

Appendix A-4 - SOW Exhibit A - System Requirements Specification
(Extracted from CalHEERS RTM)

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Category	Sub Category	Req ID	Requirement
Interfaces	Verify Application Information	39361	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS)-SAWS VLP Interface shall have the ability to receive and send the information from CMS for the following VLP v37 services: • – Step 1a - Re-Verification request and response – Step 1b - Re-Submit With SEVIS ID request and response • Step 2 - Initiate Additional Verification request and response • Step 3 - Initiate Third Verification request and response • Close Case request and response • RetrieveStep2CaseResolution request and response • RetrieveStep3CaseResolution request and response
Interfaces	Verify Application Information	39362	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall have the ability for Administrative users to initiate the next VLP Steps based on the VLP response received on prior VLP step.
Interfaces	Verify Application Information	39363	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall have the ability for Administrative users to select a pre-populated comments and/or manually enter comments on VLP steps 2 and 3.
Interfaces	Verify Application Information	39365	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS)-SAWS VLP Interface shall have the ability to receive comments for VLP steps 2 and 3.
Interfaces	Verify Application Information	39370	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall have the ability for Administrative users to be able to search for a VLP case status.
Interfaces	Verify Application Information	39371	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall have the ability to communicate to SAWS the response received from VLP to initiate the next VLP steps or last step initiated.
Interfaces	Verify Application Information	39372	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS)-SAWS VLP Interface shall have the ability to indicate the agency action or last step initiated.
Interfaces	Verify Application Information	39373	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS)-SAWS eHIT interface shall be updated for the DER to indicate the agency action or last step initiated.
Interfaces	Verify Application Information	39391	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall have the ability for Administrative user to upload documents when the VLP Step3 is required.
Interfaces	Verify Application Information	39392	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall have the ability to consume a document via the California Healthcare Eligibility, Enrollment and Retention System (CalHEERS)-SAWS VLP interface.
Interfaces	Verify Application Information	39393	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall allow the Admin users to upload documents on VLP page only in the following accepted formats: .pdf, .jpg, .gif, or .png.
Interfaces	Verify Application Information	39394	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall allow the Admin users to upload documents on VLP page and will limit the document size to 5MB.
Interfaces	Verify Application Information	39395	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall create the California Healthcare Eligibility, Enrollment and Retention System (CalHEERS)-SAWS VLP Interface.
Interfaces	Verify Application Information	39396	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall utilize both eHIT and the new VLP service through the following services: - Step 1 shall be done through EDR/DER via eHIT. - Step 1a shall be done through VLP interface. - Step 1b shall be done through VLP interface. - Step 2 shall be done through VLP interface. - Step 3 shall be done through VLP interface. - Close Case shall be done through VLP interface. - RetrieveStep2CaseResolution shall be done through VLP interface. - RetrieveStep3CaseResolution shall be done through VLP interface.
Interfaces	Verify Application Information	39397	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS)-SAWS eHIT Interface shall be updated to send and receive all data elements for the following VLP v37: Step 1 - Initial Verification (EDR/DER only)
Interfaces	Verify Application Information	39398	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall have the ability for administrative user to re-initiate InitialVerification (VLP Step 1) without re-running eligibility.
Interfaces	Verify Application Information	39399	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS)-SAWS eHIT interface will include any California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) VLP step 1 validation errors in the eHIT DER response.
Interfaces	Verify Application Information	39400	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall use agency contact reference table to populate the agency contact information on all steps.
Interfaces	Verify Application Information	39401	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall display a message to the consumer based on the error message or ESC received from the hub.

Category	Sub Category	Req ID	Requirement
Interfaces	Verify Application Information	39402	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall display a message to the users to review and update the document demographics when VLP Step 1 returns any of the following: - Document Name Mismatch - Document DOB Mismatch - Record not found
Interfaces	Verify Application Information	39403	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall have the ability to auto-initiate VLP Step 1a or Step 1b when the user updates the document information.
Interfaces	Verify Application Information	39404	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall only allow 10 numeric values in the SEVIS ID Number field on the portal.
Interfaces	Verify Application Information	39405	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall display an 'N' on the portal for SEVIS ID.
Interfaces	Verify Application Information	39406	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall have the ability to close the DHS Case automatically.
Interfaces	Verify Application Information	39407	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall allow the Administrative user to close the DHS case when step 1 needs to be re-initiated.
Interfaces	Verify Application Information	39408	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS)-SAWS VLP Interface shall allow SAWS to close the DHS
Interfaces	Verify Application Information	39409	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall initiate GetCaseDetails service on demand.
Interfaces	Verify Application Information	39410	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall update LPV, QNC and 5 year Bar information that is returned in the amendments detail of the get case details service as well as all of the information DHS has for this case.
Interfaces	Verify Application Information	39411	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall ask the question on the portal if the consumer has lived in the US since August, 1996.
Interfaces	Verify Application Information	39412	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS)-SAWS eHIT Interface shall have the ability to send and receive that the user attested data on the consumer is that they entered the country prior to August 1996.
Interfaces	Verify Application Information	39413	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall not request grant date for consumers who attest that they have lived in the US since August 1996.
Interfaces	Verify Application Information	39414	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall only allow the following characters to be entered on the VLP call for document First name, middle name, Last Name: space, a-z, hyphen, and single quote.
Interfaces	Verify Application Information	39415	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall only allow maximum of 40 characters on the document Last Name field.
Interfaces	Verify Application Information	39416	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall only allow maximum of 25 characters on the document first name field and the middle name field.
Interfaces	Verify Application Information	39417	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall allow the consumer to enter either an I-94 number or an Alien Number when the consumer indicates they have an I-797 document.
Interfaces	Verify Application Information	39418	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS)-SAWS eHIT interface shall allow the consumer to enter either an I-94 number or an Alien Number when the consumer indicates they have an I-797 document.
Interfaces	Verify Application Information	39419	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall add a clear cache indicator via eHIT for VLP to allow SAWS to clear VLP cache.
Interfaces	Verify Application Information	39420	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) Portal Admin VLP Page shall have the ability to generate a report based on data listed on screen for each individual with an unresolved VLP Case.
Interfaces	Verify Application Information	39421	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall not use the DIVS pass for VLP verifications or used in eligibility determination.
Interfaces	Verify Application Information	39422	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall have the ability to systematically rerun eligibility based on response information.
Interfaces	Verify Application Information	39423	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall have the ability to suppress unsolicited DER for mixed HH cases.
Interfaces	Verify Application Information	39424	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall have the ability to auto-initiate VLP Step 2 for any case not resolved in step 1, 1A, 1B in which Lawful Presence, QNC, or Five-year bar is set to P (Pending).
Interfaces	Verify Application Information	39425	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall update the security roles matrix.
Interfaces	Verify Application Information	39426	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall set the Alien number field in eHIT to a min of 7 max of 9 in both DER and EDR.
Interfaces	Verify Application Information	40927	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall request and store income amount and employer data received from the real-time API call.

Category	Sub Category	Req ID	Requirement
Interfaces	Verify Application Information	40933	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall send data received from the VCI service to SAWS via eHIT.
Interfaces	Verify Application Information	40972	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall set the ExchangeUpdateInfo Indicator as “N” when date of death is sent on eHIT transaction after received from SSA.
Interfaces	Verify Application Information	41017	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall use the Technical Specifications of the US Street Address API (HTTP Method, Request Headers, Request Parameters and Request Body) for invoking the API
Interfaces	Verify Application Information	41018	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall store the request and response of the US Street Address API in the INT database based on the configuration switch .
Interfaces	Verify Application Information	41019	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall use the Error Handling framework for logging/tracking any errors during request generation and response processing for US Street Address API .
Interfaces	Verify Application Information	41021	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall validate FIPS county for a physical address received in the Address node of an EDR using the US Street Address API.
Interfaces	Verify Application Information	41022	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall update the FIPS county code for a physical address based on the county returned from the US Street Address API if a single validated address is received from the service.
Interfaces	Verify Application Information	41023	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall send the updated FIPS county code to SAWS in the DER when the FIPS county code for an address is updated by California Healthcare Eligibility, Enrollment and Retention System (CalHEERS).
Interfaces	Verify Application Information	41024	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall map the first FIPS county code sorted in numerical ascending order that maps to the ZIP code provided in the EDR on the ZIP code to FIPS County Code mapping table if a validated address is not received in the response from the US Street Address API.
Interfaces	Verify Application Information	41025	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall update BV 128 to be triggered when the Zip Code provided by SAWS is not listed in ZIP code to FIPS County Code mapping table(2.60)
Interfaces	Verify Application Information	41033	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall have the functionality to send Zip+4 (when available) to MEDS for the following transactions: Identify Member Create New Application (HX18) Create Program Eligibility (HX20) Update Member (HX12) Report Medical Denial (HX34) Update County of Responsibility (HX05) Reconcile Exchange Managed Programs (RX20)
Interfaces	Verify Application Information	41034	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall only persist first 50 characters received in Address field 1 and 2 in the address node of an EDR and Update Inbound transactions from SAWS.
Interfaces	Verify Application Information	41035	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall send up to 50 characters in Address field 1 and 2 in the address node of DER/DER-Uand Update Outbound transactions from California Healthcare Eligibility, Enrollment and Retention System (CalHEERS)
Interfaces	Verify Application Information	41037	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall implement a new Business Validation to trigger the data element for LocationPostalCode or LocationPostalExtensionCode in EDR and Update Inbound transactions for the Physical Address when the data element contains alpha-numeric characters
Interfaces	Verify Application Information	45299	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall adopt the Verify Lawful Presence Service (VLP) version 37.
Interfaces	Verify Application Information	45300	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall implement application error handling when error codes are received from VLP.
Interfaces	Verify Application Information	45301	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS)-SAWS Interface shall have the ability to send specific reasons to SAWS on the VLP call errors. (partner requirement TBD)
Interfaces	Verify Application Information	45302	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall cache the Country of Issuance response from the GetCountryOfIssuanceListResp service.
Interfaces	Verify Application Information	45303	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) VLP Interface shall only accept the following document formats: pdf, .jpg, .gif, or .png
Interfaces	Verify Application Information	45304	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) VLP Interface shall limit the document size to 5MB.
Interfaces	Verify Application Information	45305	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) VLP Interface shall enforce a Base 64 encoded file type for transmission.
Interfaces	Verify Application Information	45306	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall archive VLP request and response data at 240 days.
Interfaces	Verify Application Information	45307	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall implement mock services for VLP v37.
Interfaces	Verify Application Information	45308	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall use the document type 'Other' or 'Other-2' when the consumer attests to I-797 document based on entry of alien number or I-94 number.
Interfaces	Verify Application Information	46425	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall update RIDP service from a SOAP Based service (H139) to a REST (JSON) based service (RJ139), based on schema from CMS.

Category	Sub Category	Req ID	Requirement
Interfaces	Verify Application Information	46426	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall enforce schema validations as provided in the BSD as provided by CMS for the JSON RIDP(RJ139) Service.
Interfaces	Verify Application Information	46427	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall not populate empty optional tags for RIDP (RJ139) request parameters to avoid schema transmission rejections.
Interfaces	Verify Application Information	46428	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall utilize the LW_pendingapp component to invoke the REST service in place of SOAP calls for RIDP (RJ139) Service.
Interfaces	Verify Application Information	46429	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall update ESB Fuse service for RIDP (RJ139) Service.
Interfaces	Verify Application Information	46430	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall truncate the FN, MN, LN field after 32 characters before generating the request for RIDP (RJ139) Service.
Interfaces	Verify Application Information	46431	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall replace the First, Middle, Last Name containing only the following unallowable special characters (~!@#%^*()_+-=[]{}<&\"';:/?>,) with "Unknown" so the record does not error out for RIDP (RJ139) Service.
Interfaces	Verify Application Information	46432	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall update FARS service from a SOAP Based service (H140) to a REST (JSON) based service (RJ140), based on schema from CMS.
Interfaces	Verify Application Information	46433	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall enforce schema validations as provided in the BSD as provided by CMS for the JSON FARS (RJ140) Service.
Interfaces	Verify Application Information	46434	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall not populate an empty optional tags for FARS (RJ140) request parameters to avoid schema transmission rejections.
Interfaces	Verify Application Information	46435	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall utilize the LW_FARS component to invoke the REST service in place of SOAP calls for FARS (RJ140) service.
Interfaces	Verify Application Information	46436	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall update ESB Fuse service for FARS (RJ140)service.
Interfaces	Verify Application Information	46442	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall remove the leading and trailing spaces from Request input parameters for RIDP (RJ139) and FARS (RJ140) Services.
Interfaces	Verify Application Information	46443	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall strip and concatenate any unallowable special characters to CMS for all the Name Fields (FN, MN, LN, Suffix) for RIDP (RJ139) Services.
Interfaces	Verify Application Information	46444	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall normalize RIDP (RJ139) request and response received from CMS in HBX Database.
Interfaces	Verify Application Information	46445	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall normalize FARS (RJ140) request and response received from CMS in HBX Database.
Interfaces	Verify Application Information	46446	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall create the new Mock Services to simulate responses from the REST based RIDP services (RJ139) in order to support testing.
Interfaces	Verify Application Information	46447	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall update the mock rules Response Description Text message for HE000050-RF2.
Interfaces	Verify Application Information	46448	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall create the new Mock Services to simulate responses from the REST based FARS services (RJ140) in order to support testing.
Interfaces	Verify Application Information	46449	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall perform Integration performance testing for (RJ139) RIDP and (RJ140) FARS services.
Interfaces	Verify Application Information	46450	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall use the ZIP code suffix for the zipcodeExtension data element instead of defaulting to work phone extension for RIDP Initial Request.
Interfaces	Verify Application Information	46453	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall create a new Mock rules for HE007004, HE007005, HE007000 response code for RIDP and FARS Services in order to support testing.
Issue Management			
Issue Management	General Requirement		
Issue Management	General Requirement	44254	The Vendor shall provide, at a minimum, the following information about issues: A) A description of the issue B) Priority C) Dependencies D) Schedule Impacts, if appropriate E) Individual assignments F) Targeted and Actual Resolution Dates G) Actual resolution action H) Metrics on resolution timeframes and escalation I) Issue Owner
Issue Management	General Requirement	44289	The Vendor shall establish and implement an approach to Issue Identification, Tracking, Escalation, Management, and Resolution that aligns with the OSI PMO approach to Issue Management.

Category	Sub Category	Req ID	Requirement
Issue Management	General Requirement	44292	The Vendor shall make Issue and Risk tracking details widely and readily accessible to all California Healthcare Eligiblity, Enrollment and Retention System (CalHEERS) Project team members.
Issuer Portal			
Issuer Portal	Disenrollment		
Issuer Portal	Disenrollment	42087	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall provide an ability for the Issuer Enrollment Representative to search for enrollments belonging to the Issuer's Plans using the fields - Enrollment Year, Subscriber Last Name, Case ID, Enrollment ID, Plan Number (14 character), DOB of the subscriber , Subscriber ID, Last 4 Digits of SSN, Agency Federal Tax ID, Status, Plan Type. Search on Agency federal tax Id shall return enrollments where the agent's delegation is active.
Issuer Portal	Enrollment		
Issuer Portal	Enrollment	48358	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall update the Premium and APTC Grid modal to include columns for CSR CREDIT NET AMT and CS Level for Enhanced CSR (populate for each applicable month) in the Issuer portal.
Issuer Portal	Enrollment	48359	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall update the Export file from the Enrollment Search screen (Bulk search) to include columns for CSR CREDIT NET AMT and CSR CREDIT NET AMT Effective Date in the Issuer portal.
Issuer Portal	Enrollment	48360	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall update the Export file from the Premium and APTC Grid to include columns for CSR Credit Net amount and CS Level for Enhanced CSR in the Issuer portal.
Issuer Portal	Enrollment Dashboard		
Issuer Portal	Enrollment Dashboard	42169	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall provide an ability for the issuer enrollment rep to view the household's agent delegation history on the Enrollment Detail screen.
Issuer Portal	Enrollment Dashboard	42170	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall display all the enrollees (active as well as dis-enrolled) associated to the enrollment in the Enrollment Detail screen.
Issuer Portal	General Requirement		
Issuer Portal	General Requirement	48444	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall display the member's consent response to receive text messages on the Issuer Portal.
Issuer Portal	General Requirement	48445	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall display the cell phone number for which the member had provided consent to receive text messages on the Issuer Portal.
Issuer Portal	General Requirement	48446	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall display the date Consent was provided on the Issuer Portal.
Issuer Portal	Health & Dental Plan Shopping		
Issuer Portal	Health & Dental Plan Shopping	42167	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall allow the user to view the Enrollment Details for any specific enrollment from the search results. Enrollment detail screen shall display the following details - Plan Name, Enrollment Status, Confirmation Date, Effective Date, Premium and APTC Grid, Monthly gross premium, Elected APTC, CA Premium Subsidy, Net Premium, Submitted Date, APTC Effective Date, CAPS Effective Date, Last Updated Date, Case ID, Enrollment ID, Binder Payment Transaction ID, Plan HIOS ID, Agent Name, Agent License Number, Agency Federal Tax ID, Agent Delegation History, List of enrollees. Enrollment detail screen shall display all the binder payment transaction IDs associated to the enrollment.
Issuer Portal	Health & Dental Plan Shopping	42168	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall display monthly premium and APTC grid for the enrollment on the Enrollment Detail screen.
Issuer Portal	Issuer Profile Management		
Issuer Portal	Issuer Profile Management	41533	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall allow registering and creating a User Account for the Issuer Representative and Issuer Enrollment Representative.
Issuer Portal	Issuer Profile Management	41534	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall allow the user to register an Issuer Representative and Issuer Enrollment Representative account after collecting the following information: First Name, Last Name, Title, Phone # & Email.
Issuer Portal	Issuer Profile Management	41535	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall generate a Delegation Code to enable Issuer Representative and Issuer Enrollment Representative to create a User Account in the system.
Issuer Portal	Issuer Profile Management	41536	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall display the Delegation Code for the User Account registered by California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) Issuer Admin for future retrievals.
Issuer Portal	Issuer Profile Management	41537	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall remove address collection from the account creation process for an Issuer Representative & Issuer Enrollment Representative.
Issuer Portal	Issuer Profile Management	41538	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall allow the Issuer Representative and Issuer Enrollment Representative to utilize the delegation code and create an User Account in the system.
Issuer Portal	Issuer Profile Management	41539	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall allow the user to Disable an Active Issuer Representative and Issuer Enrollment Representative's User Account.
Issuer Portal	Issuer Profile Management	41540	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall allow the user to Activate a Disabled Issuer Representative and Issuer Enrollment Representative's User Account.
Issuer Portal	Issuer Profile Management	41541	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall allow user to reset password & unblock Issuer Representative and/or Issuer Enrollment Representative 's User Account.
Issuer Portal	Plan and Benefit Assistance		

Category	Sub Category	Req ID	Requirement
Issuer Portal	Plan and Benefit Assistance	42088	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall allow the Issuer enrollment representative to view the results for the enrollment search
Issuer Portal	Plan and Benefit Assistance	42171	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall have the ability to show enrollment history with the following details: Transaction Date, Transaction Type, Transaction Reason, Member Id, Initiated By , EDI File Name, 999 ACK Transaction Date, 999 File Name, 999 ACK Status. Initiated By shall display the California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) user role who submitted the change for outbound transaction, for inbound it shall display 'Issuer'. Transaction date shall display the datetime when the user submitted the change.
Issuer Portal	Renewal		
Issuer Portal	Renewal	42166	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall allow the users to download the enrollment search results.
Issuer Portal	Renewal	42172	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall allow the Issuer Enrollment Representative to view their Issuer's profile page
Issuer Portal	Reports		
Issuer Portal	Reports	48023	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall populate the Last Login date in the Issuer Provisioning Report.
Issuer Portal	Timeshifter		
Issuer Portal	Timeshifter	42086	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall allow Issuer Enrollment Representatives to login and display the Enrollment Search options on their landing page.
Network			
Network	Enrollment		
Network	Enrollment	39494	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall provide operational capability for the bi-directional exchange of X12 (834) and other files with Carriers, and if application via the EDI Vendor.
Network	Enrollment	39495	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall provide for both Test and Production connectivity and, if applicable, support Connectivity testing with the EDI Vendor.
Network	Enrollment	39496	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall continue to support testing and Production with the existing connection via the current channel, and if applicable, with the EDI Vendor.
Network	Enrollment	39497	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) system shall discontinue existing operations capability via the current SFTP connection and change it to the new SFTP connection.
Network	General Requirement		
Network	General Requirement	45015	The Vendor shall provide a comprehensive network infrastructure which leverages automatic notifications.
Network	General Requirement	45016	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) network infrastructure shall support automated failover capabilities.
Network	Interfaces		
Network	Interfaces	46764	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall implement the VPC private endpoint to connect with CalSAWS AWS API Gateway private endpoint.
Network	Interfaces	47641	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall implement firewall routes to allow outbound communication with CalSAWS
Network	Notices		
Network	Notices	42908	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) system shall be able to produce and populate the CalNOD62-A and CalNOD62-B notice with accurate and current record data across all 1095-A form fields.
Notices			
Notices	General Requirement		
Notices	General Requirement	47978	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall create and send a new monthly notice to household with consumers who attested to a loss of minimum essential coverage due to a labor dispute and is a recipient of the Strike Lockout Benefit.
Notices	General Requirement	47979	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall create new snippets for NOD01
Notices	General Requirement	47980	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall update snippets for NOD01
Notices	General Requirement	47981	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall update the {Applied Financial Help} variable in NOD69
Notices	General Requirement	47997	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall add the Suppress/Hold/Insert functionality in the Admin Notice Portal to the new "Strike Lockout Benefit Reminder" notice
Notices	General Requirement	47998	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall update the Admin Notice Portal screen to include the new monthly notice labelled as "Strike Lockout Benefit Reminder Notice - NOD75" to allow admin users to have Suppress/Hold/Insert Functionality
Notices	General Requirement	48306	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall update the NOD01abc trigger conditions to include checks for changes in the eligibility status or amounts of Strike Lockout Benefit similar to the existing checks for CCP/APTC/CSR/CAPS
Notices	General Requirement	48307	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall update the behavior of the App.PDF to always display the Strike Lockout Questions and responses if the user had triggered the Strike Lockout Questions and responded during the corresponding application - regardless of the current "ON/OFF" configuration for Strike Lockout.
Notices	General Requirement	49076	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall generate a Family PACT notice in the client's primary lanaguage based on the client's application submission.

Category	Sub Category	Req ID	Requirement
Notices	General Requirement	49077	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall generate notices to the Family PACT client in the following languages based on the client's attested primary language indicated on the Family PACT application: 1. English (if client attested to English/Other/Decline to Answer) 2. Arabic 3. Armenian 4. Chinese 5. Farsi 6. Hindi 7. Hmong 8. Japanese 9. Khmer 10. Korean 11. Laotian 12. Punjabi 13. Russian 14. Spanish 15. Tagalog 16. Thai 17. Ukrainian 18. Vietnamese
Notices	General Requirement	49079	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall notify a Family PACT user via email about the one-time password (OTP) for multi-factor authentication (MFA) in the following scenarios: 1. During Account Creation 2. During MFA registration 3. During Login MFA Challenge 4. During Forgot Password 5. During Self-Enable
Notices	General Requirement	49080	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall notify a Family PACT user via email when a user goes through the forgot username process.
Notices	General Requirement	49081	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall notify a Family PACT user via email when a user goes through the forgot password process.
Notices	General Requirement	49082	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall notify a Family PACT user via email when a user's password is about to expire.
Notices	General Requirement	49083	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall notify a Family PACT user via email when a user's password has expired.
Notices	General Requirement	49084	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall notify a Family PACT user via text message about security related account functionality when a Family PACT user has a mobile phone number associated to their Family PACT account.
Notices	General Requirement	49085	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall notify a Family PACT user via text message about the one-time password (OTP) for multi-factor authentication (MFA) in the following scenarios: 1. During Account Creation 2. During MFA registration 3. During Login MFA Challenge 4. During Forgot Password 5. During Self-Enable
Notices	General Requirement	49086	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall notify a Family PACT admin user via email about security related account functionality when a Family PACT admin user has an email associated to their Family PACT account.
Notices	General Requirement	49087	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall notify a Family PACT admin user via email about their username when a Family PACT super admin adds a new Family PACT admin account.
Notices	General Requirement	49088	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall notify a Family PACT admin user via email about their password when a Family PACT super admin adds a new Family PACT admin account.
Notices	General Requirement	49089	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall notify a Family PACT provider site certifier and provider staff via email to create a provider site certifier or staff account when a Family PACT super admin sends an email invitation to a provider site certifier and when a Family PACT site certifier sends an email invitation to a provider staff.
Notices	Notices		
Notices	Notices	41433	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall create a new version of NOD01 (NOD01T) for consumers transitioning from MAGI Medi-Cal/CCHIP/MCAP to APTC and are auto plan selected in to a new health plan
Notices	Notices	41434	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall designate the title for NOD01T as Eligibility Notice - Medi-Cal to Covered California in the portal.
Notices	Notices	41435	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall use the existing NOD01ab/c batch to generate NOD01T
Notices	Notices	41436	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall use the snippet table used in NOD01ab/c for NOD01T.
Notices	Notices	41437	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall have the capability to specify which snippets used for NOD01ab/c are applicable to NOD01T as well.

Appendix A-4 - SOW Exhibit A - System Requirements Specification
(Extracted from CalHEERS RTM)

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Category	Sub Category	Req ID	Requirement
Notices	Notices	41438	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall trigger NOD01T for a household with at least one member in the household transitioning from MAGI Medi-Cal/CCHIP/MCAP to APTC and are auto plan selected into a new health plan, and will print eligibility information for all members in the household.
Notices	Notices	41439	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall trigger NOD01T notice only at the time of initial transition from MAGI Medi-Cal/CCHIP/MCAP to APTC.
Notices	Notices	41440	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall have the capability to send NOD01T in a different style/color of envelope.
Notices	Notices	41441	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall update eligibility snippets text and triggers across NOD01ab/c/T notices
Notices	Notices	41442	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall make trigger updates to snippet 374 and 781, and delete snippets 780 and 371.
Notices	Notices	41443	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall make text updates to snippet 618, 827, 826, 361, 359, 928, 787, 786, 788, 170.
Notices	Notices	41444	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall create 4 new snippets and or make text and trigger updates to snippet 369, 821, and 923.
Notices	Notices	41445	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall make language and placement updates to snippet 885, 879, 881
Notices	Notices	41446	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall add a page break after snippet 6 to create an address only cover page for all versions of the NOD01.
Notices	Notices	41447	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall create new snippets for the NOD01T for consumers transitioning from MAGI Medi-Cal/CCHIP/MCAP to APTC and they are auto plan selected in to a new health plan.
Notices	Notices	41448	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall create 4 new intro and title snippets.
Notices	Notices	41449	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall create a new version of the enrollment summary table (snippet 923) with specific information about SB260 for consumers transitioning from MAGI Medi-Cal/CCHIP/MCAP to Covered California and they are auto plan selected in to a new health plan
Notices	Notices	41450	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall create 6 new next steps and 3 new closing snippets and 1 header snippet specific for the NOD01T and consumers transitioning to Covered California.
Notices	Notices	41451	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall create a new notice for consumers who opt out or cancel their Auto Plan Selection.
Notices	Notices	41452	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall generate CalNOD74 via daily batch when the following trigger conditions are met: - A person enrolled in a >\$0 premium plan opts out of their plan OR - A person enrolled in a \$0 premium plan opts out of their plan OR - A person enrolled in a \$0 premium plan has not responded with an opt out or opt in and their plan is canceled post the end of the first month of coverage
Notices	Notices	41453	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall display the active opt out dynamic language in the CalNOD74 notice in a situation where a household has mulitple members and one member actively opts out of their APS plan and another (\$0 premium) member was canceled out of their APS plan due to no response on the same day.
Notices	Notices	41454	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall update notices where the suffix variable populates with a period after the suffix.
Notices	Notices	41455	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall identify the last generated NOD01T timestamp and determine whether NOD69 should be generated or skipped.
Notices	Notices	41456	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall update the NOD01 triggering conditions to generate only for current or prospective dispositions/SAWS EDR Runs.
Notices	Notices	41457	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall create a new snippet for the NOD01ab/c consumers who have a newly enrolled dependent added to an existing health plan
Notices	Notices	41458	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall not trigger NOD11 for unsubsidized applications
Notices	Notices	41459	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall not trigger the NOD11 for households with the following criteria: • Was enrolled in a QHP or QDP at the time of staging but both QHP and QDP are in terminated or cancelled status at the time of notice generation
Notices	Notices	41460	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall print and mail the NOD01T regardless of the consumers communication preference.
Notices	Notices	41461	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall generate an Enroller Portal Alert upon generation of NOD01T
Notices	Notices	41462	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall generate an Enroller Portal Alert upon generation of snippet 933 in NOD01ab/c
Notices	Notices	42191	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall update the triggering condition for snippet 933 to be sent only during SEP.
Notices	Notices	42192	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall create a new snippet (similar to 933) for cases applying during Renewal/OE for the next year.
Notices	Notices	42193	This new snippet will trigger a portal alert.
Notices	Notices	42194	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall update the Address block of the NOD61a, b, c to not be in Bold font.
Notices	Notices	42195	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall first print Address line 2 followed by Address line 1 in CalNOD61a, b, c so that bulk readers can read them correctly.
Notices	Notices	42196	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall update the NOD12AD Arabic and Farsi templates to display the Case ID and Date variables in the correct location.
Notices	Notices	42197	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall make text updates to NOD69
Notices	Notices	42198	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall update the NOD69 Babel Page to correct for errors in the Chinese portion of the Babel Page in the NOD69 Chinese translation notice
Notices	Notices	42199	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall not trigger the NOD12A/D for households with the following criteria: • Was enrolled in a QHP or QDP at the time of staging but both QHP and QDP are in terminated or cancelled status at the time of notice generation
Notices	Notices	42200	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall update the flier information in NOD01T for the 2023 benefit year
Notices	Notices	42201	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall suppress snippet 783 for all consumers
Notices	Notices	42202	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall update existing snippet text in NOD01 for households who are determined eligible for temporary Enhanced CSR program

Appendix A-4 - SOW Exhibit A - System Requirements Specification
(Extracted from CalHEERS RTM)

Category	Sub Category	Req ID	Requirement
Notices	Notices	42203	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall update the Korean translation of Snippet 365 to include the word 'month.'
Notices	Notices	42204	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall create a new enrollment snippet to notify passively renewed households that their enrollment may have changed.
Notices	Notices	42260	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall remove Snippet 899.
Notices	Notices	42261	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall make text updates to NOD12A
Notices	Notices	42262	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall update the NOD12A household income variable to capture and use the annual APTC amount based on the primary tax filer.
Notices	Notices	42263	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall update the variable for snippet 779 and 778 to populate the correct end of coverage date.
Notices	Notices	42264	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall make text updates to NOD64.
Notices	Notices	42265	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall make text updates to eligibility snippet 361 and snippet 359.
Notices	Notices	42266	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall make text and trigger updates to snippet 897
Notices	Notices	42267	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall add a new snippet, similar to snippet 897 to include California Premium Subsidy
Notices	Notices	42268	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall update triggering conditions for snippet 238/246.
Notices	Notices	45508	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall make the text changes to NOD22 Issuer Bill Statement Notice for all carriers.
Notices	Notices	45510	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall capture system calculated SEP end date under NOD01T for consumers transitioning from MAGI Medi-Cal/CCHIP/MCAP to APTC and they are auto plan selected in to a new health plan.
Notices	Notices	45511	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall capture system calculated SEP end date under NOD74 for consumers transitioning from MAGI Medi-Cal/CCHIP/MCAP to APTC and they are auto plan selected in to a new health plan.
Notices	Notices	45513	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall partially mask the SSN on the 1095/3895 tax forms to display the last 4 digits of the SSN for all individuals on the forms.
Notices	Notices	45514	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall fully mask the DOB on the 1095/3895 tax forms for all individuals that have SSN on the forms.
Notices	Notices	45515	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall mask the birth year of the DOB on the 1095/3895 tax forms for all individuals without SSN on the forms.
Notices	Notices	45516	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall mask the birth year of the DOB on the NOD71.
Notices	Notices	45517	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall make text updates to NOD62 A, B, C, D in the top 5 languages (English, Spanish, Chinese, Vietnamese, and Korean).
Notices	Notices	45518	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall update the triggering conditions for snippet 154 in the NOD01 to include consumers whose MEC/MEDS verification is pending.
Notices	Notices	45519	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall update the 3895 addendum page to match the 3895 addendum template instead of 1095 addendum page when there are more than 5 covered individuals populated on the 3895 form.
Notices	Notices	45520	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall standardize Notice Names/Titles as well as trigger condition formatting in Design documents/snippet table.
Notices	Notices	45521	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall add the 2022 IRS 1095A tax form to NOD62A/B
Notices	Notices	45522	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall update the Snippet Table to show snippet 933 with the CoveredCA.com and Coveredca.com/find-help links underlined.
Notices	Notices	45523	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall update snippet 900 to add a space between the last character and the Covered California “Find Help” link for the Khmer translation.
Notices	Notices	45524	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall update all SB260 fliers in all threshold languages to include Aetna’s logo on the bottom of the first page.
Notices	Notices	45525	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall first print Address line 2 followed by Address line 1 in CaINOD62a,b,c,d so that bulk readers can read them correctly.
Notices	Notices	46034	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall correct the NOD03 Khmer translation.
Notices	Notices	46327	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall insert supplemental information (flier in color) in the NOD01T about SB260 for consumers transitioning from MAGI Medi-Cal/CCHIP/MCAP to APTC and they are auto plan selected into a new health plan.
Notices	Notices	46500	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall update the renewal due date in NOD12AD to a new implemented configurable number of days and the renewal due date will be calculated as NOD12 generation date + number of days
Notices	Notices	46501	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall update the renewal due date to a configurable number of days for the NOD12, Annual Open Enrollment Notice, batch job
Notices	Notices	46502	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall update the renewal due date in NOD12AD for the DROP Population to be DROP Date when the case is identified as a case to be picked up for DROP batch.
Notices	Notices	46503	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall add a configuration date for the first DROP batch, so that cases identified for the first DROP Batch can be picked up on that date for Passive Renewals.
Notices	Notices	46504	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall use the configurable date to set the DROP date within NOD12 for the following cases: -Case has at least one individual who is enrolled in Catastrophic plan and is aging out on or before 12/31/20xx -Case has at least one member who is in Carry Forward Status for the current benefit year.
Notices	Notices	46505	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall have a yearly process to set a DROP date for categories of populations not originally identified within NOD12, which will be used to populate the renewal due date in NOD12.

Category	Sub Category	Req ID	Requirement
Notices	Notices	46506	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall suppress NOD12a for cases if all the following conditions are met: - One or more members of the household have transitioned from MAGI MC/MCAP/CCHIP to exchange program and are Auto Plan Selected for the current year, and the member(s) have not taken the Opt-In/Opt-Out action or their plan is not effectuated AND - Household has no other members enrolled in a non-APS plan AND - Household has no other members enrolled in an APS plan who have Opted in to that plan.
Notices	Notices	46507	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall include cases where at least one member of the household has transitioned from MAGI MC/MCAP/CCHIP to exchange program and is Auto Plan Selected for the current year, and the consumer has not taken the Opt-In/Opt-Out action or their plan is not effectuated in the DROP batch.
Notices	Notices	46508	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall make text updates for NOD12 A/D/E
Notices	Notices	46509	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall update triggers for NOD12E to refine population
Notices	Notices	46510	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall make text updates to the NOD70a/b.
Notices	Notices	46511	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall make updates to the NOD69 template
Notices	Notices	46512	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall update the text of the acceptable documents page (Snippet 881) in the NOD01.
Notices	Notices	46513	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall update the triggering conditions for the CalNOD11(for section for QHP subsidized) is to only generate for: - Consumers who applied on a subsidized application. - Consumers who are enrolled in a health plan. - Consumers who are eligible for QHP and their consent is expired/expiring.
Notices	Notices	46514	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall update the text of the acceptable documents page in the NOD03.
Notices	Notices	46515	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall update the CalNOD03 to display the PO Box address to display consistently on all the pages.
Notices	Notices	46516	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall create NOD01T fliers for the year 2024
Notices	Notices	46517	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall update the QR code in the NOD01T Fliers and NOD01 snippets.
Notices	Notices	46518	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall update the NOD03 template in Hmong to add the space after the sentence period: "thov dua.Yog"
Notices	Notices	46519	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall update the CalNOD03 template in Chinese to remove an "I" in between Dear and First/Last name.
Notices	Notices	46520	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall update the NOD38 babel pages
Notices	Notices	46521	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall upload applicable ad hoc notices to the consumer's Secure Mailbox when they are received from the vendor with the category "Other".
Notices	Notices	46522	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall generate email notification to consumers who have 'email' as their communication preference when an applicable ad hoc notice is uploaded from the vendor for their household/case.
Notices	Notices	46523	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall send an enroller portal alert when the following ad-hoc notices are uploaded to the consumer's secure mailbox: -Medicare_Transition -SSDI_Notice -Social_Security_Number_Error -SSN_Needed_Notice -Over-Age_Dependent_Info -Returned_Mail
Notices	Notices	46524	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall add a dynamic "New" after the consumers name in snippet 923 if the consumer is newly enrolled in that plan.
Notices	Notices	46525	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall update the Date formatting for Korean in the NOD00.
Notices	Notices	46526	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall update the trigger condition for Snippet 838 to generate only for consumers who are ineligible or discontinued for APTC and CSR.
Notices	Notices	46527	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall update the formatting in NOD01T snippet 3012 to bold the Agency Name and Agent Phone variables.
Notices	Notices	46892	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall create a new snippet for individuals reaching their 365th day of postpartum and are discontinued from MCAP either through being staged in the monthly MCAP end of postpartum redetermination batch or another RAC/transaction.
Notices	Notices	46893	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall update the batch to not insert the 3895 records in the HBX_GENERATE_DOC table with pending status when 3895 are not generated for the respective tax year.
Notices	Notices	46894	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall not send 3895 correction forms from tax years when the 3895 original was not generated.
Notices	Notices	46895	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall update the Hmong Snippets 154, 3018, and 3022 to show the correct spacing in the texts.
Notices	Notices	46896	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall update the NOD62A Chinese template FAQ page to display "III" in the same font style.
Notices	Notices	46897	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall make text updates to the NOD62A & B
Notices	Notices	46898	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall expand the NOD62A & B templates to include the remaining threshold languages.
Notices	Notices	46899	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall add the 2023 IRS 1095A tax form to NOD62A/B
Notices	Notices	46900	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall remove old combined logo for Medi-Cal to Covered California from the Notices and replace with the new combined logo for Medi-Cal to Covered California.

Category	Sub Category	Req ID	Requirement
Notices	Notices	46901	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall create and generate a new notice for consumers who were enrolled in a catastrophic health plan.
Notices	Notices	46956	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall update the triggering conditions for NOD01ab/c to generate a notice for individuals granted eligibility to Accelerated Enrollment from the SAWS and California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) Access Channel.
Notices	Notices	48205	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall have an ability to generate notices for any of the following Alternative Formats attested by the primary household on the case - Large Print - Audio Electronic Format - Data Electronic Format - Audio Electronic Format (password protected) - Data Electronic Format (password protected) - Braille
Notices	Notices	48206	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall have an ability to configure (ON / OFF) the notices generation in Alternative Formats.
Notices	Notices	48640	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall include an Issue Date on the Medi-Cal Eligibility Confirmation Letter as the date the user clicks on “Get Confirmation Letter” button on the Individual Eligibility Details page.
Notices	Notices	48641	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall include a Good Through Date on the Medi-Cal Eligibility Confirmation Letter that is 30 calendar days from the Issue Date.
Notices	Notices	48643	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall not mask the year of birth on the Medi-Cal Eligibility Confirmation Letter for any user.
Notices	Notices	48644	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall replace CoveredCA.com with DHCS.ca.gov at the bottom of Medi-Cal Eligibility Confirmation Letter.
Notices	Notices	48645	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall remove CoveredCA logo from Medi-Cal Eligibility Confirmation Letter.
Notices	Notices	48646	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall update the Medi-Cal Eligibility Confirmation Letter to include language for providers to verify recipient's eligibility and use this letter as temporary identification only.
Notices	Notices	48744	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall generate and mail a copy of the consumer's notice for an assigned authorized representative in their preferred language if the authorized representative has a communication preference other than email, AND the consumer has requested their authorized representative to receive notices on their behalf. This change will begin on 08/01/2025.
Notices	Notices	48745	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall generate and mail a copy of the consumer's notice for an assigned Authorized Representative in the Authorized Representative's preferred format, if they request to receive notices in an alternative format.
Notices	Notices	48746	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall use the authorized representative's mailing address to mail a copy of the consumer's notice for an assigned authorized representative
Notices	Notices	48747	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall mail a copy of the consumer's notice for an assigned authorized representative regardless of whether the authorized representative has created an account.
Notices	Notices	48748	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall update the authorized representative's preferred method of communication to Mail and mail a copy of the consumer's notice for an assigned authorized representative who has Email as the preferred method of communication when the authorized representative has not created an account by the time the first notice is generated.
Notices	Notices	48749	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall not mail a copy of the consumer's notice to an assigned authorized representative if the authorized representative has the exact same mailing address as the consumer and both the consumer and the authorized representative have preferred method of communication other than email (excluding different preferred alternate format or different preferred written languages).
Notices	Notices	48750	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall mail one copy of the consumer's notice to only one authorized representative when there are more than one authorized representative with the exact same name and mailing address, using the preferred language and method of communication of the most recently updated duplicate authorized representative.
Notices	Notices	48751	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall indicate on the Documents and Correspondence screen that the notice was sent to the Authorized Representative for any applicable notice generated and uploaded to Documents and Correspondence when the consumer has an authorized representative and the authorized representative is set up to receive notices on the consumer's behalf.
Notices	Notices	48752	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall stop the notice generation for an Authorized Representative once the consumer notifies that the representative is no longer authorized to act on the consumer's behalf.
Notices	Notices	48753	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall create a new table that contains all notice information per notice per authorized representative, and include a field that links it to the consumer notice listed in dm_notices.
Notices	Notices	48754	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall add portal messaging to the Authorized Representative screen when an Authorized Representative is being delegated to a case and the preferred method of communication is email, identifying that the Authorized Representative needs to create an account to receive emails.
Notices	Notices	48755	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall update the default preferred method of communication on the Authorized Representative screen when an Authorized Representative is being delegated to a case from Mail to Email.
Notices	Notices	48756	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall update the order of communication method options for authorized representatives to show Email first.
Notices	Notices	48757	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall generate a copy of the consumer's notice for an assigned authorized representative in the authorized representative's preferred language and upload the copy of the notice to the authorized representative's secure mailbox when the authorized representative's preferred method of communication is Email and the authorized representative has set up an account.
Notices	Notices	48758	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall move inactive notice documentation to an Archive folder.

Category	Sub Category	Req ID	Requirement
Notices	Notices	48776	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall integrate the print vendor to generate the 6 alternative format notices (Large Print, Braille, Audio Electronic Format, Data Electronic Format, Password protected Audio Electronic Format, Password protected Data Electronic Format) according to the consumer's alternative format selection.
Notices	Notices	48777	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall persist the Large Print, Audio Electronic Format (password-protected or not password-protected), and Data Electronic Format (password-protected or not password-protected) alternative format notices shared by the print vendor.
Notices	Notices	48778	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall provide the README text file containing the below password format and the password to be used for password-protection to the print vendor to be included for alternative format notices generated in Audio Electronic Format (password-protected) or Data Electronic Format (password-protected): [California Healthcare Eligiblity, Enrollment and Retention System (CalHEERS) case number]+[Date of Birth mmddyyyy]
Notices	Notices	48779	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall include a physical copy of the cover sheet of the notice, including the QR code for returned mail, within the letter for the following alternative formats: -Large Print -Audio Electronic Format -Data Electronic Format -Audio Electronic Format (password protected) -Data Electronic Format (password protected) -Braille
Notices	Notices	48780	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall exclude the following notices from the alternative format notice generation process: NOD22, NOD38a/b, NOD61d, NOD61e, NOD66, NOD68, NOD72a, NOD72b, NOD71, NOD73, NOD62a/b (2016-2019), Admin Notices, Flyers from CalNOD01t/x, Admin Inserted Images (applicable for all notices).
Notices	Notices	48787	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall persist an alternative format indicator and the generation date for each notice that was sent out in Alternative Format.
Notices	Notices	48788	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall upload the generated notices in large print received from the print vendor to the documents and correspondence page and to the secure mail box.
Notices	Notices	48790	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall display the alternative format indicator, generation date and appropriate label in the documents and correspondence page, for the Large Print, Data Electronic Format, Data Electronic Format (password-protected), Audio Electronic Format, and Audio Electronic Format (password-protected) notices.
Notices	Notices	48791	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall implement a returned mail process for alternative format notices that were returned.
Notices	Notices	48792	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall create a new MWS Document Type of "Returned Mail - Alternative Formats" for any alternative format returned mail on Salesforce BPM.
Notices	Notices	48793	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall generate Braille notices in English or Spanish.
Notices	Notices	49600	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall print Large Print notices on 11x17 size paper.
Operational Readiness Review			
Operational Readiness Review	General Requirement		
Operational Readiness Review	General Requirement	43490	The Technology Refresh Assessment and Plan shall be submitted by September 1 each year and shall identify the Equipment and Software components that need to be replaced during the two (2) upcoming State Fiscal Years. The Technology Refresh Assessment and Plan shall address minimum, current, and projected capacity and performance analysis associated with the all Equipment and Software. The Technology Refresh Assessment and Plan shall include, at a minimum: A) Schedule for each of the Equipment and Software components listed above that indicates the planned refresh cycle in years, planned refreshes for the two (2) upcoming SFYs, and a refresh date for each component based on the number of years that component is expected to perform at its peak. B) Current and emerging trends in technology that may (or may not) be beneficial to the Exchange and Exchange and why. C) Recommendations for replacement Equipment and Software components and justification for the recommendations, including recommendations for postponement of previously planned refresh items.
Operational Readiness Review	General Requirement	43500	The Vendor shall prepare a Final Project Completion Report to include at a minimum: A) Executive Summary: Scope, Schedule, Budget: Plan vs. Actuals B) Organization and Project Management Approach C) Summaries by major Project Team: PMO, Application Development & Testing, Technical, Implementation, Training D) Summary of key issues and risks E) Key Best Practices and Lessons Learned F) Requirements Summary G) Administrative and Contract Closure H) Contract Closure I) Information Distribution & Archive

Category	Sub Category	Req ID	Requirement
Operational Readiness Review	General Requirement	43501	The Vendor shall prepare a Privacy Impact Assessment (Final) to ensure no collection, storage, access, use or dissemination of identifiable respondent information that is not both needed and permitted. This deliverable must include at a minimum: A) Summary of PIA Required Questions B) PIA Required Information C) System Characterization and Data Characterization D) Information Sharing Practices E) Web Site Hosting Practices F) Administrative Controls G) Technical Controls H) Physical Access I) Approval/Demotion J) Percent Complete
Operational Readiness Review	General Requirement	43502	The Vendor shall develop and submit a Plan of Action & Milestones (Final) Report that includes, but is not limited to, the status of known security weaknesses with associated Plan of Action Milestones.
Operational Readiness Review	General Requirement	43504	The Vendor shall deliver a Release Management Plan, six (6) months prior to go-live, that describes the Release process, which includes, but is not limited to: A) Approach B) Methodology C) Release Schedule for the next year which shall include: D) Roles and responsibilities E) Metrics and Reports F) Entry and exit criteria G) Process for backing a release out of production H) Automated methodology for validating the production Software I) Process and timeframe for the Vendor to issue release notes.
Operational Readiness Review	General Requirement	43596	The Vendor shall develop and execute a Final Implementation Plan to include at a minimum: A) Methodology B) Schedule including task start and end dates C) Roles and responsibilities of Vendor and Exchange teams D) Implementation Readiness and Checklists, including readiness criteria metrics E) Entry and Exit Criteria for beginning and completion of Implementation F) Proven Practices (demonstrate that the plan is based upon Proven Practices) G) Cutover Processes and Procedures H) Implementation Support Plans I) Contingency Plan J) Recovery Plan
Operational Readiness Review	General Requirement	43597	The Implementation Plan shall also detail all of the tasks, Implementation schedules and, the integration of Implementation planning with: A) Site Preparation, Installation and Certification for Infrastructure; B) Training Materials Development; C) Training Delivery; D) Organizational Change Management; E) Conversion (if any); F) Interface and System of record cutover; and G) Efficiency of procedures and work flow.
Operational Readiness Review	General Requirement	43598	The Vendor shall prepare and execute a final Organizational Change Management Plan. The Plan shall entail the following activities and include, but not be limited to: A) Overall Approach and Schedule B) Roles and Responsibilities of Vendor and Exchange/State staff C) Process and role gap analysis of existing workflow and procedures (As Is/To Be Analysis) which should include "a day in the life of" study of people in the roles that will be impacted by the new System D) Gap Analysis between the existing environments and the new California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) environment E) Change Readiness Plan which shall include details regarding the change readiness process, inputs and outputs; readiness criteria; assessment methods; and change readiness tools utilized; G) Communications Strategies H) Tasks and Expected Results I) Method for Documenting and Dealing with Issues.
Operational Readiness Review	General Requirement	43599	The Vendor shall prepare User Manuals (Final) to include at a minimum: A) Getting Started B) Using the System C) Troubleshooting and Support

Category	Sub Category	Req ID	Requirement
Operational Readiness Review	General Requirement	43615	The Vendor shall develop and implement a Final Training Plan that addresses the following: A) Development and Delivery methods and strategies B) Development and Delivery schedules C) Development and Delivery Roles and responsibilities of Vendor and Exchange teams including training management, logistics, establishment of Facilities (as applicable), trainers and users/trainees/participants D) Curriculum, Milestones, tasks, dates, participants, critical resources E) Training content – For each user type and level: content of training to be provided, description of training materials, training development and delivery methods, and location of training F) Training Delivery Sites, Facilities, and Equipment according to the training schedules G) Training Delivery tracking H) Training assessment and retraining I) Ongoing training
Operational Readiness Review	General Requirement	43616	The Vendor shall prepare a Test Report (Final) to include at a minimum: A) Summary Assessment B) Detailed Test Results C) Variances D) Test Incidents E) Recommendations
Operational Readiness Review	General Requirement	43617	The Vendor shall prepare a Data Use/ Data Exchange/ Interconnection Security Agreement (Final) to address and include the following information: The Data Use Agreement (DUA) is developed by the Business Owner and Project Manager and initiated in the Design Phase, continued throughout the Development Phase and Test Phase, and completed in the Implementation Phase. A DUA is a legal binding agreement between a Federal agency and an external entity (e.g., contractor, private industry, academic institution, other Federal government agency, or State agency), when an external entity requests the use of personal identifiable data that is covered by the Privacy Act of 1974. The agreement delineates the confidentiality requirements of the Privacy Act, security safeguards, and the Federal agency's data use policies and procedures. The DUA serves as both a means of informing data users of these requirements and a means of obtaining their agreement to abide by these requirements. Additionally, the DUA serves as a control mechanism through which the Federal agency can track the location of its data and the reason for the release of the data. A DUA requires that a System of Record Notice be in effect, which allows for the disclosure of the data being used. There are five templates available depending upon need: A) New Data Use Agreement B) Update to an Existing Data Use Agreement C) Amendment to an Existing Data Use Agreement D) Disproportionate Share Hospital Data Use Agreement (DSH) E) Disproportionate Share Hospital Data Use Agreement (cost reporting periods that include December 8, 2004 and thereafter) NOTE: The DUA templates can be found on the CMS internal Forms Locator website.
Operational Readiness Review	General Requirement	43618	Business Product (Final) The Systems solution delivered for final release, including; A) Release version identification; B) Hardware and software acquisition and installation status; C) Data conversion issues and status; D) Technical and function documentation status.
Operational Readiness Review	General Requirement	43619	The Vendor shall prepare the Final Training Materials for each user type, including but not limited to: A) Training content B) Description of training materials, training delivery methods and training locations to include at a minimum: C) Web-based instruction D) Instructor guides E) Student guides F) Exercise materials G) Training records.

Category	Sub Category	Req ID	Requirement
Operational Readiness Review		43620	At the conclusion of the Operational Readiness Review, the Vendor shall prepare a Requirements Traceability Matrix Update. This update must include at a minimum: A) Approach to Requirements Analysis and Traceability B) Summary of Findings C) List of Requirements D) List of Deliverables E) Requirements mapped to Deliverables F) Deliverables mapped to Requirements G) Requirements without matching Deliverables H) Deliverables without matching Requirements I) System Test Requirements mapped to System Test Scenarios/Conditions and vice versa J) System Test Requirements without matching scenarios and vice versa K) UAT Requirements mapped to UAT Scenarios/Conditions and vice versa L) UAT Requirements without matching scenarios and vice versa
	General Requirement		
Operational Readiness Review	General Requirement	43621	Immediately following the completion of implementation, the Vendor shall prepare an Implementation Complete Deliverable. The document shall highlight proven practices and recommendations, as well as problem areas, issues and corresponding solutions associated with the application, hand-offs and coordination among other entities involved with the project.
Operations			
Operations	Case Management		
Operations	Case Management	38387	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) system shall have the functionality to import a bulk upload documents from an external sources, including Novitex and Service Center.
Operations	Case Management	38388	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) system shall have the functionality to consume metadata that is associated to documents that are uploaded in bulk.
Operations	Case Management	38389	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) system shall have the functionality to automatically link documents uploaded in bulk to the correct case based on the metadata provided.
Operations	Case Management	38390	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) system shall create a BPM work task to review documents received from KP when the document cannot be linked via Case ID and assign it to a Manual Verification queue.
Operations	Case Management	38391	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) system shall have the functionality to move a document that was erroneously uploaded to a case to the correct case.
Operations	Case Management	38591	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall apply a data fix to the records identified by SAWS as MAGI M/C Denied or Discontinued. The data fix shall change the records to the California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) application status from its current status of in progress or terminated to ""terminated"" and the California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) case status to ""inactive"".
Operations	Case Management	38592	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall provide the functionality to apply a data fix to the records identified by SAWS as MAGI M/C and Mixed Household cases as duplicate cases. The data fix shall change the records to the California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) application status from its current status (in progress or terminated) to "terminated" and the California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) case status to "closed duplicate". Consumer accounts will not be effected.
Operations	Case Management	38593	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall apply a data fix to discontinue the eligibility of the MAGI Medi-Cal individuals from Mixed Household records identified by SAWS.
Operations	Case Management	38594	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall apply a data fix to SAWS identified Cases that are in withdrawn status to either terminate or restore to active.
Operations	Case Management	38595	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System must provide the functionality to consume the denial or discontinuance reason code in CancelDER service.
Operations	Case Management	38596	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall provide the functionality to create and consume an eHIT transaction to communicate a canceled Determination of Eligibility Response (DER)
Operations	Case Management	38597	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall close cases when a Cancelled DER transaction is received.
Operations	Case Management	38602	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall accept and process EDRs on cases that are in a withdrawn status.
Operations	Case Management	38603	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall remove business validation 8 related to the California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) withdrawn case status.
Operations	Case Management	38604	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) system shall update ad-hoc eHIT interface operational reports for the inclusion of Cancelled DER service.
Operations	Case Management	38605	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) system shall provide a report of the universe of withdrawn cases with an enrollment indication of the case persons.
Operations	Case Management	38606	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) EHIT Interface shall provide a new web service to receive Cancelled DERs that processes these requests in near realtime.
Operations	Eligibility Determination		
Operations	Eligibility Determination	40786	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall update California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) access channel cases for all counties within the C-IV consortia to ensure they are tied to LRS and not C-IV to ensure proper routing of the cases to the LRS/CalSAWS consortia.
Operations	Eligibility Determination	41116	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall split the Portal and eHIT infrastructure, to reduce the dependency of performance between Portal and eHIT transactions.
Operations	Eligibility Determination	41117	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall size Portal and eHIT infrastructure to meet the existing baseline performance.

Category	Sub Category	Req ID	Requirement
Operations	Eligibility Determination	41118	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall ensure that infrastructure components are highly available after splitting the infrastructure.
Operations	Eligibility Determination	41119	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall ensure that infrastructure of Portal and eHIT will support the projected increase in users and increase in eHIT's transactions for next year's OE period.
Operations	Eligibility Determination	41121	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall implement changes related to system monitoring to capture metrics and reports for the additional infrastructure
Operations	Eligibility Determination	41122	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall implement security changes to secure the additional infrastructure.
Operations	Enrollment		
Operations	Enrollment	38311	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System will provide operations capability for the bi-directional exchange of X12 (834) files with UHC via their new EDI Vendor (Health Plan Services).
Operations	Enrollment	38312	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System will provide for both test and production connectivity and will support the testing of the new connectivity with the EDI Vendor (Health Plan Services).
Operations	Enrollment	38631	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System will provide operations capability for the bi-directional exchange of X12 (834) files with Blue Shield.
Operations	Enrollment	38632	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System will provide for both test and production connectivity and will support the testing of the new connectivity with Blue Shield.
Operations	Enrollment	38698	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System will provide operations capability for the bi-directional exchange of X12 (834) files with HealthNET.
Operations	Enrollment	38699	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System will provide for both test and production connectivity and will support the testing of the new connectivity with HealthNET.
Operations	Enrollment	38879	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System will provide operations capability for the bi-directional exchange of X12 (834) files with Premier.
Operations	Enrollment	38880	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System will provide for both Test and Production connectivity and will support the testing of the new connectivity with Premier.
Operations	Enrollment	38881	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) system will discontinue existing operations capability with the existing inhouse Premier EDI processing via a direct connection and convert it to Sotheon.
Operations	Enrollment	38882	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System will validate that Premier is able to uniquely identify X12 (834) files and provide a unique destination folder (or other mechanism) through which it is providing EDI services.
Operations	Enrollment	38883	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System will send the files via Secured File Transfer Protocol (SFTP) . Premier will be responsible for securing their SFTP site, and also making sure these files are encrypted at rest.
Operations	Enrollment	38884	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) system shall be updated to point to a new PayNow URL. The SAML interface will still be used, but Premier is now using Softheon as their payment vendor.
Operations	Enrollment	43153	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System will provide operations capability for the bi-directional exchange of X12 (834) files with Kaiser Permanante via their new EDI Vendor (Health Plan Services).
Operations	Enrollment	43154	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System will provide for both test and production connectivity and will support the testing of the new connectivity with the EDI Vendor (Health Plan Services).
Operations	Enrollment	43156	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System will need continue to support testing with the existing EDI vendor (Conexis) via this same FTP channel until the new EDI vendor (Health Plan Services) is implemented into production.
Operations	Enrollment	43398	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System will provide operations capability for the bi-directional exchange of X12 (834) files withDental Health Services via their new EDI Vendor (Aldera).
Operations	Enrollment	43399	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System will provide for both test and production connectivity and will support the testing of the new connectivity with the EDI Vendor (Aldera).
Operations	Enrollment	43400	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System will need continue to support testing and Production with the existing connection via the current channel until the new Aldera system is tested, validated and implemented into production.
Operations	Enrollment	43401	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) system will discontinue existing operations capability with Dental Health Services current platform via a direct connection and convert it to the new Aldera Vendor (Dental Health Services).
Operations	Enrollment	43402	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System will validate that the new vendor is able to uniquely identify X12 (834) files from multiple California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) Partners and provide a unique destination folder.
Operations	Enrollment	43403	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System will send the files via Secured File Transfer Protocol (SFTP) . Carriers will be responsible for securing their SFTP site, and also making sure these files are encrypted at rest. (For California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) directional traffic PGP keys and SSH keys will be provided by Accenture.)
Operations	Enrollment	44501	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall provide operational capability for the bi-directional exchange of X12 (834) and other files with Valley Health via their new EDI Vendor (UHIN). The new vendor UHIN is a pass-through and makes NO changes to any of the files it routes.
Operations	Enrollment	44527	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall provide operations capability for the bi-directional exchange of X12 (834) files with Oscar.
Operations	Enrollment	44529	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall provide for both Test and Production connectivity and will support Connectivity testing of the new connection with UHIN.
Operations	Enrollment	44530	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall continue to support testing and Production with the existing connection via the current channel until the new UHIN pass-through connection is tested, validated and implemented into production.
Operations	Enrollment	44531	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) system shall discontinue existing operations capability via the direct SFTP connection to Valley Health and and change it to a new direct SFTP connection to UHIN when the new Vendor End point has been implemented into Produciton.

Appendix A-4 - SOW Exhibit A - System Requirements Specification
(Extracted from CalHEERS RTM)

Category	Sub Category	Req ID	Requirement
Operations	Enrollment	45096	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) system will discontinue existing operations capability with Kaiser Permanente's current EDI vendor Conexis (aka KPC) via a direct connection and convert it to the new EDI Vendor (Health Plan Services).
Operations	Enrollment	45097	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System will validate that the new EDI vendor is able to uniquely identify X12 (834) files from multiple California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) Partners and provide a unique destination folder (or other mechanism) for each California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) partner for which it is providing EDI services.
Operations	Enrollment	45098	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System will send the files via Secured File Transfer Protocol (SFTP) . Carriers will be responsible for securing their SFTP site, and also making sure these files are encrypted at rest.
Operations	Enrollment	45154	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) system will discontinue existing operations capability with UHC via a direct connection and convert it to the new EDI Vendor (Health Plan Services).
Operations	Enrollment	45155	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System will validate that the new EDI vendor is able to uniquely identify X12 (834) files from multiple California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) Partners and provide a unique destination folder (or other mechanism) for each California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) partner for which it is providing EDI services.
Operations	Enrollment	45156	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System will send the files via Secured File Transfer Protocol (SFTP) . Carriers will be responsible for securing their SFTP site, and also making sure these files are encrypted at rest.
Operations	Enrollment	45177	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) system will discontinue existing operations capability with HPS(Existing EDI vendor) via a direct connection and convert it to the Blue Shield.
Operations	Enrollment	45178	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System will validate that Blue Shield is able to uniquely identify X12 (834) files from multiple California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) Partners and provide a unique destination folder (or other mechanism) for each California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) partner for which it is providing EDI services
Operations	Enrollment	45179	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System will send the files via Secured File Transfer Protocol (SFTP) . Carrier will be responsible for securing their SFTP site, and also making sure these files are encrypted at rest.
Operations	Enrollment	45182	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) system will discontinue existing operations capability with hCentive(Existing EDI vendor) via a direct connection and convert it to the new_exchange_vendor_name (Centene/Softeon).
Operations	Enrollment	45183	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System will validate that HealthNET is able to uniquely identify X12 (834) files from multiple California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) Partners and provide a unique destination folder (or other mechanism) for each California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) partner for which it is providing EDI services.
Operations	Enrollment	45184	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System will send the files via Secured File Transfer Protocol (SFTP) . Carrier will be responsible for securing their SFTP site, and also making sure these files are encrypted at rest.
Operations	Enrollment	45185	Update on CH the new "Issuer Subscriber Id" and "issuer Member Id" That is, the migration on the HN side changes these issuer fields and CH needs to be updated to get these new values.
Operations	Enrollment	45186	Update CH to point to a new PayNow URL. The SAML interface will still be used, but HN is using a new payment vendor.
Operations	Enrollment	45187	Migration is for both HIOS 67138 and 99110
Operations	Enrollment	45188	Schedule is release independent. Start connectivity testing in mid-May (ping, send/receive 834, decrypt) Start basic functionality testing on current CH production release in June. Complete full functional testing with release 17.9 functionality with other carriers durnig normal integration testing.
Operations	Enrollment	45445	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall exchange files with the Carrier via Secure File Transfer Protocol (SFTP). The Carrier will be responsible for securing their SFTP site, and also ensuring these files are encrypted at rest.
Operations	General Requirement		
Operations	General Requirement	37924	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System will provide an operations capability to exchange electronic files with DHCS securely.
Operations	General Requirement	37925	DHCS must provide a single SFTP location for receiving files from California Healthcare Eligibility, Enrollment and Retention System (CalHEERS). Location must be ready 30 days before CR capability goes to production.
Operations	General Requirement	38663	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System will provide an operations capability to exchange electronic files with CC securely.
Operations	General Requirement	38664	This is an assumption not a req. Zaid 20161018
Operations	General Requirement	38665	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) system will contain a system folder that contains all the files that will be sent to CC. This folder will be scanned every 60 minutes and all files will be sent to CC and then archived.
Operations	General Requirement	38666	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall send the files via Secured File Transfer Protocol (SFTP)
Operations	General Requirement	38667	All files sent to CC will be archived and stored encrypted on another California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) folder location accessable by State Staff, and automatically removed after 7 days.
Operations	General Requirement	38668	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System will provide the capability for California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) staff to use an SFTP client (like FileZilla) to place files in the outbound system folder to CC.
Operations	General Requirement	38669	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System will provide the capability for files uploaded by OBIEE to be directed to alternate folders on the Covered CA SFTP by directory and naming convention.
Operations	General Requirement	38670	All the California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) CC system reports must be sent to the outbound system folder.
Operations	General Requirement	38671	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System will provide the capability to transfer the (monthly) reports that are part of the PMPM Invoice (CaINOD22) billing process to the Covered CA SFTP.
Operations	General Requirement	38875	The system shall be capable to effectuate multiple cases within a single batch job.
Operations	General Requirement	38876	The system batch jobs shall offer a provision to process at the transaction level.

Appendix A-4 - SOW Exhibit A - System Requirements Specification
(Extracted from CalHEERS RTM)

Category	Sub Category	Req ID	Requirement
Operations	General Requirement	38877	The System Batch shall be capable of dealing with the timeshift cases submitted, and move them independently through the process aligned with their testing cycle.
Operations	General Requirement	40446	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall configure a new FTB database on Exadata on-premise hardware non-prod and prod with required setup to store entire FTB data file on on-premise FTB database
Operations	General Requirement	40447	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall configure a new database link between HBX and FTB on-premise databases non-prod and prod with required setup to access California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) non-customers data using database link
Operations	General Requirement	40452	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall maintain same level of table security controls on the new FTB on-premise database
Operations	General Requirement	41339	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall allow the auto-enrollment functionality to be configurable on/off.
Operations	General Requirement	41473	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) to update routing of all transactions for Placer, Contra Costa, and Yolo counties to CalSAWS consortia.
Operations	General Requirement	42825	If the Form 1095-A Health Insurance Marketplace Statement is being redistributed due to a correction, the form will clearly indicate that it's a 'corrected' or 'void' version of the original form.
Operations	General Requirement	44183	The Vendor shall document, within the O&M Manual, a Configuration Management section that addresses the following configuration categories: 1. California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) Solution Software and Hardware - Commercial software, third party software, custom software, and hardware acquired through the SI contract for the California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) solution, as defined within the contract, DEDs and deliverables. 2. Project Documents - Any document formally approved and requiring any form of change management will be managed by configuration management and recorded in the software configuration management tool. This includes documents such as deliverables, work products, testing documents, design artifacts, and build artifacts. 3. Requirements - Conditions or requirements that must be met or possessed by the California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) solution or system components to satisfy the contract, standards, specifications, or other formally imposed documents. 4. Business Rule-Based Data - Rules and associated data that are defined and determined by Project Sponsor and Program Partner staff and maintained in the application. For example: Eligibility and enrollment business rules.
Operations	General Requirement	44191	Vendor shall be responsible for the structure, planning, development, and implementation of all change requests incorporated within a Release.
Operations	General Requirement	44238	The Network design shall contain redundancy of all Vendor Equipment and Network components. The Vendor shall configure all Network Equipment to automatically failover to other Vendor provided Equipment when an outage occurs.
Operations	General Requirement	44239	The Vendor shall utilize name resolution instead of hard coded IP addresses where possible.
Operations	General Requirement	44273	The Vendor shall be responsible for making application programming changes to the System required to support an upgrade to a Third-Party Software component.
Operations	General Requirement	44314	The Vendor shall use the Capability Maturity Model Integration (CMMI) as developed by the Software Engineering Institute (SEI) of Carnegie-Mellon University as the standard, as amended or modified, for the quality of the information System and data processing organization of the Vendor.
Operations	General Requirement	44315	The Vendor shall submit to the State for approval, the CMMI methodology to be used for performing System modifications and maintenance activities.
Operations	General Requirement	44316	The Vendor shall assess and verify from an independent third party that the Vendor is performing at CMMI Level 2 or higher within 18 months of the operations start date.
Operations	General Requirement	44317	One (1) year following the initial assessment, if at a Level 2, The Vendor shall obtain a new independent assessment that shall show at least a CMMI Level 3 and this level shall be maintained through the life of the Contract. The specific rating shall be applicable at the organizational/business unit level that shall be providing the services.
Operations	General Requirement	44318	The Vendor shall demonstrate the CMMI level 3 or higher by an independent assessment and provide supporting documentation to the Exchange every two years. Starting in calendar year 2017, this assessment will include both CMMI for Development (CMMI-DEV) and CMMI for Services (CMMI-SVC) process areas as per the CMMI standards.
Operations	General Requirement	44320	The Vendor shall be responsible to advise Exchange of the impact of any Software upgrade to the operations of the System and/or interface partners ninety (90) calendar days prior to upgrading the Software.
Operations	General Requirement	45114	All files sent to DHCS will be archived and stored encrypted on another folder location accessible by State Staff, and removed after 30 days.
Operations	General Requirement	45115	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System will provide the capability for state staff to use an SFTP client (like FileZilla) to place files in the outbound system folder to DHCS.
Operations	General Requirement	45116	All the California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) DHCS system reports must be sent to the outbound system folder.
Operations	General Requirement	45117	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) system will contain a system folder that contains all the files that will be sent to DHCS. This folder will be scanned every 60 minutes and all files will be sent to DHCS and archived.
Operations	General Requirement	45118	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall send the files via Secured File Transfer Protocol (SFTP) .
Operations	General Requirement	45789	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall update routing of all transactions for Santa Clara, Tulare and Contra Costa counties to CalSAWS consortia.
Operations	General Requirement	45802	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall update routing of all transactions for Orange, Santa Barbara and Ventura counties to CalSAWS consortia.
Operations	General Requirement	46097	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall update routing of all transactions for San Diego, San Mateo, Santa Cruz and Solano counties to CalSAWS consortia.
Operations	General Requirement	46123	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall update routing of all transactions for Sacramento, San Luis Obispo and San Francisco counties to CalSAWS consortia.
Operations	General Requirement	46135	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) to bring down CalWIN VLP pollers at the beginning of cutover phase on 10/26/2023 for Wave 6.
Operations	General Requirement	47058	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall update routing of all transactions for San Diego, San Mateo, Santa Cruz and Solano counties to CalSAWS consortia.
Operations	General Requirement	47583	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall update routing of all transactions for Alameda, Fresno and Sonoma counties to CalSAWS consortia.
Operations	Maintain Operational Data		
Operations	Maintain Operational Data	44184	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall provide an operational new VM environment to run the batch for Ops Copy in the PDC segmented from production.

Category	Sub Category	Req ID	Requirement
Operations	Maintain Operational Data	44185	The Contractor shall install a batch execution application software stack in the PDC OpsCopy environment.
Operations	Maintain Operational Data	44186	The Contractor shall configure the appropriate RBAC controls (for the new Ops Copy app tier) for the developers needing to access this (and not directly in production).
Operations	Maintain Operational Data	44187	The Contractor shall maintain and perform the batch deployments to new batch server for Ops Copy (in addition to the batch servers in the other environments in the environment streams that exist).
Operations	Notices		
Operations	Notices	40022	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall clearly indicate on the form if the Form 1095-A Health Insurance Marketplace Statement is being redistributed due to a correction ('Corrected'), or when the original form is no longer valid ('Void').
Operations	Outreach		
Operations	Outreach	38702	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) system will print a barcode that contains the Case ID on the first page of the notice and any form that is mailed to a consumer.
Operations	Outreach	38703	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) system will scan the barcode on every piece of inbound mail.
Operations	Outreach	38704	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) system will have the functionality to automatically link returned mail to the correct case based on the barcode.
Operations	Outreach	38705	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) system will have the functionality to automatically flag a mailing address as undeliverable on a case in California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) and in the Data Warehouse.
Operations	Outreach	38706	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) system will have the functionality to manually add and remove a flag that a mailing address is undeliverable on a case.
Operations	Outreach	38707	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) system will update the Outreach Template Report to include cases that have the "Undeliverable Flag" and add an indicator in the report to show which consumers have this flag.
Operations	Outreach	38708	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) system will create a BPM task for each piece of returned mail and assign the task to the correct queue.
Operations	Outreach	38709	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) system will remove the flag from the consumer's address when the primary mailing address is updated.
Operations	Outreach	38924	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) print vendor will scan only the front of the envelope and the front of the first page of the contents of the notice for all pieces of undeliverable mail.
Org Change Management			
Org Change Management	General Requirement		
Org Change Management	General Requirement	43441	The Vendor shall provide Organizational Change Management to prepare the following California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) user groups for implementation: County, MRMIB, and DHCS.
Org Change Management	General Requirement	43442	The Vendor shall conduct facilitation of meetings prior to System Implementation with appropriate Exchange, County, MRMIB and DHCS staff to determine the new policies and procedures that will be required once the System is implemented.
Org Change Management	General Requirement	43443	The Vendor shall lead the effort to document the new business processes.
Org Change Management	General Requirement	43444	The Vendor and the California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) staff shall review existing processes and procedures
Org Change Management	General Requirement	43445	The Vendor shall conduct interviews and studies with a sampling of California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) staff staff within its respective organization. Based on these interviews, studies and decisions made by the California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) staff, the Vendor will produce Change Readiness Plan which will describe in detail the process changes affecting the way staff will perform their jobs utilizing the new System.
Org Change Management	General Requirement	43446	The Change Readiness Plan the steps the person in the role will complete once they begin utilizing the new System along with the steps that the person will stop completing once they begin utilizing the new System.
Org Change Management	General Requirement	43447	The Vendor shall plan for, develop and conduct Organizational Change Management training for all appropriate staff as determined by the California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) Project Director.
Performance			
Performance	Eligibility Determination		
Performance	Eligibility Determination	40787	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall review the performance of transaction processing.
Performance	Eligibility Determination	40788	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall review the performance of Realtime EDR and VLP transactions for CalSAWS system.
Performance	Eligibility Determination	40789	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall review the performance of Realtime EDR and VLP transactions for CalWIN system.
Performance	Eligibility Determination	40790	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall review the performance of Batch EDR transactions for CalSAWS system.
Performance	Eligibility Determination	40791	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall review the performance of Batch EDR transactions for CalWIN system.
Performance	Eligibility Determination	41120	CALHEERS shall ensure that the SAWS real time transaction processing will not be impacted negatively by this change.
Performance	Eligibility Determination	45885	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall perform Integration performance testing with CMS for (RJ138) VCI service.
Performance	Eligibility Determination	45907	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall perform Integration performance testing with CMS for RJ3 SSA Service.
Performance	Eligibility Determination	46391	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall perform Integration performance testing for (RJ09) IFSV service.
Performance	General Requirement		
Performance	General Requirement	41474	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall execute performance testing for CalWIN to CalSAWS migration.

Category	Sub Category	Req ID	Requirement
Performance	General Requirement	41475	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall execute performance of Realtime EDR and VLP transactions for CalSAWS system.
Performance	General Requirement	41476	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall execute performance of Realtime EDR and VLP transactions for CalWIN system.
Performance	General Requirement	41477	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall execute performance of Batch EDR transactions for CalSAWS system.
Performance	General Requirement	41478	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall execute performance of Batch EDR transactions for CalWIN system.
Performance	General Requirement	45261	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall include Performance Integration testing for this CR.
Performance	General Requirement	45690	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) system shall encrypt vendor/partner supplied files for batch processing
Performance	General Requirement	45691	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) system shall encrypt instance (container) image files under the hypervisor
Performance	General Requirement	45692	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) system shall encrypt data transfer request via SSL
Performance	General Requirement	45693	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) system shall be allow client to decrypted data using certificates
Performance	General Requirement	45790	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall execute the performance of transaction processing.
Performance	General Requirement	45791	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall execute the performance of Realtime EDR and VLP transactions for CalSAWS system.
Performance	General Requirement	45792	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall execute the performance of Realtime EDR and VLP transactions for CalWIN system.
Performance	General Requirement	45793	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall execute the performance of Batch EDR transactions for CalSAWS system.
Performance	General Requirement	45794	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall execute the performance of Batch EDR transactions for CalWIN system.
Performance	General Requirement	45803	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall execute the performance of transaction processing.
Performance	General Requirement	45804	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall execute the performance of Realtime EDR and VLP transactions for CalSAWS system.
Performance	General Requirement	45805	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall execute the performance of Realtime EDR and VLP transactions for CalWIN system.
Performance	General Requirement	45806	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall execute the performance of Batch EDR transactions for CalSAWS system.
Performance	General Requirement	45807	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall execute the performance of Batch EDR transactions for CalWIN system.
Performance	General Requirement	46098	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall execute the performance of transaction processing.
Performance	General Requirement	46099	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall execute the performance of Realtime EDR and VLP transactions for CalSAWS system.
Performance	General Requirement	46100	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall execute the performance of Realtime EDR and VLP transactions for CalWIN system.
Performance	General Requirement	46101	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall execute the performance of Batch EDR transactions for CalSAWS system.
Performance	General Requirement	46102	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall execute the performance of Batch EDR transactions for CalWIN system.
Performance	General Requirement	46124	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall execute the performance of transaction processing.
Performance	General Requirement	46125	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall execute the performance of Realtime EDR and VLP transactions for CalSAWS system.
Performance	General Requirement	46126	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall execute the performance of Realtime EDR and VLP transactions for CalWIN system.
Performance	General Requirement	46127	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall execute the performance of Batch EDR transactions for CalSAWS system.
Performance	General Requirement	46128	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall execute the performance of Batch EDR transactions for CalWIN system.
Performance	General Requirement	47059	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall execute the performance of transaction processing.
Performance	General Requirement	47060	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall execute the performance of Realtime EDR and VLP transactions for CalSAWS system.
Performance	General Requirement	47061	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall execute the performance of Realtime EDR and VLP transactions for CalWIN system.
Performance	General Requirement	47062	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall execute the performance of Batch EDR transactions for CalSAWS system.
Performance	General Requirement	47063	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall execute the performance of Batch EDR transactions for CalWIN system.
Performance	General Requirement	47584	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall execute the performance of transaction processing.
Performance	General Requirement	47585	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall execute the performance of Realtime EDR and VLP transactions for CalSAWS system.
Performance	General Requirement	47586	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall execute the performance of Realtime EDR and VLP transactions for CalWIN system.
Performance	General Requirement	47587	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall execute the performance of Batch EDR transactions for CalSAWS system.
Performance	General Requirement	47588	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall execute the performance of Batch EDR transactions for CalWIN system.
Performance	Non-Functional Requirement		
Performance	Non-Functional Requirement	46907	Performance Testing for CR 180738
Performance	Non-Functional Requirement	46908	Performance Testing for CR 185084
Performance	Non-Functional Requirement	46909	Performance Testing for CR 195947
Performance	Non-Functional Requirement	46910	Performance Testing for CR 200352

Category	Sub Category	Req ID	Requirement
Performance	Non-Functional Requirement	46911	Performance Testing for CR 200353
Performance	Non-Functional Requirement	46912	Performance Testing for CR 213539
Performance	Non-Functional Requirement	46913	Performance Testing for CR 216356
Performance	Non-Functional Requirement	46914	Performance Testing for CR 226625
Performance	Non-Functional Requirement	46915	Performance Testing for CR 239636
Performance	Non-Functional Requirement	46916	Performance Testing for CR 247479
Performance	Non-Functional Requirement	46917	Performance Testing for CR 248890
Performance	Non-Functional Requirement	46918	Performance Testing for CR 185068
Performance	Non-Functional Requirement	47521	Performance Testing for CR 247898
Performance	Non-Functional Requirement	47522	Performance Testing for CR 247110
Performance	Non-Functional Requirement	47523	Performance Testing for CR 250132
Performance	Non-Functional Requirement	47524	Performance Testing for CR 253665
Performance	Non-Functional Requirement	47526	Performance Testing for CR 186319
Performance	Non-Functional Requirement	47527	Performance Testing for CR 251909
Performance	Non-Functional Requirement	47866	Performance Testing for CR 185143
Performance	Non-Functional Requirement	47867	Performance Testing for CR 216695
Performance	Non-Functional Requirement	47868	Performance Testing for CR 218714
Performance	Non-Functional Requirement	47869	Performance Testing for CR 219978
Performance	Non-Functional Requirement	47870	Performance Testing for CR 228956
Performance	Non-Functional Requirement	47871	Performance Testing for CR 228977
Performance	Non-Functional Requirement	47872	Performance Testing for CR 240417
Performance	Non-Functional Requirement	47873	Performance Testing for CR 241140
Performance	Non-Functional Requirement	47875	Performance Testing for CR 262404
Performance	Non-Functional Requirement	47876	Performance Testing for CR 213355
Performance	Non-Functional Requirement	48378	Performance Testing for CR 165890
Performance	Non-Functional Requirement	48379	Performance Testing for CR 173678
Performance	Non-Functional Requirement	48380	Performance Testing for CR 178286
Performance	Non-Functional Requirement	48381	Performance Testing for CR 203445

Category	Sub Category	Req ID	Requirement
Performance	Non-Functional Requirement	48382	Performance Testing for CR 214183
Performance	Non-Functional Requirement	48383	Performance Testing for CR 224268
Performance	Non-Functional Requirement	48384	Performance Testing for CR 228979
Performance	Non-Functional Requirement	48385	Performance Testing for CR 231622
Performance	Non-Functional Requirement	48386	Performance Testing for CR 232582
Performance	Non-Functional Requirement	48387	Performance Testing for CR 243176
Performance	Non-Functional Requirement	48388	Performance Testing for CR 243177
Performance	Non-Functional Requirement	48389	Performance Testing for CR 248898
Performance	Non-Functional Requirement	48390	Performance Testing for CR 253360
Performance	Non-Functional Requirement	48391	Performance Testing for CR 254732
Performance	Non-Functional Requirement	48392	Performance Testing for CR 255205
Performance	Non-Functional Requirement	48604	Performance Testing for CR 61104
Performance	Non-Functional Requirement	48605	Performance Testing for CR 173135
Performance	Non-Functional Requirement	48606	Performance Testing for CR 206195
Performance	Non-Functional Requirement	48607	Performance Testing for CR 227922
Performance	Non-Functional Requirement	48608	Performance Testing for CR 228969
Performance	Non-Functional Requirement	48609	Performance Testing for CR 228980
Performance	Non-Functional Requirement	48610	Performance Testing for CR 229850
Performance	Non-Functional Requirement	48611	Performance Testing for CR 242023
Performance	Non-Functional Requirement	48612	Performance Testing for CR 248899
Performance	Non-Functional Requirement	48613	Performance Testing for CR 250042
Performance	Non-Functional Requirement	48614	Performance Testing for CR 256142
Performance	Non-Functional Requirement	48615	Performance Testing for CR 257891
Performance	Non-Functional Requirement	48616	Performance Testing for CR 258400
Performance	Non-Functional Requirement	48617	Performance Testing for CR 261916
Performance	Non-Functional Requirement	48618	Performance Testing for CR 262775
Performance	Non-Functional Requirement	48619	Performance Testing for CR 271421
Performance	Non-Functional Requirement	48948	Performance Testing for CR 282633

Category	Sub Category	Req ID	Requirement
Performance	Non-Functional Requirement	48950	Performance Testing for CR 228982
Performance	Non-Functional Requirement	48951	Performance Testing for CR 266494
Performance	Non-Functional Requirement	48953	Performance Testing for CR 285944
Performance	Non-Functional Requirement	49180	Performance Testing for CR 189273
Performance	Non-Functional Requirement	49184	Performance Testing for CR 220303
Performance	Non-Functional Requirement	49186	Performance Testing for CR 249764
Performance	Non-Functional Requirement	49188	Performance Testing for CR 250226
Performance	Non-Functional Requirement	49190	Performance Testing for CR 251910
Performance	Non-Functional Requirement	49192	Performance Testing for CR 252575
Performance	Non-Functional Requirement	49194	Performance Testing for CR 252582
Performance	Non-Functional Requirement	49196	Performance Testing for CR 255968
Performance	Non-Functional Requirement	49198	Performance Testing for CR 257849
Performance	Non-Functional Requirement	49200	Performance Testing for CR 262000
Performance	Non-Functional Requirement	49202	Performance Testing for CR 266495
Performance	Non-Functional Requirement	49204	Performance Testing for CR 272413
Performance	Non-Functional Requirement	49206	Performance Testing for CR 274025
Performance	Non-Functional Requirement	49208	Performance Testing for CR 274416
Performance	Non-Functional Requirement	49210	Performance Testing for CR 278590
Performance	Non-Functional Requirement	49212	Performance Testing for CR 280659
Performance	Non-Functional Requirement	49214	Performance Testing for CR 282926
Performance	Non-Functional Requirement	49216	Performance Testing for CR 285589
Performance	Non-Functional Requirement	49218	Performance Testing for CR 287405
Performance	Non-Functional Requirement	49665	Performance Testing for CR 280660
Performance	Non-Functional Requirement	49667	Performance Testing for CR 114946
Performance	Non-Functional Requirement	49669	Performance Testing for CR 216717
Performance	Non-Functional Requirement	49671	Performance Testing for CR 233034
Performance	Non-Functional Requirement	49673	Performance Testing for CR 252583
Performance	Non-Functional Requirement	49675	Performance Testing for CR 252587

Category	Sub Category	Req ID	Requirement
Performance	Non-Functional Requirement	49677	Performance Testing for CR 252593
Performance	Non-Functional Requirement	49679	Performance Testing for CR 253341
Performance	Non-Functional Requirement	49681	Performance Testing for CR 253663
Performance	Non-Functional Requirement	49683	Performance Testing for CR 257485
Performance	Non-Functional Requirement	49685	Performance Testing for CR 258401
Performance	Non-Functional Requirement	49686	Performance Testing for CR 199832
Performance	Non-Functional Requirement	49687	Performance Testing for CR 272295
Performance	Non-Functional Requirement	49688	Performance Testing for CR 274413
Performance	Non-Functional Requirement	49689	Performance Testing for CR 278587
Performance	Non-Functional Requirement	49690	Performance Testing for CR 283907
Performance	Non-Functional Requirement	49691	Performance Testing for CR 287522
Performance	Non-Functional Requirement	49692	Performance Testing for CR 287884
Performance	Notices		
Performance	Notices	42801	CalHEERS shall only create one file type to for all notices that are store in the Electronic Content Management System with the implementation of this CR. The file type shall be stored as PDFs. Currently the system creates two file types tied to all notices that are stored within the Electronic Content Management System. This process doubles the amount of disk space used for each notices; which impacts the system current storage space.
Performance	Notices	42880	CalHEERS shall delete the existing duplicate web-viewable files for all notices that are store in the Electronic Content Management System with the implementation of this CR.
Performance	Provider/Plan Directory		
Performance	Provider/Plan Directory	43404	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall provide provider directories for each plan selected for comparison and to search for a specific doctor or facility.
Plan Management			
Plan Management	Certify QHP		
Plan Management	Certify QHP	39694	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall provide the functionality to utilize data provided by the Exchange for determining quality indicators and methods used in plan quality rating.
Plan Management	Certify QHP	39736	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall collect data and sources and use Exchange determined rules and criteria for determining the quality rating. The Vendor will recommend data and sources.
Plan Management	Certify QHP	39739	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall provide the functionality to list and maintain Qualified Health Plan (QHP) and qualified stand-alone dental plan criteria for defined time periods.
Plan Management	Certify QHP	44539	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall provide the functionality to list Certified QHPs, qualified stand-alone dental plans, and MCAP, CHIP, and BHP (if enacted) plans on the Web Portal.
Plan Management	Certify QHP	44540	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall provide the functionality to receive health plan information for Exchange QHPs, qualified stand-alone dental plans, and MCAP, CHIP, and BHP (if enacted) plans.
Plan Management	Certify QHP	44558	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall provide the functionality to collect and display for each QHP Issuer the following information: claims payment policies and practices, financial disclosures, enrollment data, disenrollment data, number of claims denied, rating practices, information on cost sharing and payments with respect to any out-of-network coverage, and information on enrollee rights under Title I of the ACA.
Plan Management	Certify Recertify Decertify QHP		
Plan Management	Certify Recertify Decertify QHP	41394	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall provide the functionality for role based Issuer access to their specific account and enrollee data according to the California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) security and privacy framework.
Plan Management	Certify Recertify Decertify QHP	41558	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall allow the user to search for the QHP and QDP plans with the following search criteria elements: Plan Number, Issuer, Metal Level, Plan Status (Certified, Loaded, Incomplete, Decertified), Plan Verification Status (Yes, No), Enrollment Availability (Available, Not Available), Plan Year.
Plan Management	Certify Recertify Decertify QHP	41559	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall display following details upon successful search: Plan Number, Plan Name, Issuer Name, Metal Level, Enrollment Availability, Last modified, Plan Status, Plan Verification Status

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(Extracted from CalHEERS RTM)

Category	Sub Category	Req ID	Requirement
Plan Management	Certify Recertify Decertify QHP	41560	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall allow the user to view Plan Details, Plan Benefits and Plan Rates once the QHP and/or QDP Plan has been uploaded.
Plan Management	Certify Recertify Decertify QHP	41561	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall allow the user to view the following Plan Details: Issuer Name, Plan Name, Plan Market, Plan Level, EHB Factor, HSA Plan (Yes/No), Plan Type, Standardize Plan Design, Plan Start Date, Plan End Date, Provider Network, Provider Network URL, Formulary URL, Formulary ID, Plan Brochure URL, Plan SBC URL, Service Area ID, Certification Status, Enrollment Availability.
Plan Management	Certify Recertify Decertify QHP	41562	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall allow the user to download Drug List applicable for the FORMULARY ID (CAFXXX).
Plan Management	Certify Recertify Decertify QHP	41563	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall allow the user to download Service Area details (CASXXX) for the Health or Dental Plan
Plan Management	Certify Recertify Decertify QHP	41564	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall allow the user to view and download the Plan Benefits and/or Plan Brochure for the Health and Dental plans from the Plan Benefits page.
Plan Management	Certify Recertify Decertify QHP	41565	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall allow the user to view and download Plan Rates for the Health and Dental plans from the Plan Rates page.
Plan Management	Certify Recertify Decertify QHP	41567	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall allow the user to update Plan Certification Status and Enrollment Availability.
Plan Management	Certify Recertify Decertify QHP	41573	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall allow the California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) Issuer Admin to bulk update Enrollment Availability and Certification Status.
Plan Management	Certify Recertify Decertify QHP	41574	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall display Change Transaction history indicating the changes made to the Certification Status.
Plan Management	Certify Recertify Decertify QHP	41575	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall allow the user to Verify a Plan(s) and shall capture the following during the Plan verification process: Statement, Attestation, First Name, Last Name, eSignature, and Date of Verification.
Plan Management	Certify Recertify Decertify QHP	41576	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall allow the Issuer Rep to bulk update Plan Verification Status.
Plan Management	Certify Recertify Decertify QHP	41577	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall allow the California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) Issuer Admin to view the Change log history indicating the updates to Plan Status, Enrollment Availability and Plan Verification Status.
Plan Management	Certify Recertify Decertify QHP	44544	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall provide the functionality to manually enter plan data if necessary.
Plan Management	Certify Recertify Decertify QHP	44550	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall provide the functionality to restrict any changes to plan and rate data for QHPs.
Plan Management	Certify Recertify Decertify QHP	44551	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall provide the functionality for authorized Issuer and Exchange users to update administrative data as needed, and add additional data and notes where appropriate. Issuer Users will not be able to update plan or rate data.
Plan Management	Certify Recertify Decertify QHP	44595	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall provide the functionality to present the Issuer home page upon successful Issuer login.
Plan Management	Certify Recertify Decertify QHP	44596	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall allow authorized Issuer users view and update capabilities as specified by the Exchange.
Plan Management	Certify Recertify Decertify QHP	44597	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall provide the functionality to capture the electronic signature for approval of data loaded into California Healthcare Eligibility, Enrollment and Retention System (CalHEERS).
Plan Management	Enrollment		
Plan Management	Enrollment	38313	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall provide support for the testing of the functional test scenarios provided with the new EDI vendor.
Plan Management	Enrollment	38409	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall allow for the addition of an issuer.
Plan Management	Enrollment	38410	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall provide the functionality to extend or remove the WSDL service to existing or new issuers.
Plan Management	Enrollment	38633	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) team shall perform integration test with Blue Shield. Integration test shall ensure that Blue Shield is able to accept, process and provide response to California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) transactions
Plan Management	Enrollment	38679	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) team shall perform integration test with HealthNET. Integration test shall ensure that HealthNET is able to accept, process and provide response to California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) transactions (including PayNow SAML and Reconciliation Processes).
Plan Management	Enrollment	38842	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) system shall update the crosswalk for Catastrophic plans enrollment for passive renewals.
Plan Management	Enrollment	38843	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) system shall pick up the aged out Catastrophic plans in the last batch sweep.
Plan Management	Enrollment	38912	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) team shall perform Carrier Integration Testing with Premier. Integration Testing shall ensure that Premier is able to accept, process and provide responses to California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) transactions through SFTP. Testing will include PayNow SAML and Reconciliation Processes.
Plan Management	Enrollment	43155	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall provide support for the testing of the functional test scenarios provided with the new EDI vendor.
Plan Management	Enrollment	43170	The System must provide the ability for a user to view Enrollment transactions on the Transaction History page.
Plan Management	Enrollment	43171	The System must provide the ability for a user to view the Plan Selection transaction on the Transaction History page.
Plan Management	Enrollment	43172	The System must provide the ability for a user to search based on Enrollment transaction type on the Transaction History page.

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(Extracted from CalHEERS RTM)

Category	Sub Category	Req ID	Requirement
Plan Management	Enrollment	43173	The System must provide the ability for a user to search for enrollment transactions by date range.
Plan Management	Enrollment	43174	The System must provide the ability for a user to view active enrollment coverage segments with applied APTC on the Current Enrollment page.
Plan Management	Enrollment	43175	The System must provide the ability for a user to view historical enrollment coverage segments with applied APTC on the Enrollment History page.
Plan Management	Enrollment	43176	The System must provide the ability for a user to view the latest APTC, CSR, net Premium and gross Premium Amounts on the Current Enrollment page and the Enrollment History page.
Plan Management	Enrollment	43177	The System must provide the ability for a user to view the Carrier Policy # associated with a Enrollment on the Current Enrollment page and the Enrollment History page.
Plan Management	Enrollment	43178	The System must provide the ability for a SCR type user to view APTC, CSR, net Premium and gross Premium Amounts applicable to every Enrollment event.
Plan Management	Enrollment	43179	The System must provide the ability for California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) assigned Policy ID/Enrollment ID to be mapped in L2000 REF*1L segment on all types of Outbound 834 transactions (Initial Enrollment/ Maintenance/ Termination/ Cancellation).
Plan Management	Enrollment	43180	The System must provide the ability for California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) assigned Policy ID/Enrollment ID to be mapped in L2300 REF*1L segment on all types of Outbound 834 transactions (Initial Enrollment/ Maintenance/ Termination/ Cancellation).
Plan Management	Enrollment	43181	The System must provide the ability for accepting the California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) assigned Policy ID/Enrollment ID returned by Carriers on all types of Inbound 834 transactions (Effectuation/ Cancellation/ Termination).
Plan Management	Enrollment	43182	The System shall use the California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) assigned Policy ID/Enrollment ID returned by Carriers on Inbound 834 transactions to identify the corresponding Enrollment.
Plan Management	Enrollment	43183	The System shall continue to use Subscriber ID, Plan ID & benefit year elements if the California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) assigned Policy ID/Enrollment ID is not returned by Carriers on Inbound 834 transactions to identify the corresponding Enrollment.
Plan Management	Enrollment	44528	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall perform interface testing with Oscar to ensure that Oscar is able to accept, process, and provide response to EDI transactions including 834, TA1 and 999.
Plan Management	General Requirement		
Plan Management	General Requirement	38404	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall have the functionality to suppress the display of provider data for an individual record by network.
Plan Management	General Requirement	38405	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall use the provider language data fields to display language on the portal.
Plan Management	General Requirement	39273	The equation used to prorate the APTC will be same equation used to prorate the monthly premium amount: Partial month premium = Full month APTC X (# of days of coverage/# of days in month)
Plan Management	General Requirement	42910	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall add the following zip code to Anthem Service area ID CAS018 93243
Plan Management	General Requirement	42911	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall add the following zip codes to Anthem Service area ID CAS017 90623, 90630, 90631, 91709
Plan Management	Interfaces		
Plan Management	Interfaces	41578	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) QHP Quoting module shall determine monthly premium at the member level for the Health plans available on the Individual Market.
Plan Management	Interfaces	41579	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) QHP Quoting module shall utilize the following criteria to determine PMPM (per member per month) premium: 1. QHP Quoting module shall determine Rating area based on the zip and county provided by the consumer in the application flow. 2. QHP Quoting module shall receive consumer's age as of the earliest coverage start date for the consumer.
Plan Management	Interfaces	41580	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) QHP Quoting Module shall sum PMPM premium for the individuals on the household to determine final monthly premium. When determining premium for a household with more than 3 children's, California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall cap the number of children to the three oldest children on the household.
Plan Management	Interfaces	41581	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall determine monthly premium at the member level for the QDP plans in the Individual Market.
Plan Management	Interfaces	41582	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) QDP Quoting module shall utilize the following criteria to determine PMPM (per member per month) premium: 1. QDP Quoting module shall determine Rating area based on the zip and county provided by the consumer in the application flow. 2. QDP Quoting module shall receive consumer's age as of the earliest coverage start date for the consumer.
Plan Management	Interfaces	41586	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) QDP Quoting Module shall sum PMPM premium for the individuals on the household to determine final monthly premium. When determining premium for a household with more than 3 children, California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall cap the number of children to the three oldest children on the household.
Plan Management	Interfaces	41587	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall determine benchmark premium for the household as the EHB premium of the second lowest cost silver plan in the applicable rating area.
Plan Management	Interfaces	41588	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall allow 1. Allow a Rep to serve as Issuer Rep & Enrollment Rep for an Issuer (HIOS ID 1). 2. Allow a Rep to serve for multiple HIOS IDs (HIOS ID1, HIOSID2, etc.) for the same Issuer
Plan Management	Issuer Profile Management		
Plan Management	Issuer Profile Management	41524	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall allow the user to register Issuer's Account with the following details: HIOS ID, Issuer Short Name, Company Name/Legal Name, NAIC Code/Group Code, FEIN #, and Issuer's Address.
Plan Management	Issuer Profile Management	41525	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall allow the user to update the Company Profile for the Issuer with the following details: Company Legal Name, Company Logo, Issuer State, Issuer Payment URL.

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(Extracted from CalHEERS RTM)

Category	Sub Category	Req ID	Requirement
Plan Management	Issuer Profile Management	41526	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall allow the user to update the Individual Market profile for the Issuer with the following details: Customer Service Phone, Customer Service Toll-Free Phone & Extension, Customer Service TTY, Customer Website Address (URL).
Plan Management	Issuer Profile Management	41527	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall allow the user to create an Issuer profile and establish their status as Certified in the system.
Plan Management	Issuer Profile Management	41528	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall capture Issuer Creation date as the date Issuer is created (Status updated to Certified) in the system.
Plan Management	Issuer Profile Management	41529	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall allow the user to search for an Issuer in the system by Issuer's Name
Plan Management	Issuer Profile Management	41530	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall display the following details upon successful search: Issuer Name, Issuer Creation Date, Last Updated
Plan Management	Issuer Profile Management	41531	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall allow the user to view and edit Issuer Details (Issuer Account Details, Company Profile, Individual Market Profile).
Plan Management	Issuer Profile Management	41532	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall display the Change Transaction History page with all the changes made to Issuer details.
Plan Management	Issuer Profile Management	41566	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall allow the user to view Plan URLs for Health and Dental plans: Health Plan: Provider Network URL, Formulary URL, Plan Brochure URL and SBC URL Dental Plan: Provider Network URL, Plan Brochure URL and SBC URL
Plan Management	Maintain Operational Data		
Plan Management	Maintain Operational Data	39956	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall provide the functionality for Issuers to view current and historical monthly enrollment information.
Plan Management	Monitor Compliance		
Plan Management	Monitor Compliance	39808	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall provide the functionality to receive and track individually identifiable complaints.
Plan Management	Monitor Compliance	39809	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall provide the functionality to document any resolution to individually identifiable complaints.
Plan Management	Monitor Compliance	39862	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall provide the functionality to update QHP, qualified stand-alone dental plans, MAGI Medi-Cal, MCAP, CHIP and BHP (if enacted) plan quality ratings and track historical ratings and time periods for these ratings (begin and end dates).
Plan Management	Plan and Benefit Assistance		
Plan Management	Plan and Benefit Assistance	41542	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall allow the user to complete Health and Dental Plan upload using plan upload templates.
Plan Management	Plan and Benefit Assistance	41543	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall allow the user to upload Network data using the NETWORK SERFF template.
Plan Management	Plan and Benefit Assistance	41544	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall allow the user to upload Service area data using the SERVICE_AREA SERFF template.
Plan Management	Plan and Benefit Assistance	41545	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall allow the user to upload Drug data using the PERSCRIPTION_DRUG SERFF template.
Plan Management	Plan and Benefit Assistance	41546	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall allow the user to upload Plan Benefits data using the PLAN&BENEFITS SERFF template.
Plan Management	Plan and Benefit Assistance	41547	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall allow the user to upload Rating data using the RATING SERFF template.
Plan Management	Plan and Benefit Assistance	41548	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall allow the user to bulk update FORMULARY_URL(s), NETWORK_URL(s), and BROCHURE URL(s).
Plan Management	Plan and Benefit Assistance	41549	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall allow bulk updating of the Formulary URL for an Issuer corresponding to the FORMULARY ID for the given benefit year.
Plan Management	Plan and Benefit Assistance	41550	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall allow bulk updating of the Network URL for an Issuer corresponding to the NETWORK ID for the given benefit year.
Plan Management	Plan and Benefit Assistance	41551	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall allow bulk updating of the Plan Brochure URL for a Plan for the given benefit year
Plan Management	Plan and Benefit Assistance	41552	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall allow bulk updating SBC/EOC Document for a Plan for the given benefit year.
Plan Management	Plan and Benefit Assistance	41553	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall allow the user to upload Crosswalk mapping details for passive renewals using the CROSSWALK SERFF template.
Plan Management	Plan and Benefit Assistance	41554	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall display Change Log Transaction history reflecting the successful and unsuccessful Crosswalk uploads.
Plan Management	Plan and Benefit Assistance	41555	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall allow the user to upload Plan Quality Rating for the Health Plans.

Category	Sub Category	Req ID	Requirement
Plan Management	Plan and Benefit Assistance	41556	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall display version history with details respective to every Quality rating upload performed by the user.
Plan Management	Plan and Benefit Assistance	41557	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall allow the user to update Zip, County & Rating area mapping.
Plan Management	Plan Assessment Fees		
Plan Management	Plan Assessment Fees	38234	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) system shall update the carrier invoice to reflect billing cycle changes
Plan Management	Premium Processing		
Plan Management	Premium Processing	38832	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) sytem shall estblish Pay Now connectivity with CA Dental Network.
Plan Management	Premium Processing	38896	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) sytem Pay Now URL for carrier Chinese will point to the vendor Instamed.
Plan Management	Premium Processing	38913	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) sytem Pay Now URL for carrier western Health will point to the new vendor.
Plan Management	Premium Processing	38970	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) system Pay Now URL for carrier Liberty dental will point to the new vendor.
Plan Management	Premium Processing	39130	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) sytem shall estblish Pay Now connectivity with Valley Health Plan.
Plan Management	Premium Processing	39619	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall establish Pay Now connectivity with Oscar.
Plan Management	Premium Processing	44517	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall establish and verify Pay Now connectivity using new URLs for Premier Access and Access Dental.
Plan Management	Provider/Plan Directory		
Plan Management	Provider/Plan Directory	38402	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall implement the Lexis Nexis ProviderPoint solution/product.
Plan Management	Provider/Plan Directory	38403	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall accept and process provider directory data monthly.
Plan Management	Provider/Plan Directory	43290	"The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) system shall add 1 new zip code. The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) system shall add zip code/county/region combination of 95610/Placer/3 effective for plan benefit year 2016. "
Plan Management	Rate Review		
Plan Management	Rate Review	40015	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall provide the functionality to display the enrollee's current premium on the comparison chart where new plans and new premiums are shown
PMO			
PMO	General Requirement		
PMO	General Requirement	44256	The Vendor shall establish, staff, and maintain a Project Management Office (PMO) which aligns with the OSI PMO structure and conforms to the OSI best practices for the development of large-scale IT Systems (http://www.bestpractices.osi.ca.gov/). The Vendor PMO shall be responsible for all required California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) Project Management functions, including the planning, scheduling, administering, controlling, tracking, and reporting of all Project activities during the Term of the Agreement.
PMO	General Requirement	44296	The Vendor PMO shall be responsible for documenting, disseminating, and maintaining formal administrative processes and procedures for the following areas at a minimum: A) Roll-on for all Vendor staff; B) California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) Project overviews and objectives; C) Project organization charts and roles and responsibilities; D) Project Processes, Procedures, Tools, Standards, and templates; E) Administrative items (e.g., email lists, time tracking and weekly status reporting); F) LAN, file, and web portal/SharePoint structures and key file locations; G) LAN, file, web portal/SharePoint access and remote access; H) Facility access, security, and evacuation; I) Staff Roll-offs, including deactivation of all Facility and computer access.
PMO	General Requirement	44311	The Vendor shall provide sufficient the tools to establish, maintain and make available to the California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) Project team, a Project Management Office (PMO) to guide California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) Project management during theD&I and O&M periods. Metrics from the tool will be used formanaging and monitoring the Project and for Project reporting in areas such as Issues, Risks, Deliverable status. The Vendor shall provide training on the tool to the California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) Project team.
Portal			
Portal	Alerts and Notices		
Portal	Alerts and Notices	46474	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall extend the existing Account Home page configuration to the Household Eligibility Results screen and update messaging for when plan selection or changes must be made to get the most beneficial coverage start date during the Renewal/Open Enrollment/Open Special Enrollment periods.
Portal	Alerts and Notices	46475	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall update the messaging on the Account Home page and the Household Eligibility results screen to display the first of the following month logic during Open Enrollment period when no QLE is selected.
Portal	Alerts and Notices	46476	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall update the messaging on the Account Home page and the Household Eligibility results screen to match the coverage start date logic during Open Special Enrollment period based on the QLE is selected on the application.
Portal	Alerts and Notices	46477	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall update the messaging on the Account Home page and the Household Eligibility results screen to match the coverage start date logic for cases staged for California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) Renewals based on the Enrollment Extension configurable date.
Portal	Alerts and Notices	47202	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall add and display messaging for the Family PACT user on the portal.

Category	Sub Category	Req ID	Requirement
Portal	Alerts and Notices	47216	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall display messaging to the Family PACT user after the Family PACT client has been determined eligible for the Family PACT program.
Portal	Alerts and Notices	47217	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall display messaging listing one or more of the below possible reasons as to why a client was determined ineligible for the Family PACT program after submitting an application: • Not a California resident • Total taxable family income above 200 percent of the federal poverty guidelines • Receives health insurance coverage for family planning services without barrier to access • Full scope Medi-Cal (does not have an unmet SOC) without barrier to access • Below the minimum age of 12
Portal	Alerts and Notices	47218	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall display messaging listing one or more of the below possible reasons as to why a client was determined ineligible for the Family PACT program after submitting a report a change (RAC)/recertification: • No longer a California resident • Total taxable family income is above 200 percent of the federal poverty guidelines • Receives other health insurance coverage for family planning services • Full scope Medi-Cal (does not have an unmet SOC) without barrier to access • Requesting discontinuance • No longer has a medical necessity (i.e., ability to get pregnant or cause a pregnancy) for family planning services
Portal	Alerts and Notices	47219	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall display error messaging to a Family PACT user when there is an internal exception to the California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) Family PACT system.
Portal	Alerts and Notices	47220	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall display Retroactive Eligibility messaging on the Family PACT Client's Dashboard.
Portal	Alerts and Notices	47221	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall display Retroactive Eligibility messaging on the Family PACT Client's Dashboard after intake application submission only for first time, eligible Family PACT clients that answered yes to the following question and had their HAP ID generated by California Healthcare Eligibility, Enrollment and Retention System (CalHEERS). • Have you had out-of-pocket expenses for family planning or reproductive health services in the past three months that could be covered by Family PACT?
Portal	Alerts and Notices	47222	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall display the Retroactive Eligibility messaging on the Family PACT Client's Dashboard for 60 days post initial intake application submission is determined eligible.
Portal	Alerts and Notices	47233	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall have messaging on the Family PACT Application homepage indicating an expiration date after which an unsubmitted Intake/Report a Change (RAC)/Recertification/Reapplication will be withdrawn.
Portal	Alerts and Notices	47268	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall add and display messaging for Family PACT Providers on the portal.
Portal	Alerts and Notices	47269	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall display messaging to the Family PACT provider within the 60 day recertification period.
Portal	Alerts and Notices	48502	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall update the language of the Medicare alert on the Consumer Account Home screen for better clarity so that consumer can take action timely.
Portal	Alerts and Notices	48684	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall display the account alerts on the Account Home page with the following priority when more than one alert is triggered to display: 1. APS new enrollment transition 2. S/L end 3. Consumer moving out of region Alert 4. Medicare Alert 5. Deceased Alert 6. S/L begin
Portal	Application Submission and Update		
Portal	Application Submission and Update	46350	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall update the Spanish translation for Financial Help section on the Individual Eligibility Details page with Page Id 7.0.1 (Page Name: ProgramEligibility)
Portal	Application Submission and Update	46351	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall update the English text for Financial Help section on the Individual Eligibility Details page with Page Id 7.0.1 (Page Name: ProgramEligibility)
Portal	Application Submission and Update	46352	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall display the program eligibility status such that when there are two sub-sections for any program and one of the sub-sections is not applicable the text displayed shall occupy the space in the sub-section on the right so that there is no white space. Applicable sections on Eligibility Details page with Page Id 7.0.1 (Page Name: ProgramEligibility): - Financial Help section (APTC, CAPS) - Time Section (ROP, Select a Plan) - Eligibility factors in Ineligible section
Portal	Application Submission and Update	46353	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall display eligibility factors for Financial Help in the ineligible section when the HHM is pending or eligible for MCAP on Individual Eligibility Details page with Page Id 7.0.1 (Page Name: ProgramEligibility)

Appendix A-4 - SOW Exhibit A - System Requirements Specification
(Extracted from CalHEERS RTM)

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Category	Sub Category	Req ID	Requirement
Portal	Application Submission and Update	46354	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall display eligibility factors for Financial Help in the ineligible section when the HHM is conditionally eligible or eligible for CCHIP on Individual Eligibility Details page with Page Id 7.0.1 (Page Name: ProgramEligibility)
Portal	Application Submission and Update	46355	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall display the eligibility factor stating - "Our records show this person may have died" when the household member is discontinued or denied for MCAP or CCHIP because admin fail deceased verification and when HUB returns MCAP or CCHIP member as deceased
Portal	Application Submission and Update	46356	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall remove the link to fact sheet for CCHIP program on Preview Coverage Options – Screening Results page
Portal	Application Submission and Update	46530	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall restrict admin users that do not have an 'AdminSensitiveInfo' entitlement from being able to edit contact information (home address, mailing address, email, or phone number) of a non-primary applicant that is flagged as sensitive on California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) Portal.
Portal	Application Submission and Update	46531	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall hide the 'Edit' contact information (home address, mailing address, email, or phone number) link of a non primary applicant that is flagged as sensitive from admin users that do not have an 'AdminSensitiveInfo' entitlement on the following California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) Portal screens: - 6.0R Address (Multi-Member HH State) - 14.0R Final Review: Individual Info - 4.0.1.9 Household Member Review - 6.3 Final Review: Individual Info
Portal	Application Submission and Update	46532	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall hide contact information (home address, mailing address, email, or phone number) data fields of a non-primary applicant that is flagged as sensitive from admin users that do not have an 'AdminSensitiveInfo' entitlement on the following California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) Portal screens: - 12.1R Individual Information Review Form - 4.0.2.4 Who Lives With Primary Contact - 4.0.1.5 Contact Info (Edit Household Member)
Portal	Application Submission and Update	46533	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall display contact information (home address, mailing address, email, or phone number) data fields in a read-only state for a non-primary applicant that is flagged as sensitive for admin users that do not have an 'AdminSensitiveInfo' entitlement on the following California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) Portal screens: - 56.04 Flexible Application - Household Members
Portal	Application Submission and Update	46534	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall display messaging to admin users on the Flex App in the Household and Contact Information section for a non-primary applicant that is flagged as sensitive to inform the admin user that the information should not be disclosed.
Portal	Application Submission and Update	46535	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall restrict all users from being able to modify the primary contact on the 4.0.2.2 Primary Contact screen during a Reapply application if the household includes a non-primary contact that is flagged as sensitive.
Portal	Application Submission and Update	46536	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall restrict all users from being able to remove the primary contact on the 4.0.1.9 HHM Review screen during a Reapply application if the household includes a non-primary contact that is flagged as sensitive.
Portal	Application Submission and Update	46537	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall hide previously sensitive contact information displayed on the Case Transaction History page from non-admin users when a person with previous sensitive contact information is modified to be the primary contact of their household.
Portal	Application Submission and Update	46538	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall hide sensitive contact information displayed in Application PDFs of previous applications for a household for a person with previous sensitive contact information that is modified to be the primary contact of their household.
Portal	Application Submission and Update	46539	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall perform a one-time data update activity to any primary contacts in California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) that are currently flagged as sensitive to update the flag so all primary contacts in California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) are not flagged as sensitive.
Portal	Application Submission and Update	46540	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall not persist the address updates in the database made by admin users without the 'AdminSensitiveInfo' entitlement for sensitive individuals during Reapply applications.
Portal	Application Submission and Update	47162	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall allow a Family PACT client to link an existing HAP ID to a client's account.
Portal	Application Submission and Update	47163	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall allow a Family PACT client to link an existing HAP ID to a client's account during the account creation process by inputting the below information that returns a full match: 1. HAP ID 2. Date of Birth (DOB)
Portal	Application Submission and Update	47164	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall allow a Family PACT client to link an existing HAP ID to a client's account during the account creation process by searching for an existing HAP ID using the below information that returns a full match: 1. First Name 2. Last Name 3. Date of Birth (DOB) 4. Sex 5. Zip Code
Portal	Application Submission and Update	47165	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall support both English and Spanish translation of the Family PACT application.

Appendix A-4 - SOW Exhibit A - System Requirements Specification
(Extracted from CalHEERS RTM)

Category	Sub Category	Req ID	Requirement
Portal	Application Submission and Update	47166	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall allow user to select English or Spanish version of the application and shall allow client to switch to any version during the Family PACT application process.
Portal	Application Submission and Update	47167	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall implement different Family PACT application modes for the Family PACT application.
Portal	Application Submission and Update	47168	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall allow the user to start an intake application if the client account is not actively linked to a HAP ID or the latest intake application associated to the account has been withdrawn.
Portal	Application Submission and Update	47169	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall allow the user to continue an intake application if the client account is associated to an intake application that has not been withdrawn.
Portal	Application Submission and Update	47170	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall allow the user to start/continue to Report a Change (RAC)once the Family PACT intake application or reapplication is submitted and client is determined eligible in the California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) Family PACT portal and is prior to the 60-day recertification window.
Portal	Application Submission and Update	47171	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall allow the user to start/continue Recertification effective 60 days from the Family PACT eligibility end date until the current eligibility end date has passed.
Portal	Application Submission and Update	47172	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall allow the user to start/continue to Reapply when consumer's current eligibility status is ineligible or discontinued.
Portal	Application Submission and Update	47173	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall implement a new application flow for Family PACT Program.
Portal	Application Submission and Update	47174	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall allow the user to move forward with the Family PACT application using "Next" button.
Portal	Application Submission and Update	47175	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall auto save user's Family PACT information upon the click of next button.
Portal	Application Submission and Update	47176	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall allow the user to Edit their saved Family PACT information during the application flow.
Portal	Application Submission and Update	47177	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall allow the user to move to the previous page in the Family PACT application using "Back" button.
Portal	Application Submission and Update	47178	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall allow user to Save and Exit the Family PACT application at any time during the application process.
Portal	Application Submission and Update	47179	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall allow the user to Cancel the Family PACT application submission at any time during the application process before submission.
Portal	Application Submission and Update	47180	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall display a Warning Message when the user cancels the Family PACT application.
Portal	Application Submission and Update	47181	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall allow the Family PACT user to review and edit prior to submitting, the Intake/RAC/Recertify/Reapply Family PACT application.
Portal	Application Submission and Update	47182	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall require the user to scroll through and sign the Family PACT application and the disclaimer before submitting the application.
Portal	Application Submission and Update	47183	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall save data entered within the Family PACT application if the user saves the application or moves to the next page.
Portal	Application Submission and Update	47184	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall only save the Family PACT application data from the start of the application to the previous page if a Family PACT user exits the application without completing the current page.
Portal	Application Submission and Update	47185	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall display the Family PACT application status as Pending if the user saves and exits the Family PACT intake application/report a change (RAC)/recertification/reapplication before submitting.
Portal	Application Submission and Update	47186	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall run a daily batch to withdraw a Family PACT Application if it has not been submitted for 30 days for Initial Applications, Report a Changes (RACs), Recertifications, and Reapplications.
Portal	Application Submission and Update	47187	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall reset the In-progress Family PACT Application withdrawal 30 day clock when an update to the Intake/RAC/Recertification/Reapplication is saved.
Portal	Application Submission and Update	47188	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall allow a user to begin an application to apply, report a change (RAC), recertify, or reapply for the Family PACT program based on the Family PACT client's current eligibility status.
Portal	Application Submission and Update	47189	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall allow one client per Family PACT application.
Portal	Application Submission and Update	47190	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall display previously submitted Family PACT application data on a report a change, recertification, or reapplication when the user starts the report a change, recertification, or reapplication.
Portal	Application Submission and Update	47191	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall require the Family PACT user to update/confirm the client's previously entered information during a report a change (RAC), recertification, or reapplication.
Portal	Application Submission and Update	47192	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall consider the application date as the date when the user signs and submits the Family PACT application.

Appendix A-4 - SOW Exhibit A - System Requirements Specification
(Extracted from CalHEERS RTM)

Category	Sub Category	Req ID	Requirement
Portal	Application Submission and Update	47193	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall report a total taxable monthly income as \$0 when income is not reported for a Family PACT client.
Portal	Application Submission and Update	47194	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall prevent a minor Family PACT applicant (age 17 and below) from adding family members and the family members' respective incomes.
Portal	Application Submission and Update	47195	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall prevent the Family PACT client from changing their date of birth (DOB) after initial application submission.
Portal	Application Submission and Update	47196	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall allow a Family PACT user to confirm address once validated by Smarty Streets validation service.
Portal	Application Submission and Update	47197	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall display previously saved Family PACT application data.
Portal	Application Submission and Update	47198	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall allow a Family PACT user to reapply for the Family PACT program.
Portal	Application Submission and Update	47199	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall allow a Family PACT user to reapply immediately for Family PACT after intake/report a change (RAC)/recertify/reapply application is determined ineligible.
Portal	Application Submission and Update	47200	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall allow a Family PACT user to reapply immediately for Family PACT if the Family PACT user has requested discontinuance.
Portal	Application Submission and Update	47201	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall allow a Family PACT user to request discontinuance from the Family PACT program based on the following: • I no longer live in California • I make over 200% of the Federal Poverty Guidelines • I have health insurance • I have full scope Medi-Cal without Share of Cost • I no longer have a medical necessity (sterilization) • Permanent deactivation due to a lost or stolen HAP card
Portal	Application Submission and Update	47203	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall display the Client's Dashboard to begin the application with "Apply Now" button.
Portal	Application Submission and Update	47204	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall display the client's latest Family PACT eligibility and individual information on the Client's Dashboard for applications in Report a Change (RAC) Mode.
Portal	Application Submission and Update	47205	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall display the client's latest Family PACT eligibility and individual information on the Client's Dashboard for applications in Recertification Mode.
Portal	Application Submission and Update	47207	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall display the following under Family PACT Application History. i. Request Type ii. User ID III. Date/Time Requests iv. Determination Start Date v. Eligibility Results History- upon selecting user shall be able to View Results. View Results will be navigated to a 'Read Only' eligibility results page. vi. Application PDF - upon selecting user shall be able to view PDF version of the application.
Portal	Application Submission and Update	47211	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall provide a link on the Single Streamline Application for users to navigate to the Family PACT application.
Portal	Application Submission and Update	47212	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall provide a link on the Family PACT application for users to navigate to the Single Streamline Application.
Portal	Application Submission and Update	47225	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall allow a Family PACT client that is determined to be potentially ineligible to be directed to apply for an insurance affordability program through CoveredCA or to continue with the Family PACT account creation and application.
Portal	Application Submission and Update	47226	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall add the Family PACT application to the California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) Portal based on the Family PACT Data Elements sheet.
Portal	Application Submission and Update	47227	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall display previously saved Family PACT data on an intake, report a change (RAC), recertification, and reapplication when the Family PACT user continues the pending application.
Portal	Case Management		
Portal	Case Management	47208	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall display Family PACT current eligibility results in the eligibility results history to the client including the eligibility status, eligibility factors, and eligibility effective dates in the California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) Portal.
Portal	Case Management	47209	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall display Family PACT eligibility results history in the eligibility results history to the client including the eligibility status, eligibility factors, and eligibility effective dates in the California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) Portal.
Portal	Case Management	47210	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall display Family PACT transaction history in the California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) portal.
Portal	Case Management	47223	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall persist the Health Access Program (HAP) ID once generated.
Portal	Case Management	47266	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall allow Family PACT providers to enter HAP card number for existing Family PACT clients known to HAP.

Category	Sub Category	Req ID	Requirement
Portal	Case Management	49110	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall allow a Family PACT provider to view/edit a Family PACT client's client details
Portal	Case Management	49111	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall allow a Family PACT provider to view and create case notes for a Family PACT.
Portal	Case Management	49112	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall prevent a Family PACT provider from changing a Family PACT client's date of birth (DOB) after initial application submission.
Portal	Consumer Management		
Portal	Consumer Management	46608	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall only generate one ECM ID when a user uploads a file and selects that the file applies as proof of verification for multiple members on the California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) case.
Portal	Consumer Management	46612	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall add a new document category for Deceased document types on the Upload New Document Modal on the Documents and Correspondence page.
Portal	Consumer Management	47265	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall allow Family PACT providers to update the Family PACT client's information on behalf of a client.
Portal	Consumer Management	47270	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall display a Family PACT client's current eligibility results to the provider including the eligibility status, eligibility factors, and eligibility effective dates in the California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) Portal.
Portal	Consumer Management	47271	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall display a client's Family PACT eligibility results history to the provider including the eligibility status, eligibility factors, and eligibility effective dates in the California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) Portal.
Portal	Consumer Management	47272	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall have the ability for a Family PACT provider to search for a Family PACT client.
Portal	Consumer Management	47273	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall have the ability for a Family PACT provider to search for a Family PACT client by using the following information that returns a full, exact match: 1. HAP ID 2. Date of Birth (DOB)
Portal	Consumer Management	47274	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall have the ability for a Family PACT provider to search for a Family PACT client by using the following information that returns a full, exact match: 1. First Name 2. Last Name 3. Date of Birth (DOB) 4. Sex 5. Zip Code
Portal	Consumer Management	47275	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall have the ability for a Family PACT provider to search for a Family PACT using the following information that returns a full, exact match: 1. Application Number
Portal	Consumer Management	47276	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall only show search results to the Family PACT provider if the inputted search criteria returns a single result that fully matches the fields used for the search.
Portal	Consumer Management	47277	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall display the following fields when a search result is displayed to a provider: 1. Client Name 2. HAP ID 3. Coverage Status 4. Application Status 5. Date of Birth (DOB) 6. Eligibility Effective Dates
Portal	Consumer Management	47453	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall allow a Family PACT client to answer the questions in a pre-application screener to determine potential eligibility before the consumer continues to account creation.
Portal	Data Collection Screens		
Portal	Data Collection Screens	40235	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall have a functionality to allow designated users to set ROP configuration parameters to be used by ROP Simulation job
Portal	Data Collection Screens	40669	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall reduce the number of calls to GI Adapter Service “getenrollmentdatabyexternalcaseid” from “/ahbx/home-service/v1/alt/choose/year” API invoked from Individual Account Home page.
Portal	Data Collection Screens	40670	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall suppress the duplicate calls triggered for “/ahbx/household-service/v1/household/enrollment/period” and “/ahbx/household-service/v1/household/persons” from Individual Account Home page.
Portal	Data Collection Screens	40682	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall update applicable Spanish translations in CM 11.01 - User Log In document
Portal	Data Collection Screens	40683	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall update the CM 11.01 - Row213 – Section 0.1.9 – Log Out Screen title to "Haga clic en el botón Iniciar sesión para volver a iniciar una sesión en su cuenta."
Portal	Data Collection Screens	40684	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall update the CM 11.01 - RowG128 – Section 0.1.3.0.1 – Verification Method Informatin Model screen title to ""Q: ¿Qué hace el botón "Continuar"?"
Portal	Data Collection Screens	40685	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall update the CM 11.01 - RowG15 and G26 – Section 0.1 and Section 0.1.0.1 – Login screen title to "....tarde o haga clic en..."
Portal	Data Collection Screens	40686	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall update applicable Spanish translations in CM 08.01 Review and Submit tab
Portal	Data Collection Screens	41000	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall update portal messaging for consumers re: end of pandemic related UIB extension/PHE lift

Category	Sub Category	Req ID	Requirement
Portal	Data Collection Screens	41001	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall update portal messaging for consumers reminding them to review and update their contact information.
Portal	Data Collection Screens	48188	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall present the first three characters in the receipt or card number field as a drop down in the Non-Citizen Documentation page
Portal	Eligibility Determination		
Portal	Eligibility Determination	40325	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall persist Zip+4 Code returned by the Address Validation Service for a user input address in California Healthcare Eligibility, Enrollment and Retention System (CalHEERS).
Portal	Eligibility Determination	40326	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall display the Zip+4 Code (read only) on the “Confirm Your Address” popup for the suggested address output from the Address Validation Service.
Portal	Eligibility Determination	40328	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall update the “Confirm Your Address” Modal pop-up to include additional warning/red text when the original address is selected.
Portal	Eligibility Determination	48165	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall redesign the Personal Verification screen.
Portal	Eligibility Determination	48179	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall display verification history for each verification attribute on the Personal Verification page.
Portal	Eligibility Determination	48187	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall prevent a user from submitting the Immigration record, if the user inputs a lawful presence receipt number which is not in a supported format
Portal	Eligibility Determination	48501	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall update the language on the Keep or Switch Screen for better clarity.
Portal	Eligibility Determination	48923	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall display updated messaging for the Eligibility Status of "Medi-Cal: Awaiting Review" when the MAGI Medi-Cal Eligibility Results in California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) system are awaiting SAWS confirmation for Carry Forward consumers.
Portal	Eligibility Determination	48924	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall display updated messaging of "Medi-Cal: Awaiting Review" with the additional text of "[HHM], you are Awaiting Review for Medi-Cal: You may qualify for Medi-Cal instead of a Covered California health plan because your monthly income is [\$_] and your family has [_] member(s). We have sent your information to your local county office for review. They may contact you for more information. You are still in your Covered California plan and need to keep paying your premium to avoid losing coverage while your case is reviewed by your local county office." for Medi-Cal program on "Individual Eligibility Details" section of "Household Eligibility Results Summary" page when the MAGI Medi-Cal Eligibility Results in California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) system are awaiting SAWS confirmation for Carry Forward consumers.
Portal	Eligibility Determination	48935	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall have the functionality to insert case notes in the California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) portal when an individual's Carry Forward Status has been lifted.
Portal	Enrollment		
Portal	Enrollment	46722	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall remove old DHCS logos from the Portal and replace with the new DHCS Branded Logo.
Portal	Enrollment	46723	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall remove old combined logo for Medi-Cal to Covered California and replace with the new combined logo for Medi-Cal to Covered California on following pages: - Choose Application during Account creation - User Home - MCT Dashboard
Portal	Enrollment	46724	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall remove old Medi-Cal logo and replace with the new Medi-Cal logo on Additional Benefit Options page on Eligibility Results page
Portal	Enrollment	46725	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall remove old Medi-Cal and DHCS logo and replace with new Medi-Cal and DHCS logo on Medi-Cal Fact Sheet on Shop and Compare - My Options page
Portal	Enrollment	48505	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall add a link to navigate to the Documents and Correspondence section of the application from within the Case Overview and the Enrollment Dashboard.
Portal	Enrollment	48694	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall correct the language in the Confirm Zero Years Consent modal for English and Spanish.
Portal	Enrollment	48695	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall correct the English language when selecting '0 years' (missing the word "do" in 2nd sentence of the 1st paragraph).
Portal	Enrollment	48696	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall correct the Spanish language when selecting '0 years' (translation for "tax return" is not correct)
Portal	Enrollment	48697	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall display "Click here to learn more about types of income" link on the Intake, RAC, and Renewal screens.
Portal	Enrollment	48698	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall update language displayed on the RAC/Renewal Income screens for households with at least one member who reports \$0 income.
Portal	Enrollment	48699	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall change language throughout the Portal from "Estimated Total Cost" to "Estimated Yearly Cost."
Portal	Enrollment	48700	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall add the estimated yearly cost tooltip to the desktop view of the Choose Health Plan page
Portal	Enrollment	48701	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall update the estimated yearly cost tooltip on the mobile view of the Choose Health Plan page to use the correct language.
Portal	Enrollment	48702	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall update the 'Overall Quality Rating' messaging on the 'Health Plan Details' page.
Portal	Enrollment	48703	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall update the 'Overall Quality Rating' tooltip messaging on the 'Compare Health Plans' page.
Portal	Enrollment	48704	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall update the language in all four sections of the "Overall Quality Rating" section on the Health Plan Details page and the Compare Health Plans page to display "Too few results" if the rating field on the QRS data file lists "CSR-I" or "NG"
Portal	Enrollment	48705	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall update the language in all four sections of the "Overall Quality Rating" section on the Health Plan Details page and the Compare Health Plans page to display "Quality rating in future" if the rating field on the QRS data file is blank
Portal	Enrollment	48706	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall update the language for the “Get the Right Care” section on the Choose Health Plan page to display “Too few results” if the rating field on the QRS data file lists “CSR-I” or “NG”

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(Extracted from CalHEERS RTM)

Category	Sub Category	Req ID	Requirement
Portal	Enrollment	48707	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall update the language for the “Get the Right Care” section on the Choose Health Plan page to display “Quality rating in future” if the rating field on the QRS data file is blank
Portal	Enrollment	48708	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall not display EligFactor_127 messaging if the consumer is Eligible/Conditionally Eligible/Pending MAGI Medi-Cal/MCAP/CCHIP Programs.
Portal	Enrollment	48739	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall update MCT (MAGI Medi-Cal to Covered CA Transition) Dashboard screen to use Carrier Logo and Name information submitted on the Issuer Portal.
Portal	General Requirement		
Portal	General Requirement	46629	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall display 1. The deductible \$ values for both medical and drug deductibles will be displayed for all Plans except Gold and Platinum. 2. When there is no deductible for medical or drug \$0 should display. 3. For integrated deductibles, only one \$ value should display. 4. For Silver Plans the word ‘only’ will be removed. 5. For Gold and Platinum Plans, retain the current display of rule: \$[x] (e.g. \$0) 6. Remove the italic stand-alone text “Before insurance coverage starts” from the ‘Yearly deductible’ section of the plan tile for all plans."
Portal	General Requirement	46630	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall display 1. Disable the display of "Emergency Room visit" verbiage on the Plan Details page. 2. “Outpatient visit” and frequency for Outpatient visit. 3. '0' before the label, if the frequency is zero for any label.
Portal	General Requirement	46631	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall display the "combined in and out of network" value found in 'Adult Annual Benefit limit' section of the SERFF template when the 'In Network' value for this benefit is Not Applicable. Display as follows: Display as the value for “Adult Benefit Limit” on Choose a Dental Plan page and display as the value for “Adult yearly benefit limit” on Dental Plan Details page & Compare Dental Plans pages.
Portal	General Requirement	46632	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall update the plan benefits mapping on the screen as listed below: 1) Dental Plan Details screen, map ‘Adult Checkup’ in ‘Key Cost and Features’ field to ‘Routine Dental Services (Adult)’ value from SERFF
Portal	General Requirement	46633	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall update tooltips for for the fields on the Health and Dental plans tile display to be modified based on latest verbiage.
Portal	General Requirement	46960	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall update PDF application to reflect the same information displayed on the California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) portal when QLE "None of the above (Continue to review my application for Medi-Cal or MCAP)" is selected.
Portal	General Requirement	46961	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall update the "Create an Account" link on the California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) portal log in page to display in Spanish when Spanish is the selected language
Portal	General Requirement	47228	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall display Covered California logo on every page in the Family PACT application flow.
Portal	General Requirement	47229	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall display DHCS Family PACT logo on every page in the Family PACT application flow.
Portal	General Requirement	47230	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall create and display Application # during Family PACT application creation process.
Portal	General Requirement	47231	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall display the Application ID on where applicable in the Family PACT application once created.
Portal	General Requirement	47232	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall display the Legal Notice page on the Family PACT Application.
Portal	General Requirement	47278	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall keep a record of search transactions performed by a Family PACT provider.
Portal	General Requirement	47821	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall display messaging to inform users to renew Medi-Cal benefits through BenefitsCal or County Office on Log-In Page for all users.
Portal	General Requirement	47822	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall display messaging to inform consumers to renew Medi-Cal benefits through BenefitsCal or County Office on Account Home Page for cases having at least one member in a case with program status as Eligible/Conditionally Eligible/Pending/Awaiting Review for MAGI Medical program and Carry Forward Scenario.
Portal	General Requirement	48166	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall display all household members in separate tabs on the Personal Verification screen
Portal	General Requirement	48167	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall allow filtering of verification for each HHM
Portal	General Requirement	48168	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall allow user to navigate to the current Household Eligibility Results screen
Portal	General Requirement	48169	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall allow admin users to navigate to Verification History screen from Personal Verification screen
Portal	General Requirement	48170	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall color code data element based on the pending verification
Portal	General Requirement	48171	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall display a hyperlink (View Response) to display e-Verification and Admin Verification responses for all applicable data elements
Portal	General Requirement	48172	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall allow admin to extend ROP date on the Personal Verifications screen.
Portal	General Requirement	48173	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall update verification for American Indian / Alaskan Native to American Indian / Alaska Native
Portal	General Requirement	48174	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall display IDP Result, IDP Response, and IDP Date & Time in a second tier row for an applicable attribute.
Portal	General Requirement	48175	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall display VLP summary link under Citizenship and Lawful Presence attributes on Personal Verification Screen
Portal	General Requirement	48180	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall display a hyperlink (View Response) to display e-Verification and Admin Verification responses for all applicable data elements

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(Extracted from CalHEERS RTM)

Category	Sub Category	Req ID	Requirement
Portal	General Requirement	48181	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall allow display of historical verification based on the verification Type
Portal	General Requirement	48190	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall add calendar icon and functionality to Non-Citizen Documentation screen.
Portal	General Requirement	48196	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall collect alternative format information in the Single Streamlined Application and FlexiApp for each individual on the application.
Portal	General Requirement	48197	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall allow a user to select one of the following alternative formats: - Large Print - Audio Electronic Format - Data Electronic Format - Audio Electronic Format (password protected) - Data Electronic Format (password protected) - Braille
Portal	General Requirement	48198	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall only allow a user to select one alternative format for each individual on the case.
Portal	General Requirement	48199	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall allow the consumer to update alternative format selection during RAC/Renewal applications.
Portal	General Requirement	48200	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall ask the consumer to confirm an alternative format is required for a household member before the alternative formats are presented to the user for selection.
Portal	General Requirement	48201	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall persist the following alternative format selection: "Yes" when the user selected an alternative format, "No" when the user selected that they do not require an alternative format, and do not persist any value when the user does not make a selection.
Portal	General Requirement	48202	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall log the change in alternative format selection attested by the consumer in the Case Transaction History.
Portal	General Requirement	48207	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall have an ability to configure (ON / OFF) the alternative format attestation collection functionality.
Portal	General Requirement	48309	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall create data layer variables on the Choose a Health/Dental Plan page (both logged in and anonymous Shop and Compare flow) and MAPS3 Final submit page.
Portal	General Requirement	48310	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall update DLV for "Language" to capture "EN" for English and "ES" for Spanish whenever user updates the language.
Portal	General Requirement	48311	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall create DLVs to capture both expand and collapse accordions for Metal Tiers, Insurance Companies and Network Types filters on Choose a Health/Dental Plan page (both logged in and anonymous Shop and Compare flows).
Portal	General Requirement	48312	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall create DLVs to capture page number traverse (both back arrow and front arrow) on Choose a Health/Dental Plan page (both logged in and anonymous Shop and Compare flows).
Portal	General Requirement	48313	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall create DLV for MAPS Screen final submit page to capture check and uncheck response for "Provide eSignature" and check/uncheck/error response for "Binding Arbitration Agreement".
Portal	General Requirement	48431	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall navigate consumers who have been identified as MAPS and who enter the California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) portal application 12/01 or later back to their Account Home page for their future benefit year, when clicking plan selection call-to-actions on the portal.
Portal	General Requirement	48432	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall navigate the MAPS consumer to the Future Benefit year on Account Home on initial navigation to the portal. On subsequent plan selection actions, California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall navigate the MAPS consumer to the Future Benefit year on the Account Home.
Portal	General Requirement	48433	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall display the following during 12/1 to 12/31 of the current benefit year when: 1) MAPS consumer is navigated to Current benefit year on the Account Home: "Submit an Application for [YYYY] It's too late to get December coverage but you can submit an application for next year to get covered as early as January 1. [Click on [YYYY] below to start your application.]" 2) MAPS consumer is navigated to Future benefit year on the Account Home: "Submit an Application for [YYYY] It's too late to get December coverage but you can submit an application for next year to get covered as early as January 1."
Portal	General Requirement	48434	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall provide consumers appropriate messaging and optional fields to select a telephone number provided in the application and consent to receive text messages from carriers at an enrollment level on the Plan confirmation screen.
Portal	General Requirement	48435	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall default the telephone number of the subscriber or responsible adult for a child only enrollment, for collecting consent to receive text messages from the carrier, using the following heirarchy: - Cell phone (if provided) - Home phone (if provided) - Work phone (if provided)
Portal	General Requirement	48436	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall allow the consumer to select a telephone number provided in the application for collecting consent to receive text messages from the carrier.
Portal	General Requirement	48450	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall ensure that the Strike Lockout Confirmation Page is the first page to be navigated to when a user is utilizing the Flexi-App Report a Change and the case had prior Strike Lockout Attestation where the Strike Record is still active
Portal	General Requirement	48507	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall update the language on privacy data usage disclaimers to reflect operations and legal boundaries.
Portal	General Requirement	48539	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall merge functionality and deprecate Outstanding Verifications page to Personal Verifications Screen
Portal	General Requirement	48559	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall display whole numbers if the decimal value is .00 for copay or deductible values on consumer facing screens.
Portal	General Requirement	48560	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall provide a link to access the Manual Verification page from within Admin Case Overview page.

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Category	Sub Category	Req ID	Requirement
Portal	General Requirement	48561	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall update the Spanish language of the "Keep" in the radio button options in Individual Opt-In Opt-Out Page to say "Mantener."
Portal	General Requirement	48562	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall update the English language for the option to switch the page from Spanish back to English. Option will be changed from "Inglés" to "English."
Portal	General Requirement	48563	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall update the message displayed to Issuer Admins, Issuer Representatives, and Issuer Enrollment Representatives on the My Profile Page in the Email address section.
Portal	General Requirement	48564	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall add validation to email address section as email address field cannot be blank.
Portal	General Requirement	48565	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall disable the banner messaging for Pandemic-related Unemployment Insurance Benefits on the Account Home page.
Portal	General Requirement	48566	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall disable the banner messaging for COVID-19 economic impact stimulus payments on the Household Income pages.
Portal	General Requirement	48635	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall update language on Individual Eligibility Details page under the Medi-Cal section and include "Get Confirmation Letter" button for consumers who are eligible or conditionally eligible to MAGI Medi-Cal.
Portal	General Requirement	48636	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall display the previously generated Medi-Cal Eligibility Confirmation Letter until Good Through Date on click of "Get Confirmation Letter" button on Individual Eligibility Details page if the Good Through Date is active.
Portal	General Requirement	48637	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall display appropriate message to user when user clicks on "Get Confirmation Letter" button if: 1. Individual Eligibility Details page is accessed after 30 days from latest BRE run date, and 2. Previously generated Medi-Cal Eligibility Confirmation Letter's Good Through Date is expired.
Portal	General Requirement	48638	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall generate and display Medi-Cal Eligibility Confirmation Letter in a new tab/window as pdf when user clicks on "Get Confirmation Letter" button on Individual Eligibility Details page.
Portal	General Requirement	48639	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall display appropriate message to user when user clicks on "Get Confirmation Letter" button on Individual Eligibility Details page during MEDS outage.
Portal	General Requirement	48642	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall make the Medi-Cal Eligibility Confirmation Letter available to the users in Docs and Correspondence page once the letter is generated.
Portal	General Requirement	48655	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall display appropriate message to user in case the replayed real-time immediate need HX20 ESAC-1 also timed out.
Portal	General Requirement	48656	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall display appropriate messaging to user in case the real-time immediate need HX20 ESAC-1 results into Business Validation error.
Portal	General Requirement	48742	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall update the display logic of the following CS Level Categories on the Budget Worksheet: - "Baseline CSR without FPL Override" - "Enhanced CSR without FPL Override"
Portal	General Requirement	48781	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall update the Single Streamlined Application and Flex App where the user selects an alternative format to display the four following alternative formats: - Large Print - Audio Electronic Format - Data Electronic Format - Braille
Portal	General Requirement	48782	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall prompt the consumer to select if they would like their alternative format notice to be password protected if the consumer selects Audio Electronic Format or Data Electronic Format.
Portal	General Requirement	48783	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall update the authorized representative page to allow the consumer to select one of the following alternative formats for the authorized representative: - Large Print - Audio Electronic Format - Data Electronic Format - Braille
Portal	General Requirement	48784	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall ask the consumer to confirm if an alternative format is required for the authorized representative before the alternative formats are presented to the user for selection.
Portal	General Requirement	48785	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall prompt the consumer to select if they would like the authorized representative's alternative format notice to be password protected if the consumer selects Audio Electronic Format or Data Electronic Format.
Portal	General Requirement	48786	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall allow the consumer to select only one alternative format for the authorized representative.
Portal	General Requirement	48789	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall implement the functionality to upload the audio/data files received from the print vendor to the documents and correspondence page and to the secure mail box.
Portal	General Requirement	48795	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall pre-populate "No" when the consumer/authorized representative/admin user is prompted to answer if they require an alternative format on the Single Streamlined Application, Flexi App, and Authorized Representative Screen.
Portal	General Requirement	48797	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall update the phone number displayed on the alternative format screens.

Appendix A-4 - SOW Exhibit A - System Requirements Specification
(Extracted from CalHEERS RTM)

Category	Sub Category	Req ID	Requirement
Portal	General Requirement	48798	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall update the text in the Single Streamlined Application and Flex App for the Alternative Format option for Braille as follows: -Remove "(English and Spanish only)" in the Braille option text -Update the language in the Braille Alert message to state: "Braille is only available in English or Spanish. If your preferred language is not English or Spanish, your notices will be sent in English Braille."
Portal	General Requirement	48799	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall include an indicator on the Documents and Correspondence screen to the standard format version of the notices to indicate what alternative format type the notice has been generated in and sent to the consumer.
Portal	General Requirement	48800	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall update the text on the Flex App as per DCR 288307.
Portal	General Requirement	48801	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall round the Maximum Premium Percentage to the nearest hundredth percent while calculating APTC amounts in the Shop and Compare flow
Portal	General Requirement	48802	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall truncate the decimal values for the household FPL % that is used to calculate MPP (Maximum Premium Percentage) in the Shop and Compare flow.
Portal	General Requirement	48939	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall update the Issuer Portal's Agency Federal Tax ID input field to limit the character length to 9 digits.
Portal	General Requirement	48940	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall update the Individual Eligibility Details page to display the correct Program, "Medi-Cal", and Status, "Eligible", for aid code M9.
Portal	General Requirement	48941	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall update the Additional Benefits Options Popup link for Medi-Cal to direct to the URL, https://medi-cal.dhcs.ca.gov
Portal	General Requirement	48942	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall display, within the Budget Worksheet on the "Eligible For:" tag, the language "Non AI/AN CSR Only" if a non-AI/AN individual is eligible or conditionally eligible to receive CSR and CCP only
Portal	General Requirement	48965	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall display the following Negative Actions added via Disposition on the budget page as a Negative Action: - Gets Duplicate Aid - Out of the Home - Duplicate/Hidden Person - Other
Portal	General Requirement	49037	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall provide a dedicated page for banner configuration, accessible only to authorized California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) admin users.
Portal	General Requirement	49038	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall enable messaging directed at specific pages on the portal.
Portal	General Requirement	49039	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall enable banners to be displayed within a specified date range.
Portal	General Requirement	49040	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall enable banner configuration based on user groups (admin user group, enroller user group, issuer user group, consumer user group, anonymous user group).
Portal	General Requirement	49041	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall enable messaging based on each household member's program, aid code and eligibility status on a case.
Portal	General Requirement	49042	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall implement feature to dynamically display banners based on Federal Poverty Level (FPL) of a case.
Portal	General Requirement	49043	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall implement feature to configure and display banners specific to insurance carriers
Portal	General Requirement	49044	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall implement carousel functionality for multiple banners on a screen.
Portal	General Requirement	49045	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall implement feature that establishes the order of banner display.
Portal	General Requirement	49046	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall allow consumers to dismiss banners for their current session
Portal	General Requirement	49047	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall allow for the inclusion of non-case specific variable dates in the banner content.
Portal	General Requirement	49048	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall implement functionality to assign the color of the banner based on priority levels (yellow, red, blue).
Portal	General Requirement	49049	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall support the inclusion of icons within the banner.
Portal	General Requirement	49050	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall enable creation of new banners with Banner Titles.
Portal	General Requirement	49051	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall require all triggering conditions be met before displaying a banner to end users.
Portal	General Requirement	49052	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall list banners that are beyond their end date as inactive
Portal	General Requirement	49053	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall enable authorized users to reactivate inactive banners.
Portal	General Requirement	49054	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall have ability to incorporate existing banner messages currently in production.
Portal	General Requirement	49055	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall enable authorized users to edit banners.
Portal	General Requirement	49056	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall display a "Banner Preview" at the top of the Banner Creation and Banner Edit screens.
Portal	General Requirement	49057	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall require a SNOW ticket to be created and provided when creating or modifying a banner.
Portal	General Requirement	49058	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall enable the inclusion of hyperlinks within the banner content.
Portal	General Requirement	49059	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall allow rich text within a Banner Body Text field.
Portal	General Requirement	49060	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall enable the creation of banners in both English and Spanish.
Portal	General Requirement	49061	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall display Banner Version History for auditing purposes.
Portal	General Requirement	49062	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall create a modal to present a preview and comprehensive details of the banner.

Category	Sub Category	Req ID	Requirement
Portal	General Requirement	49074	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall display a timeout warning to Family PACT admin users after 13 minutes of inactivity.
Portal	General Requirement	49075	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall display a timeout warning to Family PACT users after 13 minutes of inactivity.
Portal	General Requirement	49093	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall display a timeout warning to Family PACT provider users after 13 minutes of inactivity.
Portal	General Requirement	49099	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall display Family PACT transaction history in the California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) portal.
Portal	General Requirement	49100	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall display Family PACT change log in the California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) portal.
Portal	General Requirement	49105	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall implement masking for the following sensitive data elements on the California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) portal screens for all user roles: 1. SSN, 2. Alien Number/USCIS Number, 3. I-94 Number/I-94A Number, 4. SEVIS ID, 5. Passport Number and 6. ITIN/ATIN.
Portal	General Requirement	49106	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall implement masking for the following sensitive data elements in the backend API data: 1. SSN, 2. Alien Number/USCIS Number, 3. I-94 Number/I-94A Number, 4. SEVIS ID, 5. Passport Number and 6. ITIN/ATIN.
Portal	General Requirement	49107	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall implement masking for the following sensitive data elements in the HTML in browser development tools (BDT): 1. SSN, 2. Alien Number/USCIS Number, 3. I-94 Number/I-94A Number, 4. SEVIS ID, 5. Passport Number and 6. ITIN/ATIN.
Portal	General Requirement	49108	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall provide a toggle visibility feature for user roles with access to California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) portal screens with sensitive data elements mentioned below: 1. SSN, 2. Alien Number/USCIS Number, 3. I-94 Number/I-94A Number, 4. SEVIS ID, 5. Passport Number and 6. ITIN/ATIN.
Portal	General Requirement	49109	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall merge the three separate SSN/ATIN/ITIN fields into a single input field.
Portal	General Requirement	49230	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall integrate with the Intelligent Document Processing (IDP) system to systematically verify document types submitted for confirming Consumer's Identity.
Portal	General Requirement	49231	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall integrate with the Intelligent Document Processing (IDP) system to systematically verify document types uploaded from the Confirm Identity Page on the Portal.
Portal	General Requirement	49232	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall add all acceptable identity documents from List A and List B to be in scope for IDP classification, extraction and verification.
Portal	General Requirement	49233	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall update the portal to rename, remove, or separate identity document types that are currently ambiguous, ensuring that each document type is distinct and easily identifiable for user.
Portal	General Requirement	49234	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall automatically classify user-uploaded documents based on IDP classification.
Portal	General Requirement	49235	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall notify the user of the IDP classified document on the document upload based on IDP classification confidence.
Portal	General Requirement	49236	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall request user to upload new document in the event IDP is unable to classify the document or confidence score is below configured threshold or uploaded document is identified as not one of the acceptable identity documents to confirm person's identity.
Portal	General Requirement	49237	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall sort and prioritize display of the list of highly used documents for List A and List B to confirm person's identity.
Portal	General Requirement	49238	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall provide an option for the user to replace document, if needed.
Portal	General Requirement	49239	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall explicitly notify the user in the event uploaded document exceeds IDP processor page limit.
Portal	General Requirement	49240	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall update the list of possible document issue of document being a bad quality document (Too Dark or Too Blurry) when the IDP is unable to read the document.

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(Extracted from CalHEERS RTM)

Category	Sub Category	Req ID	Requirement
Portal	General Requirement	49241	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) IDP shall define the extracted fields for the Confirm Identity document types to apply data match and verification rule.
Portal	General Requirement	49242	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall match the IDP extracted values with the attested information of the Primary Household contact on the Case.
Portal	General Requirement	49243	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) IDP shall define a verification rule for document types uploaded on the Confirm Identity Page from List A or List B.
Portal	General Requirement	49244	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall consider Identity verification as Pass if IDP passes atleast one Document from List A or two Documents from List B.
Portal	General Requirement	49245	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall not trigger a BPM Manual Verification task if the IDP verification result is 'Cannot Verify'.
Portal	General Requirement	49246	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall display and store the IDP outcome for Identity verification.
Portal	General Requirement	49247	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall display and store the IDP outcome of 'Pass' for Identity verification.
Portal	General Requirement	49248	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall display and store the IDP outcome of 'Cannot Verify' along with the reason for Identity verification.
Portal	General Requirement	49249	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall display and store and the value of attested data, extracted data and document name as applicable in the event IDP outcome is 'Cannot Verify'.
Portal	General Requirement	49250	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall document the log to capture IDP Outcome (Pass, Cannot Verify along with reasons), user id, date/timestamp and store the user uploaded document(s) for given transaction.
Portal	General Requirement	49251	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall allow the user to continue with the application if the IDP Verification result is 'Pass'.
Portal	General Requirement	49252	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall not allow the user to continue with the application if the IDP Verification result is 'Cannot Verify'.
Portal	General Requirement	49253	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall provide near real time extracted data from the user uploaded documents on the Confirm Identity Page.
Portal	General Requirement	49254	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall notify user on the data mismatch or verification rule failure if any that would otherwise result in IDP Outcome of Cannot Verify.
Portal	General Requirement	49255	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall provide an option for the user to replace document if IDP is unable to verify.
Portal	General Requirement	49256	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall guide the user to upload one document at a time for a given document type on Confirm Identity page.
Portal	General Requirement	49257	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall guide and prompt user to upload at least one document from List A or two documents from List B to confirm person's identity in the event IDP Outcome is 'Cannot Verify' for identity verification.
Portal	General Requirement	49258	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall notify the user in the event it is unable to open the uploaded document and request user to upload a different document.
Portal	General Requirement	49260	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall integrate with the Intelligent Document Processing (IDP) system to systematically verify additional 11 document types submitted for the outstanding verifications.
Portal	General Requirement	49261	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall integrate with the Intelligent Document Processing (IDP) system to verify additional 10 document types with a category of 'Manual Verifications' that are from the 'Print / Mail' vendor.
Portal	General Requirement	49262	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall integrate with the Intelligent Document Processing (IDP) system to systematically verify additional 10 document types if uploaded from the portal from Upload Eligibility Documents page or Documents and Correspondence Page.
Portal	General Requirement	49263	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) IDP shall define a verification rule for additional 11 document types.
Portal	General Requirement	49264	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) IDP shall define the extracted fields for additional 11 document types to apply data match and verification rule.
Portal	General Requirement	49265	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall enhance the Upload Eligibility Documents page and Documents & Correspondence page to provide near real time extracted data from consumer uploaded documents on portal for the additional 10 document types.
Portal	General Requirement	49266	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall notify user of the data extraction failure for the uploaded document for the additional 10 document types and allows user to either replace document or continue for the submission of document.
Portal	General Requirement	49267	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall notify user of the successful data extraction for the uploaded document for user to preview the extracted data elements for the the additional 10 document types and allows them to either replace document or continue for the submission of document.
Portal	General Requirement	49268	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall add the reason(s) to be displayed on Personal Verification page following a Cannot Verify result from IDP for the additional 11 document types.
Portal	General Requirement	49269	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall update the portal to rename, remove, or separate document types that are currently ambiguous, ensuring that each document type is distinct and easily identifiable for user.
Portal	General Requirement	49270	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall automatically classify user-uploaded documents based on IDP classification.
Portal	General Requirement	49271	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall notify the user of the IDP classified document on the document upload based on IDP classification confidence.
Portal	General Requirement	49272	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall request user to select the document type for the uploaded document in the event IDP is unable to classify the document or confidence score is below configured threshold or document outside of the selected verification type.
Portal	General Requirement	49273	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall sort and prioritize display of the list of highly used documents for the outstanding verification during the user document selection.
Portal	General Requirement	49274	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall store if the uploaded document got classified by IDP or user selected the document type.
Portal	General Requirement	49275	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall not display "Change" link at its existing location on "Upload Eligibility Documents" page for user to change the document type of the uploaded document in the event IDP classification of the uploaded document meets or exceeds the configured threshold for the verification type.
Portal	General Requirement	49276	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall continue to display "Change" link at its existing location on "Upload Eligibility Documents" page for user to change the document type of the uploaded document in the event IDP is unable to classify the document or confidence score is below configured threshold or document outside of the selected verification type.

Appendix A-4 - SOW Exhibit A - System Requirements Specification
(Extracted from CalHEERS RTM)

Category	Sub Category	Req ID	Requirement
Portal	General Requirement	49277	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall document the use of the "Change" link by the user.
Portal	General Requirement	49278	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall enable user to replace document, if needed.
Portal	General Requirement	49279	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall notify the user in the event it is unable to open the uploaded document and request user to upload a different document.
Portal	General Requirement	49280	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall explicitly notify the user in the event uploaded document exceeds IDP processor page limit.
Portal	General Requirement	49281	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall update the list of possible document issues displayed on the error state of the Review Document Information modal when the IDP is unable to read the document.
Portal	General Requirement	49282	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall notify user on the data mismatch or verification rule failure if any that would otherwise result in IDP Outcome of Cannot Verify.
Portal	General Requirement	49283	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall display the value of the attested and extracted data match fields highlighting the mismatch if any that would otherwise result in IDP Outcome of Cannot Verify.
Portal	General Requirement	49284	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall notify user on the verification rule failure tied to the verification fields.
Portal	General Requirement	49285	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall expand the "Cannot Verify" reasons displayed on Personal Verification page to admin users on granular level.
Portal	General Requirement	49286	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall expand the "Cannot Verify" reasons to include details on the document name, values for attested and extracted data match and verification fields.
Portal	General Requirement	49287	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall add the "Cannot Verify" reasons for the data match fields when it is not present or not extractable from the document type.
Portal	General Requirement	49288	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall add below as a separate case match rule to link the document with unique California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) case number. First Name, Last Name, Case Number
Portal	General Requirement	49289	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall provide guidance to the user to provide the annual income amount at household level on the Income Attestation form.
Portal	General Requirement	49290	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall not trigger IDP calls or create BPM tasks if documents are uploaded by admin users on the Documents and Correspondence page.
Portal	General Requirement	49291	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall run validation and notify the user of any verification discrepancies at the case level prior to verification of documents via IDP.
Portal	General Requirement	49292	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall display the mismatch between the attested household subsidy income and the IDP calculated annual household income match fields (at the household level) that would otherwise result in IDP Outcome of Cannot Verify.
Portal	General Requirement	49293	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall provide guidance to the user to electronically attest to income as an alternative solution to confirm its income verification in the event this option is not already used for income verification.
Portal	General Requirement	49294	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall provide messaging to the user to submit the proof of income verification for all the conditionally eligible exchange outstanding income members that have reported income prior to submission of the documents for IDP verification (in a given IDP transaction) in the event income proof has not yet been submitted.
Portal	General Requirement	49295	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall display the income amount calculated from the income document group that is closest to the dollar threshold amount (amount derived based on 10% of attested household subsidy income amount for exchange household) for the IDP calculated income on the portal in the event there is income mismatch due to income percentage differentiation criteria is not met.
Portal	General Requirement	49296	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall display lowest of the income amounts if the calculated income amounts from two different income document groups are equally close to the dollar threshold amount (amount derived based on 10% of attested household subsidy income amount for exchange household) for the IDP calculated income on the portal in the event there is income mismatch due to income percentage differentiation criteria is not met.
Portal	General Requirement	49297	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) IDP shall extend Paytub acceptance period to 7 days in future.
Portal	General Requirement	49298	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall update IDP BSD document to match California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) Case Match Service schema for following data elements - Certificate of Citizenship Number Certificate of Naturalization Number Country Of Issuance
Portal	General Requirement	49299	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall display the Choose People Modal to apply the income document to other members outstanding for income verification in the household prior to the document classification step.
Portal	General Requirement	49300	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall request user to upload document from List A or List B secondary Citizenship documents for outstanding Citizenship verification depending on document being classified as one of the documents from List A or List B document types.
Portal	General Requirement	49301	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall update the status of all exchange members outstanding for income verification from 'Conditionally Eligible' to 'Eligible' if an IDP 'Pass' is received for any one of the income documents submitted for the case, provided it meets the income percentage differentiation criteria.
Portal	General Requirement	49302	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall utilize income proof provided by any household member outstanding for income verification to determine the eligibility for the entire household for all conditionally eligible exchange outstanding income members, regardless of whether those members have attested to income, provided that the income of other household members submitting income proof is applicable to these conditionally eligible exchange members.
Portal	General Requirement	49303	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall provide an option to the user to electronically attest their income.
Portal	General Requirement	49304	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall allow electronic income attestation form to be filled once for the household.

Appendix A-4 - SOW Exhibit A - System Requirements Specification
(Extracted from CalHEERS RTM)

Category	Sub Category	Req ID	Requirement
Portal	General Requirement	49305	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall pre-populate the electronic income attestation form with the consumer details for exchange or mixed household cases
Portal	General Requirement	49306	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall make data fields editable for user to make required edits if needed on the pre-populated electronic income attestation form.
Portal	General Requirement	49307	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall request e-signature as a confirmation step in order to accept the electronic attestation of income by users.
Portal	General Requirement	49308	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall automatically apply electronic income attestation form to all the outstanding income members on the case once submitted.
Portal	General Requirement	49309	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall delete electronic income attestation form for all outstanding income members on the case, in the event any of the outstanding income member deletes this form.
Portal	General Requirement	49310	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall capture the identity and role of the user of who they are (consumer, authorized representatives, admins and agent/enrollers) when providing electronic attestation of income.
Portal	General Requirement	49311	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall document the use of the electronic attestation of income in a transaction log.
Portal	General Requirement	49312	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall generate the electronic income attestation form and display on the portal.
Portal	General Requirement	49313	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall store the data fields from electronic income attestation form.
Portal	General Requirement	49314	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall run IDP classification, extraction and verification on electronic income attestation form.
Portal	General Requirement	49315	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall bypass name match validation via IDP for the electronic income attestation form.
Portal	General Requirement	49316	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) IDP shall consider electronic income attestation form once for all exchange conditionally eligible outstanding income members on the case.
Portal	General Requirement	49317	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall not make IDP calls on document upload when exchange conditionally eligible person is on Carry forward status.
Portal	General Requirement	49318	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall restrict the display of "Withdraw" link to only admin users.
Portal	General Requirement	49319	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall document the use of the "Withdraw" link.
Portal	General Requirement	49350	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall replace the existing remote identity proofing process with Socure RIDP solution for all user roles.
Portal	General Requirement	49351	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall call the SOCURE RIDP service in an application flow once the consent has been provided on the User Consent - Socure page and the user proceeds to the next step (Shall be applicable for all user roles)
Portal	General Requirement	49352	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall create screen to request consent from users to send information to Socure RIDP services for identity proofing process.
Portal	General Requirement	49353	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall display the identity proofing options in error message modals when the SOCURE RIDP Step 2 vendor authentication is called, and the authentication fails.
Portal	General Requirement	49354	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) Shall display appropriate Error message modal based on Socure RIDP Responses
Portal	General Requirement	49355	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall continue with the existing application flow when the SOCURE RIDP vendor authentication is called, and the authentication is successful.
Portal	General Requirement	49356	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall continue with the existing application flow and display the Successful Identity Verification Modal when the SOCURE RIDP vendor authentication is called, and the authentication is successful by SOCURE automated RIDP flow (Step 1 verification)
Portal	General Requirement	49357	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall continue with the existing application flow and display the Successful Identity Verification Modal when the SOCURE RIDP vendor authentication is called, and the authentication is successful as part of Step 2 verification (DocV) process
Portal	General Requirement	49358	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall integrate HBX portal with Socure 'Capture App' to facilitate Step 2 verification (DocV) process
Portal	General Requirement	49359	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall customize Socure 'Capture App' to provide similar experience as California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) portal example font style, logo, branding, color palette etc.
Portal	General Requirement	49360	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall create screen to inform users about step 2 verification(DocV) and allow users to provide email or phone to receive Socure CapureApp link to complete verification process
Portal	General Requirement	49361	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall create message templates (Phone/email) for Step 2 verification(DocV) process
Portal	General Requirement	49362	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall call the Socure RIDP service to receive and send a link for Socure (DocV) verification process to be accessed by a mobile device when users selects link method and proceeds to next step.
Portal	General Requirement	49363	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall auto-populate the email or phone field from account creation and MFA preferences in contact information page for logged-in user and same information should be populated in subsequent pages, Primary contact and DocV page
Portal	General Requirement	49364	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall make email or phone fields mandatory (one of these fields) on primary contact page for RIDP
Portal	General Requirement	49365	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall display list of approved Identification documents in HBX portal for user selection as part of Step 2 (DocV) process
Portal	General Requirement	49366	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall allow users to resend a new link for Socure (DocV) verification process.
Portal	General Requirement	49367	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall invalidate the link that was sent for RIDP Step 2 verification (DocV) process after the configured link validity time has passed.
Portal	General Requirement	49368	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall invalidate the link for that was sent for RIDP Step 2 verification (DocV) process when the user chooses to cancel the link or resend a new link.
Portal	General Requirement	49369	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall allow users to continue their application from the Identity Verification Standby Page when resuming an application for consumers who initiated Socure Step 2 DocV verification, not yet completed identity verification, and their link has not expired (72 hours).

Category	Sub Category	Req ID	Requirement
Portal	General Requirement	49370	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall retain the functionality to allow admin and enroller users to skip RIDP and instead use document upload functionality with existing process.
Portal	General Requirement	49371	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall update the Identity Proofing Options modal to deprecate the options for Phone, Electronic Upload and fax
Portal	General Requirement	49372	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall make appropriate changes in Flexi-App to facilitate the use of the Socure solution
Portal	General Requirement	49373	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall develop new screen to show the phone/email and list of documents for step 2 verification (DocV)
Portal	General Requirement	49374	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall develop new screen for step 2 verification (DocV) to confirm DocV link was sent and to continue the smartphone or tablet
Portal	General Requirement	49375	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall display appropriate message modal based on Socure RIDP responses (Accept, Reject and Re-Submit)
Portal	General Requirement	49376	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall display appropriate message modal on Flexi App screen to show the Reject or Re-submit message Modal based on Socure RIDP response when continuing an application through the Flexi App flow from the Admin Search Screen.
Portal	General Requirement	49377	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall pre-populate primary person information for the in-flight applications in Flexi-App flow.
Portal	General Requirement	49378	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall modify the language for RIDP related messages on the Application Initiation page in the Flexi-App to facilitate the use of the Socure solution
Portal	General Requirement	49379	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall update the consent language for Flexi-App to request if Admin has consumer consent to send information to Socure RIDP services for identity proofing process.
Portal	General Requirement	49380	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall allow Admin users to continue an application in the Flexi App flow from the Admin search screen and resume on the Flexible Application - Identity Verification Standby Page when resuming an application for consumers who initiated Socure Step 2 DocV verification, not yet completed identity verification, and their link has not expired (72 hours).
Portal	General Requirement	49381	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall call the SOCURE RIDP service in an application flow once the consent has been provided on the Flexi App - Application Initiation page and the admin Proceeds to the next step.
Portal	General Requirement	49382	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall create audit history record for the individual identity verification, with details stating if the identification was done via RIDP process
Portal	General Requirement	49383	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall work with Socure to identify and configure rule set for identity proofing
Portal	General Requirement	49384	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall only allow approved Identification documents as part of Step 2 Verification (DocV) Process
Portal	General Requirement	49385	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall implement secure connectivity (Network/Gateway connection) with Socure
Portal	General Requirement	49386	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall implement 3scale API policy with Socure
Portal	General Requirement	49387	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall implement Camel API policy with Socure
Portal	General Requirement	49388	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall implement auditing for SAWS intake EDR requests for ID proofing.
Portal	General Requirement	49389	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall encourage users to provide consumer's Legal Name when adding household members
Portal	General Requirement	49390	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall implement 'Day One' scenario for users in an intermediate RIDP system state
Portal	General Requirement	49391	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall create and configure sub domain for Socure CaptureApp URL
Portal	General Requirement	49392	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall integrate Socure portal with Active Directory to login into Socure Admin dashboard
Portal	General Requirement	49393	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall auto refresh and invoke the Verification Status API call while users remain on the Identity Verification Standby Page to receive verification response for RIDP Step 2 DocV Verification to display the appropriate response on the California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) Portal.
Portal	Health & Dental Plan Shopping		
Portal	Health & Dental Plan Shopping	48018	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall correct the spelling of "Authorised" to "Authorized" in all impacted UI pages. (To address SIR 245320)
Portal	Interfaces		
Portal	Interfaces	48770	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall allow CiCi (CCA Chatbot) to retrieve a consumer's most recent tax form on file for each tax form type (IRS 1095 and FTB 3895).
Portal	Interfaces	48771	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall allow a Consumer to download their available tax forms (IRS 1095, FTB 3895) through an active CiCi chat session.
Portal	Interfaces	48772	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall allow the "Available Tax Form API" and "Generate Tax Form API" to return whether the consumer's most recent tax form available is an "Original" tax form or a "Revised" tax form.
Portal	Non-Functional Requirement		
Portal	Non-Functional Requirement	49063	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall capture key user behavior actions to push dynamic banner data to Google Tag Manager (GTM).
Portal	Notices		
Portal	Notices	40516	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall provide all users with access to the case, with the ability to generate Proof of Coverage for a particular quarter in the given year
Portal	Notices	40529	Proof of Coverage will be generated by the consumer from the California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) portal for the selected Individual, Year & Quarter combination (E.g. - Indiv1, 2021, Q1; Indiv2, 2021, Q2).

Category	Sub Category	Req ID	Requirement
Portal	Notices	40530	Proof of Coverage can be generated for the current and the last year
Portal	Notices	40531	Proof of Coverage will be generated in real-time with the latest enrollment data fetched from the GI system
Portal	Notices	40532	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall store all the Proof of Coverage PDFs generated by the consumer
Portal	Notices	40533	Proof of Coverage should be available on the Document and Correspondence page
Portal	Notices	40534	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall generate a Proof of Coverage that is not forgeable.
Portal	Notices	40535	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall utilize watermark to prevent Proof of Coverage from getting forged
Portal	Notices	40536	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall generate Proof of Coverage in English Language
Portal	Notices	40537	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall print Proof of Coverage with Enrollment and Demographic details
Portal	Notices	40538	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall display Year, Quarter, and Date Generated on the Proof of Coverage
Portal	Notices	40539	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall display Reference Number, Covered Member's Name, Mailing Address, Date of Birth on the Proof of Coverage
Portal	Notices	40540	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall display Carrier Name and Covered months per quarter for the Individual on the Proof of Coverage
Portal	Notices	40541	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall only consider effectuated enrollment in a health plan when determining Covered months for an Individual on the Proof of Coverage
Portal	Notices	40542	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall print a disclaimer text stating that the details on the Proof of coverage are valid as of the Generated Date displayed on the Proof of Coverage
Portal	Notices	40750	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall not trigger Proof of Coverage letter if there is no change in an Individual's enrollment or demographic details from the previous generation for proof of coverage .
Portal	Notices	40751	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall utilize QR code to prevent Proof of Coverage from getting forged
Portal	Notices	40752	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall generate Proof of Coverage in Spanish
Portal	Notices	40753	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall add Proof of Coverage letter available in Secure Mailbox
Portal	Notices	40754	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall collect consumers' consent to share their enrollment data with the network companies
Portal	Notices	40755	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall set up a new batch process with the the network companies to validate and send proof coverage for consumers who have provided consent to share their enrollment information.
Portal	Notices	40756	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall use the Electronic Signature Process that would require the user to enter their name and pin.
Portal	Notices	40757	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall allow users to update or end-date the consent.
Portal	Notices	40758	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall have audit trail/transaction for the consent functionality.
Portal	Notices	40759	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall allow users to specify with which companies to share information
Portal	Notices	40760	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall collect from consumer the phone number and email they have provided to each network company for which they provide consent to share with network companies.
Portal	Notices	40761	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) Shall send proof coverage for consumers who have provided consent to share their enrollment information with network companies.
Portal	Notices	40762	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall send proof of coverage in .xlsx format by SFTP file transfer protocol
Portal	Notices	40763	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall send following data elements in the file: driver's California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) Case ID, First Name, Last Name, DOB, Address including ZIP code, email address provided to network company as given during consent collection, phone number provided to network company as given during consent collection, date consent provided, consent end-date (or N/A if not applicable), QHP of enrollment, and an explicit "YES/NO" coverage indicator for each month of the applicable coverage quarter
Portal	Notices	48504	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall display the option of English for consumers and enrollers to view their notices if their preferred language is not English.
Portal	Notices	48506	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall add a confirmation modal when the Reprint option is selected on the Documents and Correspondence page.
Portal	Other Non-Health Services		
Portal	Other Non-Health Services	48503	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall add an option to the Voter Registration Page so that the system does not send them a Voter Registration card.
Portal	Provider/Plan Directory		
Portal	Provider/Plan Directory	47234	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall provide a link for clients to navigate to search for Family PACT providers on the familypact.org website using the link: https://familypact.org/provider-search/ in a new tab.
Portal	Provider/Plan Directory	47279	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall provide a link for Family PACT providers to navigate to search for other Family PACT providers on the familypact.org website in a new tab on behalf on clients.
Portal	Shop & Compare		
Portal	Shop & Compare	48740	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall replace references to "Health Carrier" with "Dental Carrier" in the static text on Dental pages.
Portal	Verify Application Information		
Portal	Verify Application Information	47267	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall allow the Family PACT provider to reaffirm that there are no changes to the client's previously entered information at each provider visit. by submitting a Report a Change (RAC) without any updates to the information.

Category	Sub Category	Req ID	Requirement
Portal	Verify Application Information	48224	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall present SOGI questions in the application flow in both SSA and Flexi-App during Intake, RAC, and Renewals.
Portal	Verify Application Information	48225	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall modify the PDF Application to include the SOGI questions in the Build Household section.
Portal	Verify Application Information	48226	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall make all SOGI questions optional in the California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) application and the data shall not to be used to determine the individuals eligibility
Portal	Verify Application Information	48227	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall display SOGI questions in the application flow for household members who are 12 years of age or older.
Portal	Verify Application Information	48244	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall deprecate the SOGI page from the Eligibility Results page
Portal	Web Portal Online Help		
Portal	Web Portal Online Help	47206	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall allow the user to hover over the Information Icon in the Family PACT application to get more information about the text.
Portal	Web Portal Online Help	47213	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall display the Office of Family Planning phone number and e-mail address for providing Family PACT assistance.
Portal	Web Portal Online Help	47214	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall display the phone number for providing users with Family PACT assistance via the Covered California Service Center.
Portal	Web Portal Online Help	47215	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall display messaging to the Family PACT user to seek admin assistance if a duplicate account is identified during account creation or application submission.
Preliminary Design Review (PDR)			
Preliminary Design Review (PDR)	General Requirement		
Preliminary Design Review (PDR)	General Requirement	43515	The Vendor shall prepare a Preliminary Requirements Traceability Matrix to include but not be limited to: A) Approach to Requirements Analysis and Traceability B) Summary of Findings C) List of Requirements D) List of Deliverables E) Requirements mapped to Deliverables F) Deliverables mapped to Requirements G) Requirements without matching Deliverables H) Deliverables without matching Requirements
Preliminary Design Review (PDR)	General Requirement	43517	The Vendor shall prepare an Information Security Risk Assessment (Preliminary) to include at a minimum: A) System Identification B) Risks and Safeguards
Preliminary Design Review (PDR)	General Requirement	43518	The Vendor shall prepare a System Security Plan (Preliminary) which documents the System's security level and describes managerial, technical and operational security controls, to include at a minimum: A) System Identification B) Security Controls Detail by area
Preliminary Design Review (PDR)	General Requirement	43519	The Vendor shall prepare a Test Plan (Preliminary) to include at a minimum: A) Test Schedules and Milestones B) Test Roles and Responsibilities for all test phases (including unit, integration, System, UAT, regression and performance) C) Test Planning and Preparation D) Test Data and Scenarios/Cases E) Test Execution F) Interface Testing G) Reports Testing H) Defect Tracking and Reporting I) Test Environments J) Metrics Collection and Assessment K) Entry and Exit Criteria L) Suspension and Resumption Criteria

Category	Sub Category	Req ID	Requirement
Preliminary Design Review (PDR)	General Requirement	43520	The Technical Architecture Diagrams (Final) consists of models, diagrams, tables, and narrative, which show the proposed solution's integration into CMS operations from both a logical and technical perspective. The Vendor shall prepare a Technical Architecture Diagrams (Final) deliverable to include at a minimum: A) Design Considerations B) System Architecture C) Data Design D) Human-Machine Interface E) Operational Scenarios F) Detailed Design G) System Integrity Controls H) External Interfaces
Preliminary Design Review (PDR)	General Requirement	43521	The Vendor shall prepare a Logical Data Model (Final) to include at a minimum: B) Participants Roles And Responsibilities C) Conceptual, Logical, And Physical Data Models E) LDM Fields F) LDM Relationship Views G) Logical Data Model (LDM) H) Data Flows Diagrams (DFD) I) LDM Data Dictionary / CRUD Matrix J) Appendix A:Logical Data Model Diagram K) Appendix B:Logical Data Model Matrix L) Appendix C:Data Flow Diagram M) Appendix D:LDM Data Dictionary N) Appendix E:Crud Matrix
Pre-Operational Readiness Review			
Pre-Operational Readiness Review	General Requirement		
Pre-Operational Readiness Review	General Requirement	43541	The Vendor shall prepare a Test Plan (Final) to include at a minimum: A) Test Schedules and Milestones B) Test Roles and Responsibilities for all test phases (including unit, integration, System, UAT, regression and performance) C) Test Planning and Preparation D) Test Data and Scenarios/Cases E) Test Execution F) Interface Testing G) Reports Testing H) Defect Tracking and Reporting I) Test Environments J) Metrics Collection and Assessment K) Entry and Exit Criteria L) Suspension and Resumption Criteria
Pre-Operational Readiness Review	General Requirement	43542	The Vendor shall develop and execute a Preliminary Implementation Plan to include at a minimum: A) Methodology B) Schedule including task start and end dates C) Roles and responsibilities of Vendor and Exchange teams D) Implementation Readiness and Checklists, including readiness criteria metrics E) Entry and Exit Criteria for beginning and completion of Implementation F) Proven Practices (demonstrate that the plan is based upon Proven Practices) G) Cutover Processes and Procedures H) Implementation Support Plans I) Contingency Plan J) Recovery Plan

Category	Sub Category	Req ID	Requirement
Pre-Operational Readiness Review	General Requirement	43543	The Implementation Plan (Preliminary) shall also detail all of the tasks, Implementation schedules and, the integration of Implementation planning with: A) Site Preparation, Installation and Certification for Infrastructure; B) Training Materials Development; C) Training Delivery; D) Organizational Change Management; E) Conversion (if any); F) Interface and System of record cutover; and G) Efficiency of procedures and work flow.
Pre-Operational Readiness Review	General Requirement	43544	The Vendor shall prepare and execute an Organizational Change Management Plan (Preliminary). The Plan shall entail the following activities and include, but not be limited to: A) Overall Approach and Schedule B) Roles and Responsibilities of Vendor and Exchange/State staff C) Process and role gap analysis of existing workflow and procedures (As Is/To Be Analysis) which should include "a day in the life of" study of people in the roles that will be impacted by the new System D) Gap Analysis between the existing environments and the new California Healthcare Eligiblity, Enrollment and Retention System (CalHEERS) environment E) Change Readiness Plan which shall include details regarding the change readiness process, inputs and outputs; readiness criteria; assessment methods; and change readiness tools utilized; G) Communications Strategies H) Tasks and Expected Results I) Method for Documenting and Dealing with Issues.
Pre-Operational Readiness Review	General Requirement	43552	The Vendor shall develop and submit a Service Center Management Plan as a stand-alone deliverable. The Service Center Management Plan shall include, at a minimum, the following components and corresponding descriptions: A) Approach to providing Service Center services B) Staffing Overview to include org charts, the number and type of Vendor and Exchange personnel needed to handle the Exchange Service Center requirements for Levels 1, 2, and 3, and roles and responsibilities of each level and position C) Detailed description of the Service Center application and tools, including but not limited to: I) Description of the Equipment and Software used to support the Service Center III) Approach to management and maintenance so that both the application and its knowledge base are kept current IV) Standard reports available for Exchange oversight of Service Center activities D) Detailed description of the functions performed and how they interface with other support activities for which the Vendor is responsible (e.g., problem reporting, tracking, and resolution) E) Description of the various categories of tickets, including prioritization and status/disposition F) Incident/ticket management processes including opening, diagnosing, escalating, resolving, and closing tickets as well as tracking, aging and reporting G) Service Center communication procedures including, but not limited to: I) Service Center telephone contact and Automated Call Distribution scripts II) Web-chat and email communication procedures and templates H) Automated Call Distribution (ACD) System monitoring I) Reports, including all planned reports and report templates J) Initial and ongoing Training
Pre-Operational Readiness Review	General Requirement	43553	The System shall manually search the knowledge base based on defined fields: a) Incident type category b) Specific subject c) Contact type d) Keywords
Pre-Operational Readiness Review	General Requirement	43554	The System shall track what knowledge content is used for specific incidents.
Pre-Operational Readiness Review	General Requirement	43555	The SCR shall be able to rate the usefulness of content as it relates to specific incident types (Yes or No - Useful).
Pre-Operational Readiness Review	General Requirement	43556	The Knowledge Management System shall be able to aggregate the usefulness ratings of SCRs of specific knowledge content.
Pre-Operational Readiness Review	General Requirement	43557	The Knowledge Management System shall be able to identify knowledge content that is not useful for resolving the associated incident type.
Pre-Operational Readiness Review	General Requirement	43558	The System shall identify SCR searches of the knowledge management system that generate too many results.
Pre-Operational Readiness Review	General Requirement	43559	The System shall identify SCR searches of the knowledge management system that result in too few results.
Pre-Operational Readiness Review	General Requirement	43562	The System shall restrict SCRs from some search types: a) SCRs cannot search by the Knowledge Base article # b) SCRs cannot perform Google search through CRM

Category	Sub Category	Req ID	Requirement
Pre-Operational Readiness Review	General Requirement	43563	The System shall allow a SCR to perform a manual search during an interaction with a Contact.
Pre-Operational Readiness Review	General Requirement	43564	The System shall auto-populate knowledge base content to the SCR based on knowledge content associated with the incident type.
Pre-Operational Readiness Review	General Requirement	43565	The System shall auto-populate knowledge base content to the SCR based on the subject associated with an incident created via the request contact form (email) channel.
Pre-Operational Readiness Review	General Requirement	43566	The System shall sort the knowledge content results after a search (manual or auto-search) associated with incident types by: a) Usefulness b) Date created/updated
Pre-Operational Readiness Review	General Requirement	43567	The System shall display knowledge content to the SCR during an interaction with a contact.
Pre-Operational Readiness Review	General Requirement	43569	The Knowledge Management System shall be able to track how often knowledge content is used in association with specific incident types.
Pre-Operational Readiness Review	General Requirement	43570	The Initial Service Center Management Plan must also include the following topic areas: K) Service Center review process to provide the Exchange Executive Director with regular updates on the status and activities of the Service Center operations L) Quality improvement process to search for improvements to handling and flow of Service Requests, communication with users and provide trend information that can help manage Service Requests, improve service to users and potentially prevent future incidents .
Pre-Operational Readiness Review	General Requirement	43571	The Vendor shall prepare and deliver a Service Center Build and Implementation Plan that describes the plan for readying the Service Center Facility, including installing Equipment and Software.
Pre-Operational Readiness Review	General Requirement	43572	The Vendor shall prepare a User Manual (Preliminary) to include at a minimum: A) Getting Started B) Using the System C) Troubleshooting & Support
Pre-Operational Readiness Review	General Requirement	43582	The Vendor shall prepare an Infrastructure Readiness document to include at a minimum: A) Logical and physical architectures and networks for all central and local components B) Technical diagrams and schematics for all central and local components C) Existing System infrastructure components that will continue to be used/leveraged as well as new infrastructural components. Identification of new infrastructure components that can be leveraged or reused by other State agencies D) Schedule for availability, including any phasing if applicable E) How all CMS technical requirements for MITA, SOA and cloud computing are addressed F) Infrastructure test plans
Pre-Operational Readiness Review	General Requirement	43586	The Vendor shall develop and implement a Preliminary Training Plan that addresses the following: A) Development and Delivery methods and strategies B) Development and Delivery schedules C) Development and Delivery Roles and responsibilities of Vendor and Exchange teams including training management, logistics, establishment of Facilities (as applicable), trainers and users/trainees/participants D) Curriculum, Milestones, tasks, dates, participants, critical resources E) Training content – For each user type and level: content of training to be provided, description of training materials, training development and delivery methods, and location of training F) Training Delivery Sites, Facilities, and Equipment according to the training schedules G) Training Delivery tracking H) Training assessment and retraining I) Ongoing training
Pre-Operational Readiness Review	General Requirement	43587	The Vendor shall prepare a Test Report (Preliminary) to include at a minimum: A) Summary Assessment B) Detailed Test Results C) Variances D) Test Incidents E) Recommendations

Category	Sub Category	Req ID	Requirement
Pre-Operational Readiness Review	General Requirement	43588	The Vendor shall prepare a Data Use/Data Exchange/ Interconnection Security Agreement (Preliminary) to address and include the following information at a minimum: The Data Use Agreement (DUA) is developed by the Business Owner and Project Manager and initiated in the Design Phase, continued throughout the Development Phase and Test Phase, and completed in the Implementation Phase. A DUA is a legal binding agreement between a Federal agency and an external entity (e.g., contractor, private industry, academic institution, other Federal government agency, or State agency), when an external entity requests the use of personal identifiable data that is covered by the Privacy Act of 1974. The agreement delineates the confidentiality requirements of the Privacy Act, security safeguards, and the Federal agency's data use policies and procedures. The DUA serves as both a means of informing data users of these requirements and a means of obtaining their agreement to abide by these requirements. Additionally, the DUA serves as a control mechanism through which the Federal agency can track the location of its data and the reason for the release of the data. A DUA requires that a System of Record Notice be in effect, which allows for the disclosure of the data being used. There are five templates available depending upon need and are as follows: A) New Data Use Agreement B) Update to an Existing Data Use Agreement C) Amendment to an Existing Data Use Agreement D) Disproportionate Share Hospital Data Use Agreement (DSH) E) Disproportionate Share Hospital Data Use Agreement (cost reporting periods that include December 8, 2004 and thereafter) NOTE: The DUA templates can be found on the CMS internal Forms Locator website. More information on any of the Data Use Agreements can be found in the Privacy Office section.
Pre-Operational Readiness Review	General Requirement	43590	Information Security Risk Assessment (Final) A) Introduction B) System Identification C) Risks and Safeguards
Pre-Operational Readiness Review	General Requirement	43591	The Vendor shall prepare a System Security Plan (Final) which documents the System's security level and describes managerial, technical and operational security controls, to include at a minimum: A) System Identification B) Security Controls Detail by area
Pre-Operational Readiness Review	General Requirement	43592	The Vendor shall prepare an Automated Code Review Results deliverable to include at a minimum: A) Report with results from development code reviews that identifies software security vulnerabilities.
Pre-Operational Readiness Review	General Requirement	43593	The Vendor shall prepare a Business Product (Preliminary) to include at a minimum: A) Overview of the Systems solution delivered for the release B) Release version identification C)Hardware and software acquisition and installation status D)Data conversion issues and status E) Technical and function documentation status
Pre-Operational Readiness Review	General Requirement	43594	The Vendor shall prepare the Training Materials (Preliminary) for each user type and level to include at a minimum: A) Content of training to be provided A) Web-based instruction B) Instructor guides C) Student guides D) Exercise materials E) Training records
Pre-Operational Readiness Review	General Requirement	43595	The Vendor shall prepare an Infrastructure Readiness Complete document to include at a minimum: A) Validation that the Infrastructure Design has been configured, installed, tested (including performance, load, stress and volume testing), meets all requirements and is certified as operational. B) Results from testing Systems and components that will utilize the infrastructure and were identified in the Infrastructure Design.
Project Baseline Review	General Requirement		
Project Baseline Review	General Requirement		
Project Baseline Review	General Requirement	43499	The Vendor shall prepare a Release Plan that describes what portions of the System functionality will be implemented in which release and why; this plan should include at a minimum: A) Release Approach B) Release Schedule

Category	Sub Category	Req ID	Requirement
Project Baseline Review	General Requirement	43507	The Vendor shall prepare a Privacy Impact Assessment (Preliminary) deliverable to ensure no collection, storage, access, use or dissemination of identifiable respondent information that is not both needed and permitted. This deliverable must include at a minimum: A) Summary of PIA Required Questions B) PIA Required Information C) System Characterization and Data Characterization D) Information Sharing Practices E) Web Site Hosting Practices F) Administrative Controls G) Technical Controls H) Physical Access I) Approval/Demotion J) Percent Complete
Project Baseline Review			The Vendor shall prepare and submit Monthly Work Plan Updates to include at a minimum: A) Summary of Updates B) Updates to tasks and task start and end dates and percent complete C) Comparison to the approved baseline D) Comparison of actual level of effort against estimated level of effort E) Revised estimates to complete and estimates at completion F) Substantive changes in resource assignments G) Metrics associated with tasks on the critical path that did not start or complete on time and the corresponding number of days past the scheduled start or completion date
Project Baseline Review			The Vendor shall prepare PMP Updates in conjunction with the Federal gate reviews.
Project Baseline Review			The Vendor shall prepare the Master Facility Acquisition and Installation Plan to include, at a minimum: A) Overview and description of all Facilities, including any temporary Facilities. B) General approach to acquisition, preparation, and installation. C) Master schedule associated with securing, preparing, modifying and installing all proposed permanent Facilities. D) Staff and roles and responsibilities E) A complete description of each Facility, including office floor plans, planned leasehold improvements/modifications and hardware component footprints F) Work Plan defining all Site acquisition, preparation, and installation tasks and milestones G) A checklist of Requirements to demonstrate compliance with the State Fire Marshall, California Building Code (CBC), Americans with Disabilities Act (ADA) and Sustainable Measure Procedures

Category	Sub Category	Req ID	Requirement
Project Baseline Review		43511	The Vendor shall prepare the Equipment and Software Acquisition Plan to identify all Equipment, Software and corresponding maintenance required to support the System. This deliverable must take the form of an Excel spreadsheet or database which includes, at a minimum: 1. Item Number. 2. Description. 3. Specification. 4. Vendor. 5. Planned Purchase Month. 6. Planned Quantity. 7. Estimated Unit Price. 8. Total Estimated Price (Planned Quantity x Estimated Unit Price). 9. Estimated Shipping. 10. Estimated Tax. 11. Estimated Total (Sum of items 8, 9, and 10). 12. Estimated Monthly Payment (inclusive of financing). 13. Planned Purchase or Lease Indicator. 14. Planned Finance Rate. 15. Planned Shipping Location (by Facility for sales tax calculation purposes). 16. Actual Purchase Month. 17. Quantity. 18. Actual Unit Price. 19. Actual Total Price (Quantity x Actual Unit Price). 20. Actual Shipping. 21. Actual Tax. 22. Actual Total Purchased. 23. Actual Lease Payment (inclusive of financing). 24. Actual Purchase/Finance Indicator. 25. Finance Rate, if applicable. 26. Actual Shipping Location. 27. Maintenance information, including term, annual amounts and support level/type 28. Equipment and Software life expectancy and end date.
	General Requirement		
Project Baseline Review		43512	The Equipment and Software Acquisition Plan must also include: 1. Totals by Hardware Financed, Hardware Purchased, Hardware Maintenance, Total Hardware, Software Purchased, Software Maintenance and Total Software. 2. The number and location of Equipment spares. 3. A change log that includes the ID number, Invoice data affected, a description of the event, indicators for the area of impact and budget impact 4. A history of changes to Equipment and Software planned and purchased during the Term of the Agreement. Specifically, rows in the Excel workbook should not be deleted from the Plan, but instead marked and removed from the totals.
	General Requirement		
Project Baseline Review		43513	The Equipment and Software Acquisition Plan must be updated each year to reflect the results of the Annual Technology Refresh Assessment and Plan. The Vendor must also update the Plan on a regular and as-needed basis to identify changes to planned purchases and estimated and actual costs needed for budget and Contract management purposes. The Excel workbook or database must be kept current so it can be produced with no more than a few days notice.
	General Requirement		
Project Baseline Review		43514	The Vendor shall prepare Weekly and Monthly Status Reports to include at a minimum: A) Summary of overall progress B) Key tasks, deliverables and milestones completed during the applicable period. C) Team progress/status summaries D) Upcoming key tasks, deliverables and milestones for the next period E) Issues F) Risks G) Action Items
	General Requirement		

Category	Sub Category	Req ID	Requirement
Project Baseline Review		43589	The Project Management Plan must include the Initial Work Plan and must address the following subject areas at a minimum: A) Project Scope B) Overall Project Management Approach and PMO C) Communication Management D) Scope Management E) Issue Management F) Risk Management G) Schedule and Work Plan Management H) Quality Management I) Project Status Reporting J) Deliverable Management and List of Deliverables K) Requirements Management L) Configuration Management M) Contract Management N) Project Organization and Staff Management O) Budget Management
	General Requirement		
Project Baseline Review		43600	The Vendor shall prepare a Initial Work Plan in Microsoft Project, be and submitted within 21 days of contract start and include, at a minimum, the following information: A) Overall schedule with D&I and initial O&M phases. B) All major tasks, deliverables, and milestones with start and end dates, duration in days and predecessor and successor dependencies. C) All deliverable review and approval timeframes. D) A Gantt chart view showing all major tasks, deliverables and milestones. E) A critical path view showing critical path major tasks, deliverables and milestones. F) Vendor and Exchange resources assigned to each major task.
	General Requirement		
Project Baseline Review		43611	The Project Process Agreement (Final) must include at a minimum: Authorizes and documents the justifications for using, not using, or combining specific stage gate reviews and the selection of specific work products. A) Project Name B) Project Description C) Project Release D) Review Artifacts List: i) Artifact Name ii) Core/Recommended iii) Artifact Definition/Record iv) Agreement for the project's initial release: Provide (New), Combine, Waive, New Project Defined Artifact v) Justifications for Waive or Combine vi) Author vii) Justification & Notes
	General Requirement		
Project Management			
Project Management	General Requirement		
Project Management		38948	Work packages will be used to identify the scope of tasks, anticipated levels of efforts, and preliminary timelines, which upon approval will be reflected in the Reports Management sub-project schedule. Work will not begin until each work package is approved. • The Work Package will have overall time, cost and scope defined • Work Packages will be done using a flow approach (as detailed work is defined, a Work Package will be drafted) • Work Packages will include a schedule, FTE hours needed and description of the expected results of the effort (artifact) • Work Packages will include a documentation and knowledge transfer plan • No work can be billed to the CR without an approved Work Package • The burn rate for time and cost will be tracked as Work Packages are completed • A standing meeting will be used to review / approve Work Packages
	General Requirement		
Project Management	General Requirement	38949	Work packages (ad hoc queries, one-time use, etc.) will be used and defined via a standard template which includes the scope of work effort (easy, moderate, difficult) and priority to facilitate expediting approval processes based on the business priorities.
Project Management		44252	The Vendor shall provide and employ a Project Management methodology consistent with: A) Project Management Institute (PMI) Project Management Body of Knowledge (PMBOK®) B) CMS System Lifecycle Framework guidelines for project management.
	General Requirement		
Project Organization & Staff Mgmt			
Project Organization & Staff Mgmt	General Requirement		

Category	Sub Category	Req ID	Requirement
Project Organization & Staff Mgmt	General Requirement	44262	The Vendor shall indicate area of responsibility by team on the project Organization Chart as well as maintain position descriptions for the Vendor team. The Vendor must update these position periodically, but no less than quarterly, and make them readily available and accessible by all Project staff.
Project Organization & Staff Mgmt	General Requirement	44263	The Vendor shall document and maintain planned Staff assignments for Vendor staff, including position/title, roll-on and roll-off dates, full-time vs. part-time, and the extent to which any work will be done offsite. This information must be readily available to and accessible by all Project staff.
Project Organization & Staff Mgmt	General Requirement	44303	The Vendor shall document and maintain organization charts that include Vendor, Exchange PMO, Exchange staff, QA, IV&V and oversight consulting teams, at both summary and detailed levels (with details down to each individual). The Vendor must update these organization charts on an as-needed basis, but no less than monthly, and make them readily available and accessible to all Project staff.
Project Organization & Staff Mgmt	General Requirement	44305	The Vendor shall describe how Vendor staff will interact with, utilize, and collaborate with State staff for all work performed by the Vendor.
Project Organization & Staff Mgmt	General Requirement	44306	The Vendor shall identify assumptions and expectations for State staff who will be working along side Vendor and subcontractor staff resources identified in the Vendor organizational chart.
Project Organization & Staff Mgmt	General Requirement	44307	The Vendor shall notify the California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) Project Director as soon as possible and promptly develop and complete transition and training plans for the new or reassigned replacement staff when an unplanned, early Vendor employee or Subcontractor departure from the Project is unavoidable.
Project Organization & Staff Mgmt	General Requirement	44308	In the event of any performance concerns for Vendor or Subcontractor staff, the Vendor shall notify the California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) Project Director as soon as possible, and jointly discuss the approach for resolving the concern.
Provider Directory			
Provider Directory	Custom Grouping Rules		
Provider Directory	Custom Grouping Rules	42061	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall display the activation status of a file (Provider/Facility).
Provider Directory	Custom Grouping Rules	42062	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall display gear box functionalities to activate provider/facility file for consumer visibility
Provider Directory	Custom Grouping Rules	42063	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall provide an activation date if the file has been updated
Provider Directory	Custom Grouping Rules	42064	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall provide a secondary file upload through a batch - Provider File - Facility File
Provider Directory	Custom Grouping Rules	42066	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) batch shall process only latest files uploaded in the batch location
Provider Directory	Custom Grouping Rules	42068	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) batch shall maintain the audit history and provider data file details in a database
Provider Directory	Custom Grouping Rules	42069	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall provide a batch process to activate the files for consumer visibility uploaded via the batch process
Provider Directory	Disenrollment		
Provider Directory	Disenrollment	42067	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) batch shall process .txt files
Provider Directory	Disenrollment	42070	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall confirm that all batch processes related to upload or activation for consumer visibility shall be displayed in the UI
Provider Directory	Health & Dental Plan Shopping		
Provider Directory	Health & Dental Plan Shopping	42038	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall maintain a Provider Directory functionality. The provider directory feature will be used to power provider search on Enrollment Portal during Plan Selection.
Provider Directory	Health & Dental Plan Shopping	42039	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall allow the issuer admins to access the provider management functionality from the issuer admin portal
Provider Directory	Health & Dental Plan Shopping	42040	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall allow the admin users to navigate to the provider management file page
Provider Directory	Health & Dental Plan Shopping	42041	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall provide the issuer admin users the functionality to select the type of data files: 1. Provider 2. Facility
Provider Directory	Health & Dental Plan Shopping	42042	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall allow the issuer admin users to select the file and upload the file into the California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) system
Provider Directory	Health & Dental Plan Shopping	42043	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall display the file name when the file is selected by the admin user.
Provider Directory	Health & Dental Plan Shopping	42044	If no file selected, the indicator/message, will be shown to the user.
Provider Directory	Health & Dental Plan Shopping	42045	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall display an upload button which will allow user to start the upload process of Provider/Facility files.
Provider Directory	Health & Dental Plan Shopping	42047	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall display text error message "file exceeds 100MB" if Provider/Facility file exceeds limit of 100MB
Provider Directory	Health & Dental Plan Shopping	42048	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall display text success message if provider/facility file is uploaded successfully
Provider Directory	Health & Dental Plan Shopping	42049	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall provide the issuer admin the ability to view the provider and facility files that are uploaded in the system

Category	Sub Category	Req ID	Requirement
Provider Directory	Health & Dental Plan Shopping	42050	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall display additional details for each uploaded provider/facility files. (Refer child BR's)
Provider Directory	Health & Dental Plan Shopping	42051	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall provide the file name with the extension
Provider Directory	Health & Dental Plan Shopping	42052	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall provide the username, with the first name and last name of the user
Provider Directory	Health & Dental Plan Shopping	42053	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall indicate the type of the file uploaded. (Provider File/Facility File)
Provider Directory	Health & Dental Plan Shopping	42054	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall display the validation status of the file uploaded
Provider Directory	Health & Dental Plan Shopping	42055	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall provide the date on which the file(Provider/Facility) was most recently uploaded.
Provider Directory	Health & Dental Plan Shopping	42056	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall provide the ability to display the link related to the logs
Provider Directory	Health & Dental Plan Shopping	42057	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall allow the users to click on the logs link and download the logs file
Provider Directory	Health & Dental Plan Shopping	42058	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall generate error logs alongside the reason of error if the following fields are not populated correctly while uploading Provider Facility files in the provider directory.
Provider Directory	Health & Dental Plan Shopping	42059	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) Provider Directory error log file shall provide the following details: - Upload Date and Time - File Name - Number of records - Records Passed - Records Failed - Error message for each error
Provider Directory	Health & Dental Plan Shopping	42060	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall allow the users to download the uploaded (Provider/Facility)file
Provider Directory	Shop & Compare		
Provider Directory	Shop & Compare	42046	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall display a text error message if file selected does not match the allowed file format.
Provider Directory	Shop & Compare	42065	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) batch shall perform the validation of the file and generate the error logs
Quality Management			
Quality Management	General Requirement		
Quality Management	General Requirement	44243	The Vendor shall establish, implement and update quality management processes that focus on building quality into instead of correcting errors downstream. These processes must address how Services and Deliverables, including Production Releases will: A) Meet defined Requirements, business and performance objectives, and user expectations. B) Be as free of errors as possible and meet all defined Acceptance criteria. C) Meet corresponding metrics must be defined and captured to measure all aspects of quality by phase or key task
Quality Management	General Requirement	44244	The Vendor shall define, implement, and report on a continuous process improvement program to address all phases and key functional areas of the California Healthcare Eligibility, Enrollment and Retention System (CalHEERS). This continuous Process improvement initiative must address how best practices can be identified, applied, and institutionalized.
Quality Management	General Requirement	44245	The Vendor shall describe its approach, expectations, and assumptions for coordinating and working with QA, IV&V and oversight consultants as part of the overall Quality management methodology.
Quality Management	General Requirement	44246	Once California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) is operational, the Vendor shall conduct semi-annual California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) User Satisfaction Surveys; consolidate and report results; make recommendations for changes based on those results; and implement approved recommendations.
Quality Management	General Requirement	44293	The Vendor shall assist the State in preparing Oversight/Stakeholder Reports to provide project information.
Regression			
Regression	Non-Functional Requirement		
Regression	Non-Functional Requirement	47514	Regression Automation Suite Update for CR 247474
Regression	Non-Functional Requirement	47515	Regression Automation Suite Update for CR 250132
Regression	Non-Functional Requirement	47516	Regression Automation Suite Update for CR 253359
Regression	Non-Functional Requirement	47517	Regression Automation Suite Update for CR 195948

Category	Sub Category	Req ID	Requirement
Regression	Non-Functional Requirement	47518	Regression Automation Suite Update for CR 234868
Regression	Non-Functional Requirement	47519	Regression Automation Suite Update for CR 247478
Regression	Non-Functional Requirement	47520	Regression Automation Suite Update for CR 250133
Regression	Non-Functional Requirement	47880	Regression Automation Suite Update for CR 213355
Regression	Non-Functional Requirement	47882	Regression Automation Suite Update for CR 262404
Regression	Non-Functional Requirement	47883	Regression Automation Suite Update for CR 185143
Regression	Non-Functional Requirement	47884	Regression Automation Suite Update for CR 219978
Regression	Non-Functional Requirement	47885	Regression Automation Suite Update for CR 228956
Regression	Non-Functional Requirement	47886	Regression Automation Suite Update for CR 228985
Regression	Non-Functional Requirement	47887	Regression Automation Suite Update for CR 240417
Regression	Non-Functional Requirement	47888	Regression Automation Suite Update for CR 250237
Regression	Non-Functional Requirement	47905	Regression Automation Suite Update for CR 216655
Regression	Non-Functional Requirement	48453	Regression Automation Suite Update for CR 178286
Regression	Non-Functional Requirement	48454	Regression Automation Suite Update for CR 224268
Regression	Non-Functional Requirement	48455	Regression Automation Suite Update for CR 243176
Regression	Non-Functional Requirement	48456	Regression Automation Suite Update for CR 255205
Regression	Non-Functional Requirement	48478	Regression Automation Suite Update for CR 248898
Regression	Non-Functional Requirement	48712	Regression Automation Suite Update for CR 61104
Regression	Non-Functional Requirement	48713	Regression Automation Suite Update for CR 206195
Regression	Non-Functional Requirement	48714	Regression Automation Suite Update for CR 229850
Regression	Non-Functional Requirement	48715	Regression Automation Suite Update for CR 248899
Regression	Non-Functional Requirement	48716	Regression Automation Suite Update for CR 261916
Regression	Non-Functional Requirement	48717	Regression Automation Suite Update for CR 261916
Regression	Non-Functional Requirement	49026	Regression Automation Suite Update for CR 282633
Regression	Non-Functional Requirement	49027	Regression Automation Suite Update for CR 285590
Regression	Non-Functional Requirement	49028	Regression Automation Suite Update for CR 266494
Regression	Non-Functional Requirement	49029	Regression Automation Suite Update for CR 277413
Regression	Non-Functional Requirement	49030	Regression Automation Suite Update for CR 285944

Category	Sub Category	Req ID	Requirement
Regression	Non-Functional Requirement	49329	Regression Automation Suite Update for CR 249764
Regression	Non-Functional Requirement	49331	Regression Automation Suite Update for CR 250226
Regression	Non-Functional Requirement	49332	Regression Automation Suite Update for CR 251910
Regression	Non-Functional Requirement	49333	Regression Automation Suite Update for CR 252573
Regression	Non-Functional Requirement	49336	Regression Automation Suite Update for CR 252586
Regression	Non-Functional Requirement	49337	Regression Automation Suite Update for CR 255968
Regression	Non-Functional Requirement	49339	Regression Automation Suite Update for CR 262000
Regression	Non-Functional Requirement	49341	Regression Automation Suite Update for CR 272413
Regression	Non-Functional Requirement	49342	Regression Automation Suite Update for CR 274025
Regression	Non-Functional Requirement	49348	Regression Automation Suite Update for CR 282926
Regression	Non-Functional Requirement	49769	Regression Testing for CR 233034
Regression	Non-Functional Requirement	49770	Regression Testing for CR 253341
Regression	Non-Functional Requirement	49771	Regression Testing for CR 272295
Regression	Non-Functional Requirement	49772	Regression Testing for CR 287522
Regression	Non-Functional Requirement	49773	Regression Testing for CR 287884
Regression	Non-Functional Requirement	49774	Regression Testing for CR 199832
Release Management			
Release Management	General Requirement		
Release Management	General Requirement	43762	The Vendor shall be responsible for resolving all identified defects regardless of priority (unless otherwise mutually agreed upon).
Release Management	General Requirement	43763	The Vendor shall provide a monthly Report of outstanding defects.
Release Management	General Requirement	43766	The Vendor shall be responsible for working closely and cooperatively with the Exchange in providing notification of content for each new System release or major feature addition or change, as requested per the Change Request Process. The following notification related to changes to baseline scope would require a change request. Notification includes: A) Job Aids B) Open Office Sessions/Webinars In addition, release Notes are to be provided with each release without a change request.
Release Management	General Requirement	43767	The Vendor must provide a pre-Release Open Office Session/Webinar prior to a major releases, scheduled to a mutally agreeable time.
Renewal			
Renewal	Case Management		
Renewal	Case Management	38956	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall close MAGI Medi-Cal Renewals when there is an open MAGI Medi-Cal Renewal and all MAGI Medi-Cal members are found Ineligible or discontinued.
Renewal	Case Management	38957	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall perform a data fix to close all open Medi-Cal Renewals when the following criteria is met: • The case is in Medi-Cal Renewal mode and there are no: o 'Eligible' MAGI Medi-Cal members, o 'Conditionally Eligible' MAGI Medi-Cal members, or o 'Pending' MAGI Medi-Cal members on the case.
Renewal	Eligibility Determination		
Renewal	Eligibility Determination	38320	The California Healthcare Eligiblity, Enrollment and Retention System (CalHEERS) system shall enable the consent for verification link on the portal home page during Renewal Mode.

Appendix A-4 - SOW Exhibit A - System Requirements Specification
(Extracted from CalHEERS RTM)

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October 31, 2025

Category	Sub Category	Req ID	Requirement
Renewal	Eligibility Determination	38321	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) system shall evaluate consumers for APTC/CSR eligibility when they are actively renewing during renewal mode and have not explicitly provided consent for verification (i.e. checked the box).
Renewal	Eligibility Determination	38322	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall passively renew cases with multiple enrollments.
Renewal	Eligibility Determination	38823	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) system shall update the fair share adjustment percentage amount for the benefit year 2018.
Renewal	Eligibility Determination	38839	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) system shall continue the carry forward status for the next benefit year during renewals.
Renewal	Eligibility Determination	46472	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall populate the Renewal due date on the consumer home page with Renewal Mode Start Date + configurable number of days when: - the case is moved into Renewal Mode - the system date is still within Renewal Mode Start Date + configurable number of days; AND - NOD12 has not yet been generated
Renewal	Eligibility Determination	46473	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall populate the Renewal due date on the consumer home page with the DROP date for the case when -the case is moved into Renewal Mode - the system date is past the Renewal Mode Start Date + configurable number of days, AND - the NOD12 has not yet been generated
Renewal	Eligibility Determination	46479	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall create a new DROP Sweep sub-run reason to stage individuals for Passive Renewals if they transition from MAGI Medi-Cal/MCAP/CCHIP to APTC/CAPS/CSR/CCP in the current year and are auto-plan selected after the case has completed either California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) Active or Passive renewals for the remaining HH members regardless of whether Renewal Mode has been closed for the case or not.
Renewal	Eligibility Determination	46481	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall update the RAC completion date on the Account Home screen to display the Application Expiration Date as the last day of the Renewal period for Renewal Report a Change (RRC) applications when the Account Home screen is accessed after the auto renewal date for the case.
Renewal	Enrollment		
Renewal	Enrollment	38355	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall auto-enroll individuals who are completely Contingent Eligible for all Covered CA Programs (CCP, APTC and CSR).
Renewal	Enrollment	38356	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall attempt to auto-enroll individuals who were eligible for a Silver Cost Sharing plan but are currently enrolled in a non-Cost Sharing plan.
Renewal	Enrollment	38357	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall attempt to auto-enroll individuals who were eligible for a AI/AN Cost Sharing plan but are currently enrolled in a non-Cost Sharing plan.
Renewal	Enrollment	38824	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) system shall update open enrollment period and renewal period for the benefit year 2018.
Renewal	Enrollment	38836	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) system shall pick up consumers in the renewals last batch sweep if at least one member in the household is currently in Enrolled/Pending status.
Renewal	Enrollment	42141	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall send a Yes or No response to carriers for the Hispanic, Latino or Spanish origin demographic question
Renewal	Enrollment	42142	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall update the value for the "Other Hispanic, Latino, or Spanish Origin" in the "PersonEthnicityText" tag in Account Transfer
Renewal	Enrollment	42143	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall send "Other Race" in the "PersonRaceText" if the consumer selects "Other" for their race
Renewal	Enrollment	42421	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall run the existing Bronze to Silver Crosswalk BOT process for 2023 renewals.
Renewal	Enrollment	44581	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall passively renew consumers who are enrolled in a Bronze plan into the Silver version of that plan if they qualify for a \$0 net premium for that plan.
Renewal	Enrollment	44582	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall exclude cases with expired consent from the new passive renewal crosswalk process
Renewal	Enrollment	44583	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall excludes cases currently in Carry Forward Status from the new passive renewal crosswalk process
Renewal	Enrollment	44584	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall trigger QHP auto enrollment via BOT process for the new passive renewal crosswalk population if the final QHP premium amount is determined to be \$0. QDP auto enrollment will also be completed if the current QDP plan is available for the next year.
Renewal	Enrollment	44585	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall exclude cases going into Carry Forward Status during the Annual Eligibility Determination from subsequent enrollment into a new Silver Pan via BOT process.
Renewal	Enrollment	44586	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall capture the Pre and Post results with the following attributes via BOT process whenever available: Case #, current/future - QHP Plan Type, QHP Metal Tier, Carrier, Plan Name, current/future – QDP Plan Type, Carrier, Plan Name, User ID, Timestamp
Renewal	Enrollment	44587	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall suppress the Renewals notice (NOD12) from the new passive renewal crosswalk mapping population
Renewal	Enrollment	44588	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall send the Eligibility notice (NOD01) with cover letter for the new passive renewal crosswalk mapping population
Renewal	Enrollment	44589	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall suppress the Enrollment notice (NOD69) from the new passive renewal crosswalk mapping population
Renewal	Enrollment	44590	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall add a case note indicating that the case was included in the new passive renewal crosswalk process
Renewal	Enrollment	44591	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) case note shall indicate if the bot was successssfully able to renew the enrollment or not
Renewal	Enrollment	46027	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall enroll households that are in the Catastrophic Age Out Passive Renewal fallout populations through BOT enrollment automation processes.
Renewal	Enrollment	46028	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall enroll the aged out member in the bronze metal tier version of the product and carrier as their current plan based on the carrier crosswalk mapping.
Renewal	Enrollment	46029	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall enroll the remaining HH members in the same product and carrier based on their current CMS Plan ID.

Appendix A-4 - SOW Exhibit A - System Requirements Specification
(Extracted from CalHEERS RTM)

Category	Sub Category	Req ID	Requirement
Renewal	Enrollment	46030	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall add a case note indicating that the case was included in the automated Catastrophic Age Out process that will indicate if the bot was successssfully able to renew the enrollment or not
Renewal	Enrollment	46031	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall send the Eligibility notice (NOD01) with cover letter for the new passive renewal crosswalk mapping population
Renewal	Enrollment	46032	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall suppress the Enrollment notice (NOD69) from the new passive renewal crosswalk mapping population
Renewal	Enrollment	46033	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) case note shall indicate if the bot was successssfully able to renew all enrollments in a household or not
Renewal	Enrollment	46036	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall separate over aged dependents from their policyholder's health plan through BOT enrollment automation processes.
Renewal	Enrollment	46037	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall enroll any over aged dependent in the same product, carrier and metal tier as their current plan (plan that the household is enrolled in for the upcoming benefit year) based on their current plan's CMS Plan ID.
Renewal	Enrollment	46038	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall enroll each over aged dependent (identified in the over aged dependent population provided by CCA) in a household into separate enrollment plans.
Renewal	Enrollment	46039	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall only separate over aged dependents through the BOT enrollment automation process if renewals for the upcoming benefit year have been completed for the household.
Renewal	Enrollment	46040	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall add a case note indicating that the case was included in the automated Over Aged Dependent process that will indicate if the bot was successssfully able to update the enrollment or not
Renewal	Enrollment	46482	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall custom group Medicare recipients in their own enrollment group during Passive Renewals for the next benefit year.
Renewal	Enrollment	46483	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall enroll the Medicare recipients in the same product, carrier and metal tier as their current plan, if it is still available for the next benefit year.
Renewal	Enrollment	46484	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall enroll the remaining eligible HH members into an appropriate crosswalk plan for the next benefit year.
Renewal	Enrollment	46485	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall auto-enroll individuals transitioning from MAGI Medi-Cal/MCAP/CCHIP to APTC/CSR/CAPS/CCP Eligibility when eligibility is determined manually via Active renewals but plan selection is not complete.
Renewal	Enrollment	46486	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall passively renew all eligible HH members who are enrolled in a Qualifying Health Plan (QHP) which is in pending or confirmed status in their same plan, or cross walked plan, if they have not actively renewed or opted out of renewals before the passive renewal job processes the case
Renewal	Enrollment	46487	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall passively renew all eligible HH members who are enrolled in a Qualifying Dental Plan (QDP) which is in pending or confirmed status in their same plan, or cross walked plan, if they have not actively renewed before the passive renewal job processes the case
Renewal	General Requirement		
Renewal	General Requirement	38339	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall provide for the functionality to map plans which have been assigned a new plan ID from one benefit year to another. (Note: This requirement applies to CCP/APTC/CSR programs only)
Renewal	Notices		
Renewal	Notices	38359	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) system shall update content of NOD11 and generate updated NOD11 by mid-August.
Renewal	Notices	38360	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) system shall generate the updated NOD11 (combined) regardless of NOD11a or NOD11b triggers.
Renewal	Notices	38361	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) system shall generate Babel page for the English version only.
Renewal	Notices	39877	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall discontinue NOD12B and NOD12C.
Renewal	Notices	39878	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall send NOD12A to all the recipients who originally received the NOD12A, NOD12B or NOD12C.
Renewal	Notices	39886	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall make language updates to NOD12A.
Renewal	Notices	39887	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall make language updates to NOD12D.
Renewal	Notices	42426	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall provide the functionality to issue notice to qualified individuals who are up for annual eligibility redetermination to inform them that their consent for verification is required if they did not provide consent on their initial application (Consent for Verification = 0 years).
Renewal	Renewal		
Renewal	Renewal	38192	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) system shall determine if an individual qualifies for the CCP/APTC/CSR redetermination process by checking whether the individual was eligible or conditional eligible for CCP/APTC/CSR during the previous benefit year.
Renewal	Renewal	38193	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) system shall run redetermination but not attempt to auto-enroll a CCP/APTC/CSR qualified individual who never selected a health plan during the previous benefit year.
Renewal	Renewal	38194	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall soft pause a MAGI Medi-Cal consumer who meet the soft pause criteria when the consumer is not eligible for MAGI Medi-Cal or MAGI Medi-Cal Consumer Protection Programs during the MAGI Medi-Cal Renewals process.
Renewal	Renewal	38195	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall create an indicator to identify soft-paused consumers who are being sent to SAWS for Non-MAGI evaluation when consumer is not eligible for MAGI Medi-Cal and MAGI Consumer Protection Programs during the MAGI Medi-Cal Renewals process
Renewal	Renewal	38196	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall transfer eligibility reasons to SAWS when status is ineligible or soft pause.

Category	Sub Category	Req ID	Requirement
Renewal	Renewal	38210	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall modify the Plan Selection page to indicate the consumer's current plan as the consumer shops for different plans. [Placeholder: Checking with GI on feasibility of solution] (Note: This applies to CCP only as plan enrollment is not available online for Medi-Cal).
Renewal	Renewal	38211	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall finalize the projected eligibility resultsfor CCP/APTC/CSR consumers only after 33 days have past or authorization has been received by the individual.
Renewal	Renewal	38214	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall modify the Preview Plans functionality to allow consumers to select which benefit year to apply to the search criteria.
Renewal	Renewal	38217	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall calculate & display CSR changes on the Enrollment Summary page. [Placeholder: Checking with GI on feasibility of solution]
Renewal	Renewal	38324	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) system shall close Exchange Renewal Mode for enrollment after December 15th for all enrollments.
Renewal	Renewal	38342	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall update the fair share adjustment percentage amount for the benefit year 2020.
Renewal	Renewal	38377	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) system shall provide the functionality to send maintenance transactions to notify Issuer of changes to the plan ID. (Note: This requirement applies to CCP/APTC/CSR programs only)
Renewal	Renewal	38821	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) system shall populate the Renewal due date on the consumer home page with the 30th day after the Renewal Mode start date when the case is moved into Renewal Mode and the NOD12 has not yet been generated.
Renewal	Renewal	38822	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) system shall display a default value of 12/15 of the current benefit year as the renewal due date if the System date is past the 30th day after the Renewal mode start date and the NOD12 has not yet been generated.
Renewal	Renewal	38835	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) system shall hold HX20 ESAC-1, HX20 ESAC-2, HX12, HX05, and HX40 MEDS transactions for renewals future benefit year and release the transactions when MEDS can process the transaction.
Renewal	Renewal	39549	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall populate the Renewal Prep Batch tables with enrollment data from GI.
Renewal	Renewal	39554	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall specify the previous calendar year (or years) when requesting SSA yearly income from the Renewal and Re-Determination Verification (RRV).
Renewal	Renewal	39832	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall display Voter Registration Page during Active Renewal.
Renewal	Renewal	40351	Medi-Cal – Redeterminations (RVs) 1, 5 report • Total number of MAGI RVs done automatically via electronic periodic verification. • The total monthly number of MAGI and non-MAGI cases each county is case managing.
Renewal	Renewal	40352	CCP/APTC/CSR Reports - TBD
Renewal	Renewal	43792	The IVR system shall direct calls to the appropriate renewals work queue [To be confirmed] (Note: This requirement applies to CCP/APTC/CSR programs only)
Reporting			
Reporting	Eligibility Determination		
Reporting	Eligibility Determination	39593	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) system shall enable CovCA the ability to report on New and Current consumers Eligibility and Enrollment for the California Premium Subsidy.
Reporting	Eligibility Determination	39594	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) system shall enable CovCA the ability to report on current consumers historical California Premium Subsidy eligibility and enrollment.
Reporting	Eligibility Determination	40438	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall create an on-going report of all review and authorization transactions at the case level.
Reporting	Eligibility Determination	40657	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) data warehouse shall include a flag which will indicate eligibility runs in which exchange FPL has been overridden due to unemployment income in the benefit year.
Reporting	Eligibility Determination	40658	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) data warehouse shall include the overridden APTC household FPL when the FPL is overridden due to unemployment income in the benefit year.
Reporting	Eligibility Determination	40659	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) data warehouse shall include UI overwrite eligibility overridden FPL and overridden flag in any reporting that contains eligibility attributes (i.e., OBIEE – Subject Areas).
Reporting	Enrollment		
Reporting	Enrollment	38186	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) system will generate a report of transactions performed by manual override.
Reporting	Enrollment	38363	Provide consultation to support Data Integrity Analysis team in the documentation of business requirements and process instructions for the BI team.
Reporting	Enrollment	38364	Provide consultation and technical assistance on data analysis and methodology.
Reporting	Enrollment	38365	Provide support in the evaluation and analysis of data and system issues.
Reporting	Enrollment	38366	Support code and data fixes after prioritized by the Data Integrity Analysis team (REM).
Reporting	Enrollment	38367	Manage the form and structure for the enrollment audit file exchanged with carriers. Includes modifying the audit file as needed to support effective matching for enrollment reconciliation. Provide documentation for carriers and Covered California for interpretation and utilization of the audit file.

Appendix A-4 - SOW Exhibit A - System Requirements Specification
(Extracted from CalHEERS RTM)

Category	Sub Category	Req ID	Requirement
Reporting	Enrollment	38368	Provide design support and generation of reports for enrollment and tax data integrity sampling.
Reporting	Enrollment	38369	Provide design support and generation of reports to compare CMS reported data to findings in the Data Integrity Analysis activity.
Reporting	Enrollment	38370	Provide consultation and technical assistance in support of 834 carrier transaction creation and potential file splits in support of yearly enrollment transactions.
Reporting	Enrollment	38371	Provide analysis, design support and generation of reports for the renewal population.
Reporting	Enrollment	38372	Provide consultation and technical assistance in support of the CMS interim payment report and the reconciliation of CMS/carrier payments for 2016.
Reporting	Enrollment	38373	Generate enrollment flat file to send to carriers for alternative EDI processing. Process the response files to effectuate coverage as necessary)
Reporting	Enrollment	38378	Provide 1095 companion extracts to support analysis against carrier 1095 files.
Reporting	Enrollment	38379	Design, perform and test data fixes resulting from carrier reconciliation as necessary.
Reporting	Enrollment	38380	Continue to provide a production loaded test environment that includes both HBEX and GI data to support testing of data fixes prior to deployment.
Reporting	Enrollment	44518	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall send the State Subsidy amount in the Oth Pay 1 field on the PBP report
Reporting	General Requirement		
Reporting	General Requirement	38093	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall update the existing MCAP report to account for the two new Aid Codes (0G and 0E).
Reporting	General Requirement	38396	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) system shall store and provide ad hoc access to the Consent to Receive text messages and calls indicator and Date of Consent to the data warehouse.
Reporting	General Requirement	38538	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) system will generate a report of the batch that includes the following data fields: 1) [Outreach Template Fields], 2) The prior household income - subsidy verification status, and 3) The post household income - subsidy verification status.
Reporting	General Requirement	38935	Collaborate on improvements and enhancements to the data warehouse, including design, build and deploy “new” functions, features, and data (See Attachment A for a current list of planned enhancements - do we need this?).
Reporting	General Requirement	38936	New Enhancements to the data warehouse shall achieve a data quality level of 99% or greater compared to source systems. This requirement will include data quality in all underlying layers of the data warehouse to include but not limited to: "DM Layer", ODS, and any other underlying data.
Reporting	General Requirement	38937	Participate in and conduct impact assessments of other Change Requests (CRs). With approval from the state resources would be charged to another CR. Track, assess and provide recommendations about reporting solutions for every upcoming CR in time to be considered in that CRs JAD. Additionally, any modifications to the data warehouse data structure, data quality, or user interface as an effect of other CRs, with approval, should be charged to the "originating" CR.
Reporting	General Requirement	38938	Update system documentation upon changes to baselines, which includes (e.g. ERD, Source to target mapping, Functional Design Documents).
Reporting	General Requirement	38939	ALL work conducted under this CR for ad-hoc report development, and including work packages and data model investigations, shall be documented in an appropriate and comprehensive way that will be approved by sponsors. Findings and design concepts shall be compiled and made available for future California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) data users in an efficient and appropriate manner.
Reporting	General Requirement	38940	Consider implementing every solution/work product as a part of this CR using Oracle Data Warehouse and Business Intelligence Best Practices in the design of all current and future changes and enhancements. All reports must be designed to use OBIEE except where not applicable. Where OBIEE is not applicable provide plans/feedback on how to integrate report into OBIEE.
Reporting	General Requirement	38941	Where reporting support is deemed not M&O by Accenture/California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) and as approved by Executive management, this CR may be utilized to authorize work as required.
Reporting	General Requirement	38942	Assist data warehouse and analytic users in refining queries and improving SQL ,OBIEE XMLs and other query scripts to achieve their desired analytic output; relay data model and SQL/ XML expertise; develop queries and extracts to support business operational needs that may require pulling data from source systems; perform issue resolution; respond to questions and concerns from users, and as appropriate indicate when issues should be reported formally by users (i.e., submitting ticket). Provide functional design documents -- and all final code scripts -- for all extracts developed by the Ad Hoc Reporting team at a level of detail that any new resources not originally involved with the effort can reproduce the result.
Reporting	General Requirement	38943	Provide 0.5 FTE per day, at a minimum - when needed, to responding to operational inquiries and issues that materialize throughout the day and assist Covered California and DHCS with troubleshooting and issue resolution. (batphone)
Reporting	General Requirement	38944	Provide technical support, subject matter expertise guidance, and development support for Covered California defined activities as "embedded staff." These "embedded staff" FTEs will work alongside exchange staff to refine knowledge transfer and assist in the development and improvement of reporting development, query development, data warehouse data structure issues, extract development, and other duties as defined by Covered California. Work products for embedded FTE will be more informal and not subject to the same requirements as formal work packages under this CR to increase efficiency. However, "embedded staff" may be requested to do similar activities, including ad-hoc query design, data and defect investigation, analytics, visualizations, documentation (including sharing of scripts). If staff other than the assigned "embedded staff" are relied on to assist the embedded staff and billed against the hours allotted to the FTE, their time shall be tracked specifically on a weekly basis.

Category	Sub Category	Req ID	Requirement
Reporting	General Requirement	38945	Generate the reports and extracts as identified in the report and extract inventories (See attachment B) where the California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) state team delegates and has not operationalized. As new reports and extracts are identified, the Reporting team must work with users to identify the data requirements and update the report or extract inventory to reflect the new item. This includes preparing for operational cycles by revisiting the prior year's reports and making modifications for the new year, as appropriate. Reporting and extract requirements are generally categorized as: • Renewal reports • Program transition population reports • Open Enrollment reports • 1095 reporting • Marketing and Outreach (i.e., assisters, delegates, service channels) • CMS reporting and CMS performance stats (i.e., average concurrent users, unique visits, etc.) • Service Center Tracker • Batch fallout support • Carrier renewal reconciliation file • ROP Reporting: Automatically discontinue members after 90 days • Truven data file Additionally provide functional design documents in accordance with requirement XXX and provide suggestions/designs/plans for transitioning reports, where appropriate and feasible, to the data warehouse - including any related XML, SQL, or other query language.
Reporting	General Requirement	38946	Provide data warehouse and analytic users training and knowledge transfer on the data model, OBIEE, and BI Publisher. The Reporting team must also share copies of the final XML/SQL with Covered California and DHCS. The final copies of the XML/SQL must be added to the Projects Reports Library and be updated as necessary as changes to the data warehouse are made and charged appropriately to other CRs when and where applicable.
Reporting	General Requirement	38947	Provide weekly and monthly rollup of reporting of task assignments, issues or risks, and status. • Communicate estimates to complete new tasks, to include: task identifier, complexity, release target date, hour or resource estimates, target start and complete dates • Participate in prioritization activities with Covered California and DHCS that provide greater clarity on resource task assignments and levels of effort for current and pending work to facilitate improved understanding and communication of the ongoing work effort. • Conduct a weekly meeting with Covered California and DHCS reporting teams to review pipeline activities and statuses • Provide regular communication to Covered California's designated resource(s), to include the following: • Weekly hour and task status report for work performed • Weekly hour and task forecast report for tasks and resource allocation • Risks or issues with existing workload, such as out of office status of key resources, new requests that need prioritization with existing workload, defects identified that require resolution, ETL or other system issues impacting reporting or extract generation, release or priority release issues • Attend weekly CR Project Sponsor meetings • Ongoing communication of Reporting team service requests that impact ability to perform tasks identified in this CR
Reporting	General Requirement	38961	Where data warehouse and reporting support is deemed not M&O by Accenture/California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) and as approved by Sponsor Executive management, this CR may be utilized to authorize work as required.
Reporting	General Requirement	38962	Assist (Sponsor) data warehouse and analytic users in refining queries and improving XMLs to achieve their desired analytic output; relay data model and XML expertise; develop queries and extracts to support business operational needs that may require pulling data from source systems or Disaster Recovery system; perform issue resolution; respond to questions and concerns from users, and as appropriate indicate when issues should be reported formally by users (i.e., submitting ticket).
Reporting	General Requirement	38963	Generate the reports and extracts as identified in the report and extract inventories where the California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) state team delegates and has not operationalized. As new reports and extracts are identified, the Reporting team must work with users to identify the data requirements and update the report or extract inventory to reflect the new item.
Reporting	General Requirement	38964	Work packages will be used to identify the scope of tasks, anticipated levels of efforts, and preliminary timelines, which upon approval will be reflected in the project schedule. Work will not begin until each workpage is approved. • The CR will have overall time, cost and scope defined • Work Packages will be done using a flow approach (as detailed work is defined, a Work Package will be drafted) • Work Packages will include a schedule, FTE hours needed and description of the expected results of the effort (artifact) • No work can be billed to the CR without an approved Work Package • The burn rate for time and cost will be tracked as Work Packages are completed • A standing meeting will be used to review / approve Work Packages
Reporting	General Requirement	38965	Prioritized work packages (ad hoc queries, one-time use, etc.) will be defined via a standard template which includes the scope of work effort (easy, moderate, difficult) and priority to facilitate expediting approval processes based on the client's priorities.
Reporting	General Requirement	39014	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) system shall retire the following reports from the Post Prep or Post Eligibility Batch: • Report 7 • Report 5 • Report 14 • Report 12

Appendix A-4 - SOW Exhibit A - System Requirements Specification
(Extracted from CalHEERS RTM)

Category	Sub Category	Req ID	Requirement
Reporting	General Requirement	39015	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) system shall retire the following reports from the Post Enrollment Batch: • Report 10 • Report 11 • Report 12 • Carrier Response File Processing
Reporting			The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) system shall provide a new report based on custom group cases that: • Are excluded from passive enrollment when an active renewal has started, • Custom grouping has been changed, and • Plan selection is completed for at least one of the groups.
Reporting	General Requirement	39017	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) system shall provide a new report based on cases that continue carry forward status for next benefit year.
Reporting	General Requirement	39018	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) system shall provide a new report based on cases where the QHP/QDP is not available in the rating region.
Reporting	General Requirement	39019	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) system shall define and develop end-user documentation for the annual Renewals reports.
Reporting	General Requirement	39020	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) system shall define and document a generation cycle for each Renewal Report.
Reporting	General Requirement	39117	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall remove the "Optional" text from all fields on the immigration document data collection page.
Reporting	General Requirement	39138	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall store the Carrier dispute information provided by CMS on a monthly basis
Reporting	General Requirement	39139	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall compare the dispute file records against any records which should be excluded from data matching due to the following: Pending Appeals Resolved Appeals Not Updated in Carrier System Pending Defect Data Fix Pending Litigation
Reporting			
Reporting	General Requirement	39140	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall uniquely flag the dispute records as excluded from further processing
Reporting	General Requirement	39141	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall take no further action on the dispute records flagged for no further processing
Reporting	General Requirement	39142	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall compare the dispute file records against the current database to determine if the data discrepancy has been resolved
Reporting			
Reporting	General Requirement	39144	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall uniquely flag any dispute record which is found to match the database data in all aspects
Reporting	General Requirement	39145	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall take no further action on dispute records flagged as data matched.
Reporting	General Requirement	39146	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall uniquely flag any dispute record which is found to have a data discrepancy
Reporting	General Requirement	39147	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall conduct a final review of all unresolved dispute records to determine the cause of the inconsistency. Possible cause would be: - Defect - Proration differences (won't make a correction) - PCR error - Operationally introduced error (includes APTC differences) - Incorrect data
Reporting			
Reporting	General Requirement	39148	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall uniquely flag any discrepancies associated to partial month enrollments
Reporting	General Requirement	39149	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall uniquely flag any discrepancies associated to defects and move them to the excluded list
Reporting	General Requirement	39150	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall uniquely flag and discrepancies associated to PCR errors and move them to the excluded list
Reporting	General Requirement	39151	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall uniquely flag any discrepancies associated to Operationally Introduced Errors and move them to the excluded list
Reporting			
Reporting	General Requirement	39152	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall uniquely flag discrepancies associated to Incorrect Data
Reporting	General Requirement	39153	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall route a response file of all the records with incorrect data to COVCA for Issuer coordination
Reporting	General Requirement	39154	COVCA shall route a response file back to California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) with any dispute records uniquely flagged as a denial as a result of the coordinated research
Reporting			
Reporting	General Requirement	39155	COVCA shall route a response file back to California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) with any dispute records uniquely flagged as a resolved as a result of the coordinated research
Reporting			
Reporting	General Requirement	39156	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall update the uniquely identified research flag based on the COVCA file
Reporting	General Requirement	39157	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall run a secondary data match on all excluded items to verify if a resolution has been reached
Reporting	General Requirement	39158	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall send a response file to the Issuers with a resolution status of each dispute record
Reporting	General Requirement	39218	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall parse the SBMI file into individual carrier files.
Reporting	General Requirement	39219	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall send each carrier a copy of their SBMI file each month
Reporting	General Requirement	39220	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall send the carrier SBMI files via SFTP.
Reporting	General Requirement	39221	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall send a copy of all files transmitted to and from CMS to COVCA via SFTP.

Appendix A-4 - SOW Exhibit A - System Requirements Specification
(Extracted from CalHEERS RTM)

Category	Sub Category	Req ID	Requirement
Reporting	General Requirement	39285	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall assess Digital Analytics Maturity & Develop Roadmap.
Reporting	General Requirement	39286	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall outline Website Measurement Requirements.
Reporting	General Requirement	39287	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall develop Digital Analytics Measurement & Reporting Strategy.
Reporting	General Requirement	39339	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall implement Data Layer and more advanced digital analytics tracking.
Reporting	General Requirement	39340	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall develop foundational Digital Analytics Operating Model.
Reporting	General Requirement	39341	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall combine Digital Analytics Data with additional data sources (e.g. enrollment data).
Reporting	General Requirement	40601	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall report on failure to upload due to malware or virus.
Reporting	General Requirement	41338	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall track and persist the below data elements: -Track the transitioning individuals who are auto-plan selected for a given coverage year -Differentiate between consumers who are added to a new enrollment or existing enrollment -Track the Opt In/Opt Out/Opt In No Response decision, Opt Out reason (optional), and timestamp of the attestation provided by the consumer, Opt In/Opt Out source, user role -Track the consumers landing to California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) from the microsite regardless of log in status -Track if the consumer changed their plan after auto-plan selection based on the duration of the SEP window -Track the delegate assignment -Track the auto-plan selection details at an individual level and per transition (If one person in a household transitions and another person transitions, this should be trackable. If a person transitions multiple times.)
Reporting	General Requirement	41391	CalHEERs shall create a new aging report to be developed at the end of each recon cycle that will capture all cases that are “N” as Attestation Indicator but are requesting to be reinstated from carriers.
Reporting	General Requirement	41409	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall add encrypted 'PendingAppID' to Google Analytics Data Layer when new Pending App ID is generated.
Reporting	General Requirement	41410	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall add 'Coverage year' to Google Analytics Data Layer.
Reporting	General Requirement	41594	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall persist the same UserRole, captured at the time of first log in, on Google Analytics Data Layer across HBX pages accessed throughout the session
Reporting	General Requirement	41597	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall persist the same UserDetailedRole, captured at the time of first log in, on Google Analytics Data Layer across HBX pages accessed throughout the session
Reporting	General Requirement	42964	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) system shall include LRS transactions in the existing LEADER SAWS traffic and error monitoring reports.
Reporting	General Requirement	42965	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) system shall differentiate LRS and LEADER transactions in the Los Angeles County traffic and error monitoring reports.
Reporting	General Requirement	42966	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) system shall track LRS transactions in operational reporting.
Reporting	General Requirement	44497	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall limit the number of EDD requests made to the Income Services Verification to no more than one per day per person.
Reporting	General Requirement	44512	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall maintain two infrastructures for the 2019 and 2020 enrollment years.
Reporting	General Requirement	44513	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall update the Go Back file to include the State Subsidy amounts.
Reporting	General Requirement	44514	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall update the Carrier response Script (Python).
Reporting	General Requirement	44515	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall update the Carrier file action.
Reporting	General Requirement	44516	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall change the 'LAST_PREMIUM_PAID_DATE' field name to 'PREMIUM_PAID_THROUGH_DATE'.
Reporting	General Requirement	44525	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall utilize the Renewal Batch Job to perform an Eligibility Simulation for the State Subsidy Program
Reporting	General Requirement	45088	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) system SAWS EHIT Traffic Report shall contain all message types and statuses.
Reporting	General Requirement	45089	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) system SAWS EHIT Error Report shall contain all message types and statuses of ERROR and CANCELLED.
Reporting	General Requirement	45090	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) system shall exchange the SAWS EHIT Traffic Reports with the SAWS over SFTP.
Reporting	General Requirement	45091	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) system shall encrypt the SAWS EHIT Traffic Reports using the SAWS PGP public key.
Reporting	General Requirement	45092	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) system SAWS EHIT Traffic Reports reflect the status of the traffic at the time of generation.
Reporting	General Requirement	45093	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) system SAWS EHIT Traffic Reports shall reflect the traffic for the period of a day.
Reporting	General Requirement	45104	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) system shall generate the daily report extracts in Comma Separated Value (CSV) format.
Reporting	General Requirement	45123	Collaborate on improvements and enhancements to the data warehouse, including design, build and deploy “new” functions, features, and data (See Attachment A for a current list of planned enhancements).
Reporting	General Requirement	45124	New Enhancements to the data warehouse shall achieve a data quality level of 99% or greater compared to source systems.
Reporting	General Requirement	45125	Participate in and conduct impact assessments of other Change Requests (CRs). With approval from the state resources would be charged to another CR.
Reporting	General Requirement	45126	Update system documentation upon changes to baselines, which includes (e.g. ERD, Source to target mapping, Functional Design Documents).
Reporting	General Requirement	45127	Conform to Sponsors Security Policies to ensure that all state security policy, standards, and guidelines are adhered to.
Reporting	General Requirement	45128	Implement every solution/work product as a part of this CR using Oracle Data Warehouse and Business Intelligence Best Practices in the design of all current and future changes and enhancements. All reports must be designed to use OBIEE except where not applicable.

Category	Sub Category	Req ID	Requirement
Reporting	General Requirement	45129	Where reporting support is deemed not M&O by Accenture/California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) and as approved by Executive management, this CR may be utilized to authorize work as required.
Reporting	General Requirement	45130	Assist data warehouse and analytic users in refining queries and improving XMLs to achieve their desired analytic output; relay data model and XML expertise; develop queries and extracts to support business operational needs that may require pulling data from source systems; perform issue resolution; respond to questions and concerns from users, and as appropriate indicate when issues should be reported formally by users (i.e., submitting ticket).
Reporting	General Requirement	45131	Provide 0.5 FTE per day, at a minimum, to responding to operational inquiries and issues that materialize throughout the day and assist Covered California and DHCS with troubleshooting and issue resolution. (batphone)
Reporting	General Requirement	45132	Provide data warehouse and analytic users training and knowledge transfer on the data model, OBIEE, and BI Publisher. The Reporting team must also share copies of the final XML/SQL with Covered California and DHCS. The final copies of the XML/SQL must be added to the Projects Reports Library.
Reporting	General Requirement	45133	"Provide weekly and monthly rollup of reporting of task assignments, issues or risks, and status. • Communicate estimates to complete new tasks, to include: task identifier, complexity, release target date, hour or resource estimates, target start and complete dates • Participate in prioritization activities with Covered California and DHCS that provide greater clarity on resource task assignments and levels of effort for current and pending work to facilitate improved understanding and communication of the ongoing work effort. • Conduct a weekly meeting with Covered California and DHCS reporting teams to review pipeline activities and statuses • Provide regular communication to Covered California's designated resource(s), to include the following: • Weekly hour and task status report for work performed • Weekly hour and task forecast report for tasks and resource allocation • Risks or issues with existing workload, such as out of office status of key resources, new requests that need prioritization with existing workload, defects identified that require resolution, ETL or other system issues impacting reporting or extract generation, release or priority release issues • Attend weekly CR Project Sponsor meetings • Ongoing communication of Reporting team service requests that impact ability to perform tasks identified in this CR"
Reporting	General Requirement	45134	Covered California may require assistance from the Reporting team when Covered California initiates the CRM Project. Support services will be detailed and approved in a Work Package format.
Reporting	General Requirement	45135	"Work packages will be used to identify the scope of tasks, anticipated levels of efforts, and preliminary timelines, which upon approval will be reflected in the Reports Management sub-project schedule. Work will not begin until each work package is approved. • The Work Package will have overall time, cost and scope defined • Work Packages will be done using a flow approach (as detailed work is defined, a Work Package will be drafted) • Work Packages will include a schedule, FTE hours needed and description of the expected results of the effort (artifact) • No work can be billed to the CR without an approved Work Package • The burn rate for time and cost will be tracked as Work Packages are completed • A standing meeting will be used to review / approve Work Packages"
Reporting	General Requirement	45137	"Generate the reports and extracts as identified in the report and extract inventories (See attachment B) where the California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) state team delegates and has not operationalized. As new reports and extracts are identified, the Reporting team must work with users to identify the data requirements and update the report or extract inventory to reflect the new item. This includes preparing for operational cycles by revisiting the prior year's reports and making modifications for the new year, as appropriate. Reporting and extract requirements are generally categorized as: • Renewal reports • Program transition population reports • Open Enrollment reports • 1095 reporting • Marketing and Outreach (i.e., assisters, delegates, service channels) • CMS reporting and CMS performance stats (i.e., average concurrent users, unique visits, etc.) • Service Center Tracker • Batch fallout support • Carrier renewal reconciliation file • ROP Reporting: Automatically discontinue members after 90 days • Truven data file "
Reporting	General Requirement	45148	Work packages (ad hoc queries, one-time use, etc.) will be used and defined via a standard template which includes the scope of work effort (easy, moderate, difficult) and priority to facilitate expediting approval processes based on the business priorities.
Reporting	General Requirement	45170	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) must conform to State Administrative Manual §§5300-5350 to ensure that all state security policy, standards, and guidelines are adhered to.
Reporting	General Requirement	46554	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall be able to differentiate between Accelerated Enrollment granted between SAWS and California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) Access Channels.
Reporting	General Requirement	46555	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall add the access channel to the Medi-Cal Backlog report for consumers granted Accelerated Enrollment aid code 8E.
Reporting	General Requirement	47893	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall create a new Google Analytic tag for the updated Health Preference Page to capture data
Reporting	Interfaces		

Category	Sub Category	Req ID	Requirement
Reporting	Interfaces	42621	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) system shall report to CMS each member's 2014 enrollment(s) using the same IRS 1095 format with the exception of adding the Exchange member's 16 character QHP Identifier. This report shall be a separately named file and be produced through 2015 until all 2014 enrollments have been reconciled.
Reporting	Maintain Operational Data		
Reporting	Maintain Operational Data	38433	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) SAWS shall implement a periodic report based on the business validation rejection occurrences logged from the mismatch occurrences.
Reporting	Notices		
Reporting	Notices	40013	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall store an image of all notices and correspondences sent.
Reporting	Notices	40017	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall provide notices to individuals in their preferred written language and their preferred communication channel (within the guideline threshold languages.)
Reporting	Notices	40044	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall provide all notices in a manner or format that complies with all State and federal disability laws, including the ADA and Section 504 of the Rehabilitation Act, including any reasonable accommodations necessary
Reporting	Notices	40068	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall provide a written notice of eligibility redetermination to the eligible individual.
Reporting	Notices	40069	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall provide the functionality to provide notices or correspondence in writing as specified by State and federal regulations.
Reporting	Notices	40114	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall provide functionality to prepare a notice to CMS Federal Data Hub with a minimum dataset of information regarding an individual's disenrollment from a qualified health plan through the Exchange.
Reporting	Notices	40115	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall provide functionality to send an electronic, real-time or batch transmission of information necessary for the qualified health plan issuer to provide a welcome package and identification card to the individual.
Reporting	Notices	40120	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall provide functionality to notify CMS Federal Data Hub regarding reconciled periodic enrollment information. This information is used to generate payments to qualified health plan issuers for advance premium tax credits and cost-sharing reductions, as well as for performance measurement and tax administration, as applicable.
Reporting	Notices	40153	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall provide written notices to the consumers in their preferred written language.
Reporting	Notices	40203	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall provide functionality to retain each notice in the completed format so the exact version sent to the recipient can be viewed and reproduced.
Reporting	Notices	40204	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall provide functionality to retain history and viewing capability of all sent notices. This includes the ability to designate notices which are kept indefinitely as a permanent part of the case record and will not be purged (e.g. - notices related to claims).
Reporting	Notices	40205	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall notify applicants of eligibility denial due to incomplete and/or unverifiable application information.
Reporting	Notices	44564	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall notify applicants of their eligibility determination/redetermination and the information used for determining their eligibility.
Reporting	Other Non-Health Services		
Reporting	Other Non-Health Services	39963	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) system shall allow the Google Analytics user to capture the correct UserID for those logging in the "Admin" pages (e.g., "Search Case by --- " pages) so (s)he can analyze how many different users touch one application .
Reporting	Other Non-Health Services	39964	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) system shall allow the Google Analytics user to track the "UserRole" DL variable, so (s)he can analyze how different personas use the application.
Reporting	Other Non-Health Services	39965	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) system shall allow the Google Analytics user to track the location/position of the plan selected/added to cart from Shop-and-Compare (S&C) so (s)he can analyze how consumer select a plan
Reporting	REM		
Reporting	REM	48032	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall create a new aging report to be developed at the end of each recon cycle that will capture all cases that are "N" and "O" as Attestation Indicator but are requesting to be reinstated from carriers.
Reporting	REM	48237	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall update the REM process as needed to account for changes to the weekly reconciliation file.
Reporting	REM	48238	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall reject the initial Response file and Go-Back Response file from the Carrier if there are any columns with SOGI information as part of the Reconciliation of Enrollment and Membership process.
Reporting	Reports		
Reporting	Reports	37907	"California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall build and execute summary reports of the population that is associated with a non-tax filing status as indicated by the 007 data element from the IRS. Said reports should be executed monthly. The report will include the following elements: - Benefit Year - Count (total) - Count of new 007 in last 30, 60, and 90 days - Count of cleared in the last 30 days by change in data from IRS and from attestation (separately)."
Reporting	Reports	37981	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall not generate a 1095-A correction (NOD62B), for a given Marketplace Assigned Policy ID, after an original 1095-A (NOD62A) has been generated when there is only a change of enrollment status, the benefit end date(s) remain the same, and there are no changes to demographic or enrollment / household information.

Appendix A-4 - SOW Exhibit A - System Requirements Specification
(Extracted from CalHEERS RTM)

OTSI CalHEERS RFP #73040873 Addendum 1
October 31, 2025

Category	Sub Category	Req ID	Requirement
Reporting	Reports	38261	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall generate an extract report for the following consumers that were discontinued through the reasonable opportunity expiration process: The subscriber who was also disenrolled from their existing enrollment. All members of the plan who were also disenrolled from their existing enrollment. Dependent(s) but who were not disenrolled from their existing enrollment.
Reporting	Reports	38262	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall update the existing conditional eligibility extract to include the earliest ROP Expiration date applicable for a household, the earliest ROP expiration date for each verification type, and a flag if the consumer is currently in a Carry Forward Status.
Reporting	Reports	38272	"alHEERS shall enable listing of all APTC/CSR/CCP conditional eligible individuals with active/pending enrollments via Datawarehouse to include the following fields. AHBX Case ID, Individual ID, First Name, Middle Name, Last Name, Date of Birth, Coverage Start Date, Enrollment Status, Carrier Name, Carrier HIOS ID, Individual Residence County, Individual Residence Zip Code, Individual Preferred Written Language, Individual Preferred Spoken Language, US Citizen National Flag (Yes/No), Attested Subsidy FPL %, CCP Aid Code, Last Eligibility Determination Submission Date, Household Primary Contact's First Name, Household Primary Contact's Middle Name, Household Primary Contact's Last Name, Household Primary Contact's Email ID, Household Primary Contact's Preferred Written Language, Household Primary Contact's Preferred Spoken Language, Household Primary Contact's Mailing Address Line 1, Household Primary Contact's Mailing Address Line 2, Household Primary Contact's Mailing City, Household Primary Contact's Mailing State, Household Primary Contact's Mailing Zip Code, Subsidy Income Verification Status, Subsidy Income Document Upload status, Subsidy Income Reasonable Opportunity Expiration Date, Incarceration Verification Status, Incarceration Document Upload Status, Incarceration Reasonable Opportunity Expiration Date, California Residency Verification Status, California Residency Document Upload Status, California Residency Reasonable Opportunity Expiration Date, Deceased Verification Status, Deceased Document Upload Status, Deceased Reasonable Opportunity Expiration Date, SSN Verification Status, SSN Document Upload Status, SSN Reasonable Opportunity Expiration Date, Immigration Verification Status, Immigration Document Upload Status, Immigration Reasonable Opportunity Expiration Date, Citizenship Verification Status, Citizenship Document Upload Status, Citizenship Reasonable Opportunity Expiration Date, Minimum Essential Coverage Verification Status, Minimum Essential Coverage Document Upload Status, Minimum Essential Coverage Reasonable Opportunity Expiration Date, American Indian/Alaskan Native Verification Status, American Indian/Alaskan Native Document Upload Status, American Indian/Alaskan Native Reasonable Opportunity Expiration Date, Application Submitter/Service Channel, Agent License Number, Gender, Medi-Cal FPL, Mixed Household, Incarceration Error Code, SSN Error Code, Citizen Error Code, American Indian Upload Date, Lawful Presence, Lawful Presence Upload Date, Lawful Presence Error Code, Five Year Bar Met, Five Year Bar Met Upload Date, Five Year Bar Error Code, Five Year Bar Indicator, Five Year Bar Indicator Upload Date, Five Year Bar Indicator Error Code
Reporting	Reports	38375	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall provide the functionality for a consumer to opt out of Exchange coverage and provide the reasons for opting out.
Reporting	Reports	38376	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall add the opt-out reasons to the Data Warehouse.
Reporting	Reports	38540	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall add the opt-out reasons to the Data Warehouse.
Reporting	Reports	39659	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall store all request and response VLP data elements returned from the VLP service in the data warehouse for sponsors to retrieve the data when needed.
Reporting	Reports	39660	Monthly Report for No Call Reasons (This report should only pull for individuals who are eligible for Covered CA)
Reporting	Reports	39661	Monthly Report for error responses (DHS errors, Hub errors and California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) internal system errors. This report should only pull for individuals who are eligible for Covered CA)
Reporting	Reports	39662	Monthly Extract of VLP calls showing response codes from all three steps, as appropriate. (This report should only pull for individuals who are eligible for Covered CA)
Reporting	Reports	39699	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall have the functionality to provide a report on the number of applications generated and the distinct number of applications generated for which the duplication individual validation check was successful.
Reporting	Reports	39700	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall have the functionality to deliver a scheduled monthly report where the application was started during the prior month and the duplicate individual validation check was successful during the prior month.
Reporting	Reports	39701	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall have the functionality to provide a detailed report of the cases for which the duplication individual validation check was successful and they moved forward with submitting the application.
Reporting	Reports	39702	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall have the functionality to deliver a scheduled monthly report where the application was started during the prior month and the duplicate individual validation check was successful during the prior month.
Reporting	Reports	40207	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall be able to generate Correspondence dynamically, that can be viewed through the presentation layer, have the ability to be bundled for printing, and to be able to sent through email. The System is expected to issue notices including but not limited to the following categories: A) Eligibility and Enrollment B) Plan Management C) Financial Management D) SHOP
Reporting	Reports	40208	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall provide the functionality to generate monthly reports to CMS about individual enrollments in Qualified Health Plans.
Reporting	Reports	40257	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall provide the functionality to generate data and reports for any exception processing.
Reporting	Reports	40259	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall provide functionality to generate data and reports needed to comply with MCAP, C-CHIP, and BHP (if enacted) quality control initiatives and performance standards.
Reporting	Reports	40260	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall provide functionality to generate data on the administrative costs of the Exchange and waste, fraud and abuse as required by the ACA.
Reporting	Reports	40261	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall provide functionality to generate data and reports on enrollment trends.

Category	Sub Category	Req ID	Requirement
Reporting	Reports	40350	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall provide the functionality to display a dashboard of caseload and performance metrics for active applications, renewals and appeals.
Reporting	Reports	40354	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall log those who viewed Personally Identifiable Information (PII) or Personal Health Information (PHI), what data elements they viewed, and time-stamp.
Reporting	Reports	40376	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall provide the functionality to generate a report upon request by applicants: The report consists of identifying those who viewed their Personally Identifiable Information (PII) or Personal Health Information (PHI), what data elements they viewed, and time-stamp.
Reporting	Reports	40378	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall report to the IRS and enrollees each year certain information regarding the enrollee's coverage provided through the exchange.
Reporting	Reports	40442	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall generate data and reports needed to apply for and demonstrate appropriate use of federal grant funding.
Reporting	Reports	40514	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall provide the capability to determine participation rates of an employer's employees. Provide the capability to share this information with the Issuers and employers.
Reporting	Reports	40527	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall receive and update the disposition from SAWS.
Reporting	Reports	40687	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall generate audit files required by the State Controller's Office (SCO).
Reporting	Reports	40699	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall generate reports on complaints received, forwarded, resolved, and pending resolution.
Reporting	Reports	40945	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall store the association between VCI request and Eligibility run to enable data population on CMS reports
Reporting	Reports	41325	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall capture the Enroller's UserID in Google Analytics when navigating through California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) pages on behalf of a Consumer.
Reporting	Reports	42843	This report is to work on the income end dating issue (enrollees who mistakenly put an end date in the app, thereby making themselves Medi-Cal eligible for 2015). Selection Criteria: • Income end date between 10/1 and 3/31 • Pending Medi-Cal status • Application start date after 10/13 • Cases with paid end date field used for income Report output: • Family size (may come as member level data) • Attested income • End date for the income • Contact information (Maribeth's previously used contact info variables in Report 7) • Historical FPL (for new enrollees coming in through Open Enrollment this will be blank. But for those renewing, this field will be very helpful) • Renewal vs. Open Enrollment flag • Language written • Language spoken
Reporting	Reports	43264	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall update the current AIM report to align to the MCAP eligibility requirements, which will be generated daily.
Reporting	Reports	43337	"The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) system shall provide a daily report to each of the CCHIP counties (San Mateo, San Francisco, and Santa Clara) which shall include the following: - Individuals who were determined CCHIP Eligible and Conditionally Eligible in the day previous to the report."
Reporting	Reports	43338	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall indicate whether or not the 60 day pre-notice has been sent in the daily report being sent to each of the 3 CCHIP County Programs.
Reporting	Reports	43339	"The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall also include and flag the following individuals based on one of the below criteria in the daily CCHIP report: - Individuals who will be discontinued in 30 days; and - Individuals who reported an address change in the day previous to the report and are still Eligible or Conditionally Eligible in a different CCHIP county (must be present and flagged in both the current and new county reports); - Individuals who reported a change in the day previous to the report that will Discontinue the consumer from CCHIP;"
Reporting	Reports	44557	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall provide functionality to generate data and reports needed to comply with federal and State audit and oversight requirements.
Reporting	Reports	44559	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall provide functionality to generate data and reports on eligibility determination outcomes.
Reporting	Reports	44560	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall provide functionality to generate data and reports to support management of Assisters and Eligibility Administrators.
Reporting	Reports	44561	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall provide functionality to generate reports and data on the consumer experience related to average elapsed time for application completion, application withdrawals, page review timeframes, QHP, qualified stand-alone dental plan evaluation, etc. .
Reporting	Reports	44562	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall provide regular (monthly) reports on Exchange enrollees, including unique individual identifier, plan enrolled in, the type of coverage purchased, rating criteria information, demographic data, and effective dates for individual and small group market non-grandfathered plans.

Category	Sub Category	Req ID	Requirement
Reporting	Reports	44568	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall generate reports (ad-hoc, monthly, quarterly and annually) summarizing the numbers and type of subsidized applications received, the number of applications that resulted in enrollment, the number of enrollments by type of program (APTC, CSR, MAGI Medi-Cal, MCAP, C-CHIP), the timeframe from application to enrollment (also by type program, and the demographic data (age, sex, household composition, zip code or region) for applications and enrollments by program type.
Reporting		44569	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall generate monthly reports on SAWS referrals status Statewide and by zip code, ethnicity, the number referred, and number denied. The report shall show the aging of referrals from 0 to 45 days, 45 to 60 days, 60 to 90, and greater than 90.
Reporting	Reports	44570	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall generate reports (ad-hoc, monthly, quarterly, and annually) for the number of applications submitted by each registered Assister and Eligibility Administrator (e.g., Service Center Representative and County Eligibility Worker) for an entered timeframe.
Reporting	Reports	44571	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall provide the functionality to track referrals made to SAWS and update disposition from MEDS.
Reporting	Reports	44572	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall provide the functionality to track referrals made to SAWS
Reporting	Reports	44573	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall generate (ad-hoc, monthly, quarterly, and annually) for the number of applications that did not result in an enrollment submitted by each registered Assister.
Reporting	Reports	44574	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall provide the necessary reporting capabilities required by ACA and by the State of California. While guidance from the federal government and California policymakers is still forthcoming, it is anticipated reporting will be needed to meet audit requirements, support operational efficiencies, provide decision support, gather and present user feedback, and respond to ad hoc queries.
Reporting	Reports	44575	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall generate data and reports on enrollment trends.
Reporting	Reports	44576	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall generate reports and data on the consumer experience.
Reporting	Reports	44577	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall generate reports and data on consumer use of the Technology Platform.
Reporting	Reports	44578	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall generate reports and data on consumer feedback.
Reporting	Reports	44579	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall generate reports (ad-hoc, monthly, quarterly, and annually) for the number of enrollments completed by each registered Assister.
Reporting	Reports	44594	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall allow for the tracking and reporting of rules usage by module/component and type throughout California Healthcare Eligibility, Enrollment and Retention System (CalHEERS).
Reporting	Reports	47018	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall develop a report that shows persistent records that have been flagged with an L2.
Reporting	Reports	47019	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall develop a consolidated report containing information for all carriers. This report will be by record and will display the persistent L2 error flag or flags for that record including the records financial impact.
Reporting	Reports	47020	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall develop a report that shows persistent records that have been flagged with an L3.
Reporting	Reports	47021	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall develop a consolidated report containing information for all Carries. This report will be by record and will display the peristent L3 discrepancy flag or flags for that record including the records financial Impact.
Reporting	Reports	47022	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall develop a consolidated report containing information for all carriers. This report will be by record and will display the persistent L5 discrepancy flag or flags for that record including the records financial impact.
Reporting	Reports	47023	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall develop a report that shows enrollment accuracy after each cycle by case level for each HIOS ID.
Reporting	Reports	47024	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall develop a report that shows financial accuracy after each cycle by case level for each HIOS ID.
Reporting	Reports	47047	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall generate a periodic report of which individuals have had an income verification waiver applied to their eligibility determination during MAGI Medi-Cal Renewals (RE).
Reporting	Reports	48242	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall create a new SOGI report for active enrollments in the current benefit year.
Reporting	Reports	48243	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall generate the SOGI report on a monthly frequency.
Reporting	Reports	49018	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall integrate and configure Google Analytics with Optimizely.
Reporting	Reports	49019	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall create reports in Google Analytics to track experiment outcome.
Reporting	Reports	49422	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall include "Conditional Eligible" MCAP individuals in the daily MCAP extract report.
Reporting	Reports	49423	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall include MCAP Eligibility Begin Date in the daily MCAP extract report.
Reporting	Reports	49424	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall include Conditionally Eligible MCAP individuals in the Weekly MEDS Alert Transactions report.
Requirements Management			
Requirements Management	Application Submission and Update		
Requirements Management	Application Submission and Update	39738	The cloud call recordings storage implementation shall support call recording and call records retention as specified.
Requirements Management	General Requirement		
Requirements Management	General Requirement	43468	The Vendor shall consider using agile techniques and methods through the development life cycle.
Requirements Management	General Requirement	43470	The cloud call recordings storage implementation shall support call recording encryption for the protection of PHI.

Category	Sub Category	Req ID	Requirement
Requirements Management	General Requirement	43777	The Vendor is required to provide the Equipment, Software, training, and Facilities to support Call Center functions that include: A) Incoming phone calls, faxes, e-mail, texts, and web-based interactions (online chat originating from Web Portal). B) Outgoing phone calls, faxes, e-mail, texts, and web-based interactions. C) Routing of callers to specific customer service operators based on user type and role (i.e., Individual, Employer, Navigator, Agent, or Issuer) for specific questions and assistance. D) Interactive Voice Response (IVR) System that supports California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) by providing information to standard requests (e.g., premium payment status, correspondence address, application status and plan contact information). E) Customer Relationship Management System (CRM) to log, track, refer, and record resolution to customer contacts. F) The cloud call recordings storage implementation shall support call recording and call records retention.
Requirements Management	General Requirement	44301	The Vendor shall develop and implement a Requirements Management approach that includes the following key elements: A) Requirements definition, tracking, traceability, verification and updates B) Mapping of Requirements to Deliverables and Deliverables to Requirements C) Mapping of Requirements to both System Test and UAT scenarios/conditions and vice versa.
Requirements Management	General Requirement	44322	The Vendor shall address and track all Requirements defined in Attachment 2 - Requirements as part of the Requirements Management approach. All Requirement changes, including additions, modifications, and deletions shall be incorporated through the Change Control process and formalized within the Requirements Traceability Matrix.
Risk Management			
Risk Management	General Requirement		
Risk Management	General Requirement	44255	The Vendor shall provide, at a minimum, provide the following information about risks: A) A description of the risk - taking into account probability, impact, and level of control of the Risk. B) Risk Exposure C) Open and Closed/Retired dates E) Dependencies F) Schedule Impacts, if appropriate G) Individual assignments H) Risk resolution or mitigation strategy I) Actual resolution or mitigation actions J) Risk Owner
Risk Management	General Requirement	44290	The Vendor shall establish and implement an approach to Risk Identification and Mitigation that is in compliance and alignment with the OSI PMO approach to Risk Management.
Risk Management	General Requirement	44291	Within the Risk Management Plan, the Vendor shall clearly describe its approach for managing the critical risk associated with meeting the federally imposed deadline (i.e., January 1, 2014) to deliver the Baseline System. The Vendor shall describe in detail its contingency plan, highlighting the key trigger events and/or dates that invoke the implementation of the contingency plan, impacts (i.e., monetary or otherwise) to the State, and remedies.
Schedule & Work Plan Management			
Schedule & Work Plan Management	General Requirement		
Schedule & Work Plan Management	General Requirement	44257	The Vendor shall plan and deliver an approach to Schedule and Work Plan management that provides for a clear understanding of project progress at both summary and detailed levels. This includes defining and reporting appropriate Work Plan metrics. The Vendor must clearly convey Schedule and Work Plan information to a diverse group of management stakeholders as well as more detailed information to QA, IV&V and oversight consultants.
Schedule & Work Plan Management	General Requirement	44258	In addition to the Work Plan, the Vendor shall provide a separate summary of tasks requiring California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) Exchange, State or other stakeholder resources. The Vendor shall estimate these resources by stakeholder, and state any assumptions regarding anticipated involvement of these resources.
Schedule & Work Plan Management	General Requirement	44259	The Vendor shall deliver a Schedule and Work Plan Management approach that addresses the establishment of the baseline control techniques the Vendor will apply to facilitate monitoring and tracking of the updated California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) Project Work Plan against the approved baseline.
Schedule & Work Plan Management	General Requirement	44294	The Vendor shall conduct a weekly Work Plan review meeting with the Exchange management team; attendees may include but not be limited to Exchange PMO, DHCS, QA, IV&V and oversight staff.
Scope Management			
Scope Management	General Requirement		
Scope Management	General Requirement	44253	The Vendor shall conduct formal monthly scope assessments during the D&I and initial O&M phases, and quarterly during the O&M period.
Scope Management	General Requirement	44266	The Vendor shall establish and implement a formal Change Control Process to manage Project Scope. Change Control will provide a process to discuss, analyze, and document the impact of the change in scope and determine direction and next steps.
Scope Management	General Requirement	44288	The Vendor shall inform the California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) Project Director of any potential deviation in scope or potential changes as soon as is reasonably possible to discuss, analyze and document the impact of the change.
Security			
Security	Alerts and Notices		
Security	Alerts and Notices	48061	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall modernize their Security Information and Event Management (SIEM) solution to enhance existing threat management capabilities.
Security	Alerts and Notices	48062	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall ingest in-scope Network logs on the new SIEM solution.

Appendix A-4 - SOW Exhibit A - System Requirements Specification
(Extracted from CalHEERS RTM)

Category	Sub Category	Req ID	Requirement
Security	Alerts and Notices	48063	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall ingest in-scope logs from California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) AWS Cloud environment on the new SIEM solution.
Security	Alerts and Notices	48064	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall ingest in-scope Operating System (OS) and Authentication logs on the new SIEM solution.
Security	Alerts and Notices	48065	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall ingest in-scope security event logs on the new SIEM solution.
Security	Alerts and Notices	48066	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall ingest in-scope CMDB and Email logs on the new SIEM solution.
Security	Alerts and Notices	48067	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall ingest the database logs on the new SIEM solution.
Security	Alerts and Notices	48068	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall get additional threat coverage by developing up to 10 additional correlations, which will have a footprint across MITRE ATT&CK techniques and tactics.
Security	Alerts and Notices	48069	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall modernize the SIEM use cases by leveraging the Context Aware Analytics, continuous data enrichment and Retroactive Threat Intelligence Correlation capabilities offered by Chronicle.
Security	Alerts and Notices	48070	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall automate SIEM alerts, which will help reduce the analysis time and enrich the current alert payload by using the newly integrated SOAR module.
Security	Alerts and Notices	48071	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall automate up to three current SIEM use cases using SOAR module.
Security	Alerts and Notices	48072	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall automate up to three new SIEM use cases developed as a part of the modernization using SOAR module.
Security	Application Submission and Update		
Security	Application Submission and Update	46529	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall create a new admin user entitlement 'AdminSensitiveInfo' that will be used to provision access to edit contact information (home address, mailing address, email, or phone number) of a non-primary applicant that is flagged as sensitive from SAWS.
Security	Consumer Assistance - SHOP		
Security	Consumer Assistance - SHOP	42792	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) system must be updated to provide the User with a comprehensive set of instructions on how to create/update a password based on current security standards. Instructions must be in both English and Spanish.
Security	Consumer Management		
Security	Consumer Management	47362	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall create Family PACT security profiles for Family PACT consumers.
Security	Consumer Management	47363	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall allow a Family PACT consumer to have full read and write access for the consumer's own account.
Security	Consumer Management	47373	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall create Family PACT security profiles for Family PACT providers.
Security	Consumer Management	49136	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall enforce all the new/existing consumers and authorized representatives to register for One Time Passcode verification methods on their login
Security	Consumer Management	49137	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall collect device information when the user successfully completes the authentication over Multi Factor Authentication verification options
Security	Consumer Management	49138	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall enforce the user for Multi Factor Authentication if the user logs in from the device that is different from the registered device
Security	Consumer Management	49139	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall allow users to login without MFA if the user is authenticating from the registered device
Security	Consumer Management	49140	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall have an expiry time as 24 hours for the registered device
Security	Consumer Management	49141	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall clear the registered verification methods (Email, Phone) register device information when the user status changes from blocked to unblock
Security	Consumer Management	49142	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall remove Google re-captcha from HBX application on following pages: a.Login page b.Forgot Username c.Forgot Password d.Account creation and review e.My profile
Security	Consumer Management	49143	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall Implement MFA for consumer login via CiCi chatbot
Security	Consumer Management	49144	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) Shall Remove OTP on tax form download when tax year is 2021 or before, for consumers and authorized representative
Security	Consumer Management	49145	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall remove “Register MFA modal popup” and Register MFA banner” from account home screen
Security	Consumer Management	49146	CalHEERS shall update messaging on ‘Register Your Account’ page to provide the next steps for users with no email or phone during MFA registration process
Security	Eligibility Determination		
Security	Eligibility Determination	45900	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall update the 3Scale/Fuse policies to host the Context Path and process SSA Payload (RJ3) Service.
Security	Eligibility Determination	45901	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall implement OAuth token based authentication with CMS for SSA (RJ3) service.
Security	Eligibility Determination	46382	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall transmit data to CMS for IFSV(RJ09) Service via the REST API Channel using a TLS 1.2-encrypted endpoint.
Security	Eligibility Determination	46383	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall update the 3Scale/Fuse policies to host the Context Path for IFSV (RJ09) Service.
Security	Eligibility Determination	46384	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall implement OAuth token based authentication with CMS for IFSV (RJ09) service.

Category	Sub Category	Req ID	Requirement
Security	Eligibility Determination	46396	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall transmit data to CMS for ESI (RJ14) Service via the REST API Channel using a TLS 1.2-encrypted endpoint.
Security	Eligibility Determination	46397	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall update the 3Scale/Fuse policies to host the Context Path for ESI (RJ14) Service.
Security	Eligibility Determination	46398	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall implement OAuth token based authentication with CMS for ESI (RJ14) service.
Security	Eligibility Determination	46409	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall transmit data to CMS for Non-ESI (RJ31) Service via the REST API Channel using a TLS 1.2-encrypted endpoint.
Security	Eligibility Determination	46410	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall update the 3Scale/Fuse policies to host the Context Path for Non-ESI (RJ31) Service.
Security	Eligibility Determination	46411	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall implement OAuth token based authentication with CMS for Non-ESI (RJ31) service.
Security	Enrollment		
Security	Enrollment	39811	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall have the functionality to notify a user that they have reached the maximum attempts for all registered verification methods.
Security	Enrollment	39812	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall display a modal pop-up message when the user is locked out of the account at the Login page.
Security	Enrollment	39813	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall display a modal pop-up message when the user is blocked out of the account at the Login page.
Security	Enrollment	39814	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall have the functionality to remove any registered verification method from the "Verification Registration" page for non-privileged users.
Security	Enrollment	39815	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall update the header text on the"My Profile" page.
Security	Enrollment	39816	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall add a "Cancel" button on the "Security Questions" page.
Security	Enrollment	39817	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall remove the "Delete Verification Method" link from the"Register Account by OTP" page.
Security	Enrollment	39818	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall update the page name for the "Register Account by OTP" page when adding/editing OTP methods.
Security	Enrollment	39819	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall remove text from the header on the "Verification Registration" page.
Security	Enrollment	39820	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall display a pop-up modal when a consumer clicks the Account Home icon, Language Change [globe] icon, Secure Mailbox icon, or Logout dropdown option from the "My Profile" page.
Security	Enrollment	39821	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall only display the popup modal when a consumer has unsaved edits on the “My Profile” page.
Security	Enrollment	39871	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall not display the error message “The user account is locked due to multiple invalid login attempts.” when the user enters the incorrect user name or password, and the user's account is not locked on the Login page.
Security	Enrollment	39872	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall not display any error messages when the account is locked or blocked on the Login page.
Security	Enrollment	39873	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall update the language in the paragraph on the “Verify By OTP” page.
Security	Enrollment	45839	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) should decrypt the request sent by CCA using Fuse.
Security	Enrollment	45840	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall encrypt the response before sending to CCA.
Security	General Requirement		
Security	General Requirement	37891	The contractor shall move the Armstrong call center NICE licenses to the Greenhaven call center NICE servers
Security	General Requirement	37914	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) system shall allow all new and existing users to optionally register with OAAM so that they can choose how they want to be challenged to have a One Time Passcode sent to them electronically.
Security	General Requirement	37915	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) system shall allow all new and existing users to optionally register their email and/or cell phone number with OAAM.
Security	General Requirement	37916	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) system shall allow all new and existing users to select a challenge method of security questions, email, or text when retrieving their password through the forget password flow.
Security	General Requirement	37917	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) system shall allow all new and existing users to select a challenge method of security questions, email, or text when retrieving their username through the forget username flow.
Security	General Requirement	37918	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) system shall allow all new and existing users to select a challenge method of security questions, email, or text when the user is challenged during login.
Security	General Requirement	37919	The CalHEERS System shall only block users from login who have locked both One Time Passcode and Security questions by failing three consecutive One Time Passcode attempts and three consecutive Security questions attempts.
Security	General Requirement	37920	The CalHEERS System's Initial forgot password page shall contain both a username field and a field for the month and day of the account owner's birthday.
Security	General Requirement	37921	The CalHEERS System shall validate the user entered email address and cell phone number before saving them as valid One Time Passcode challenge method.
Security	General Requirement	37922	The CalHEERS system shall inform the consumer of their one time passcode via email or text message.
Security	General Requirement	37923	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall direct the user to the Create an Account page when the user selects "Create an Account" (California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) to update link) and enhance the Log In or Create an Account page by combining the log in information and the create an account information while making the log in information more predominant.
Security	General Requirement	38997	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) system shall update the existing Secuirty protocols by removing the requirement for a maximum length for consumer passwords.
Security	General Requirement	38998	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) system shall update the dictionary of unacceptable passwords.
Security	General Requirement	38999	"The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) system shall allow the following special characters within the password: ` ~ ! @ # \$ % ^ & * () _ + - = [] \ { } ; ' : "" , . / < > ?"

Category	Sub Category	Req ID	Requirement
Security	General Requirement	39000	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) system shall retire certain security questions in each of the five security question groups.
Security	General Requirement	39001	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) system shall add additional security questions to each of the five security question groups.
Security	General Requirement	39002	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) system shall update Consumer messaging on the portal related to password requirements, dictionary words, special characters, OTP codes, and security questions.
Security	General Requirement	39134	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall provide a secure way to receive the Role Change Spreadsheet.
Security	General Requirement	39135	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall process the Role Change spreadsheet to change the role of an Agency Manager to an Agent.
Security	General Requirement	39136	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall process the Role Change spreadsheet to change the role of an Agent to an Agency Manager.
Security	General Requirement	39137	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall process the Role Change spreadsheet when received within 3 business days and provide notification by email.
Security	General Requirement	39171	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall allow designated County and Service Center security administrators to have access to California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) identity management functions in order to create accounts.
Security	General Requirement	39172	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) system shall provide monitoring and alerting of the entitlements and roles granted within the system.
Security	General Requirement	39173	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) system shall provide monitoring and alerting of the use of these roles and entitlements within the system.
Security	General Requirement	39176	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall allow designated County and Service Center security administrators to have access to California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) identity management functions in order to enable accounts.
Security	General Requirement	39177	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall allow designated County and Service Center security administrators to have access to California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) identity management functions in order to disable accounts.
Security	General Requirement	39178	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) system shall allow a single identity to have multiple entitlements/roles mapped to it.
Security	General Requirement	39303	The CalHEERS system shall send the webservice transaction through 2-way SSL.
Security	General Requirement	39304	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) system shall send encrypted webservice transaction to DIVS.
Security	General Requirement	39309	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) system shall use certificate authentication for the encrypted search request web service transactions.
Security	General Requirement	39310	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) system shall receive encrypted web service transaction from DIVS for match result.
Security	General Requirement	39311	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) system shall use certificate authentication for the encrypted match result web service transactions.
Security	General Requirement	39312	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall generate a transaction to be displayed on the transaction history and audit logs when eligibility is run as a result of a DIVS pass.
Security	General Requirement	39313	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) system shall generate the daily count of transactions sent and received from DIVS.
Security	General Requirement	39919	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall provide the functionality for Infrastructure set up, scanning, cleaning, and quarantine of existing documents
Security	General Requirement	39920	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall provide the functionality to enable malware scan as part of attachment upload and be logged for tracking purposes
Security	General Requirement	40598	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall block & reject the file being uploaded by User if scan identifies the file has malware or virus.
Security	General Requirement	42213	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) system shall allow the consumers to self register their accounts with following mandatory information: First name Last name Date of birth(mm/dd/yyyy) Email Username Password PIN
Security	General Requirement	42214	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall validate the user entered email address and cell phone number before saving them as valid One Time Passcode challenge method
Security	General Requirement	42215	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) system shall inform the consumer of their one time passcode via email or text message
Security	General Requirement	42216	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) system shall support separate set of password policies as below for Sales users and Internal admin users Internal/Sales Users Password Policy (i.e Internal Password Policy):- Your password must adhere to the following rules: - Cannot contain dictionary words, name, and common keyboard patterns (example: Qwerty1!) - Must be at least 8 characters - Cannot be more than 50 characters - Must have at least 1 UPPERCASE letter - Must have at least 1 lowercase letter - Must have at least 1 number - Must have at least 1 special character such as ` ~ ! @ # \$ % ^ & * () _ + - = [] \ { } ; ' : " " , . / < > ? - Must not be one of your previous 24 passwords

Category	Sub Category	Req ID	Requirement
Security	General Requirement	42217	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) system shall support separate set of password policies as below for consumers and password should never expire Consumer Password Policy (External Password Policy):- Password - Must be at least 8 characters - Cannot be more than 50 characters - Cannot contain dictionary words, name, and common keyboard patterns (example: Qwerty1!) And must contain at least 3 of the following: - UPPERCASE letter (A-Z) - Lowercase letter (a-z) - Number (0-9) - Special character ` ~ ! @ # \$ % ^ & * () _ + - = [] \ { } ; ' : " , . / < > ?
Security	General Requirement	42218	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) systems should authenticate users against ForgeRock AM/Directory services
Security	General Requirement	42219	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) system shall allow authorized agents to generate self delegation authentication code to the given consumer mobile number
Security	General Requirement	42220	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall generate messages for conditions that violate security rules at a minimum: A) Unauthorized access attempts on portal application B) Logon attempts that exceed the maximum allowed C) Termination of authorized sessions after a 15mins time of no activity
Security	General Requirement	42221	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) system shall not allow the access to the Account Administration screen outside the whitelisted IP range
Security	General Requirement	42222	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) systems shall challenge the users based on adaptive/risk based authentication rules
Security	General Requirement	42223	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) system shall allow all new and existing users to select a challenge method of security questions, email, or text during login, so that they can choose how they want to be challenged when the user is challenged during login
Security	General Requirement	42224	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) system shall enforce the users to choose at least one of challenge methods (Security Q&A, OTP- mobile/email) during the login if user has not opted for any
Security	General Requirement	42225	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall only block users from login in following scenarios: - Exhausted three consecutive Security questions attempts and three consecutive One Time Passcode attempts (As mentioned sequence)
Security	General Requirement	42226	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall only block users from login in following scenarios: - Exhausted there consecutive One Time Passcode attempts
Security	General Requirement	42227	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) system shall display a notification message on screen when internal and Sales California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) users log in (i.e. Legal Notice Page)
Security	General Requirement	42228	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) system LW Security IAM services shall be integrated with ForgeRock IAM REST APIs
Security	General Requirement	42229	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) system shall send the Password Expiry Notification for the Internal Users and Sales Users. Below mentioned is set for warning and expiry notification a)Password Expiry warning notification emails(post 45 day to 59 day) b)Password expiration notification mail(60th day)
Security	General Requirement	42230	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall allow designated County,DHCS and Service Center security administrators to have access to California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) identity management functions in order to create admin accounts within their organization/child organizations
Security	General Requirement	42231	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall allow designated County,DHCS and Service Center security administrators to have access to California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) identity management functions in order to generate internal admin user report with in same organization/child organizations
Security	General Requirement	42232	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall allow designated County,DHCS and Service Center security administrators to have access to California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) identity management functions in order to enable accounts.
Security	General Requirement	42233	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall allow designated County,DHCS and Service Center security administrators to have access to California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) identity management functions in order to disable accounts
Security	General Requirement	42234	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) system shall allow a single user to have multiple entitlements per admin role mapped to it
Security	General Requirement	42235	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall allow designated County,DHCS and Service Center security administrators to have access to California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) identity management functions in order to add/remove entitlements or roles from user's profile with in their organization/child organizations
Security	General Requirement	42236	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) system shall allow designated County,DHCS and Service Center security administrators to reset password, one-time passcode, security questions and unblock California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) Application accounts for all individual consumers and Sales users within same organization/child organizations
Security	General Requirement	42237	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) system shall allow L1 & L2 Help Desk Users to reset password, one-time passcode, security questions and unblock California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) Application accounts for all California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) users
Security	General Requirement	42238	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) system shall allow 30 concurrent user sessions

Appendix A-4 - SOW Exhibit A - System Requirements Specification
(Extracted from CalHEERS RTM)

Category	Sub Category	Req ID	Requirement
Security	General Requirement	42239	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) system shall expire all OTPs (Forgot password, challenge and delegation) in 10 minutes
Security	General Requirement	42240	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) system shall provision the user to HBX database and ForgeRock directory services
Security	General Requirement	42241	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall send 6-digit one-time passcode (recommended as per NIST guidelines). Currently system sends out a 5-digit one-time passcode
Security	General Requirement	42242	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) system shall provide a user to update there profiles. User is authorized to update the following attributes a)First Name b)Middle Initial c)Last Name d)Email e)DOB f>Password g)OTP Methods h)Security Questions
Security	General Requirement	42243	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) system shall allow all new and existing users to select a challenge method of email or text during registration or login, so that they can choose how they want to be challenged when retrieving their password through the forget password flow
Security	General Requirement	42244	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) system shall allow all new and existing users to retrieve their username by providing registered Email and DOB
Security	General Requirement	43151	The contractor shall expand the amount of users that can unblock user ids in OAAM
Security	General Requirement	43152	The contractor shall provide a system that can support 300 concurrent users unblocking accounts all at one time.
Security	General Requirement	44471	For Consumers' (non-privileged users), the password must contain 3 of 4 items (Upper Case, Lower Case, Special Character and Number).
Security	General Requirement	44472	The password policies shall be able to be separate and independent for privileged and non-privileged users.
Security	General Requirement	44532	For Consumers' (non-privileged users), the password must be no less than 8 characters in length.
Security	General Requirement	44961	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall generate alerts for conditions that violate security rules at a minimum: A) Unauthorized access attempts on data and System function B) Logon attempts that exceed the maximum allowed C) Termination of authorized sessions after a specified time of no activity
Security	General Requirement	44962	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) Security and Privacy Framework, in compliance with the HITECH requirements and FISMA Continuous Monitoring Guidelines, shall implement necessary process, tools and technology to implement, manage, administer, monitor and govern all the compliance policies that are required to be implemented by the exchange very efficiently.
Security	General Requirement	44963	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) Security and Privacy Framework shall implement appropriate security architecture and control to address various security attacks such as Spoofing, Tampering, Repudiation, Information (disclosure), Denial (of service), Elevation (of privilege) (STRIDE).
Security	General Requirement	44974	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) services architecture shall comply with security and privacy requirements for the California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) deployed infrastructure.
Security	General Requirement	44975	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) Security and Privacy Framework shall consider necessary security provisions and controls through a thorough evaluation of the System and data classification for the exchange, determine the level of risk the stakeholder will manage and define appropriate manage services model that will support the implementation of multi-zone architecture and a secure infrastructure.
Security	General Requirement	44977	The Vendor shall complete the annual ITEC security assessment.
Security	General Requirement	44978	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall provide security incident reporting and mitigation mechanisms, including at a minimum: A) Generate warning or report on System activity based on security parameters B) Terminate access and/or generate report when potential security violation detected C) Preserve and report specified audit data when potential security violation detected
Security	General Requirement	44979	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) Security and Privacy Framework shall implement a security architecture based on Medicaid Information Technology Architecture 2.0 (MITA 2.0) S & P model with the following three fundamental security architectural elements: A) Multi Level Security B) Role Based Access Control (RBAC) C) Decentralized Label Model (DLM)
Security	General Requirement	44980	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) Security and Privacy Framework shall guide the development and implementation of all the security controls necessary to comply with the security requirements of the Exchange and comply with HIPAA and HITECH security requirements for Creating, Collecting, Transporting and Processing of PHI, PII, IIHI, and FTI data.
Security	General Requirement	44981	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) Security and Privacy Framework shall comply with the Affordable Care Act, Section 1561 requirements and enable building an interoperable and secure standards and protocols to facilitates secure enrollment of individuals, transmit and/or process individual's financial information (FTI) and minimize the risk of security and privacy vulnerabilities.
Security	General Requirement	44982	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) Security and Privacy Framework shall implement appropriate security constructs to identify, verify, authorize, and authenticate users before allowing access to sensitive resources such as PII, PHI or FTI data.
Security	General Requirement	44983	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) Security and Privacy Framework shall implement a defense-in-depth, multi-zone computing architecture that physically separates the layers between the System component; each layer is protected by firewalls and appropriate security devices based on the sensitivity of data and computation.

Appendix A-4 - SOW Exhibit A - System Requirements Specification
(Extracted from CalHEERS RTM)

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Category	Sub Category	Req ID	Requirement
Security	General Requirement	44984	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) Security and Privacy Framework shall implement data encryption mechanism for sensitive data in transit shall be encrypted to protect data confidentiality and integrity as appropriate based on the sensitivity of data. FTI shall be encrypted based on IRS guidelines. If encryption is not used for FTI data, appropriate compensating security mechanism shall be in place such as switched Virtual Local Area Network (VLAN) etc.
Security	General Requirement	44985	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) Security and Privacy Framework shall implement data encryption mechanism for Servers or server storage containing PHI or PI shall have sufficient administrative, physical, and technical controls in place to protect that data, based upon a risk assessment/System security review, or shall be encrypted using FIPS 140-2 validated Software
Security	General Requirement	44986	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) Security and Privacy Framework shall build appropriate privacy protections into the design of the Exchange to control the collection, use, dissemination and disposition of PII, PHI and FTI data.
Security	General Requirement	44987	All the services and infrastructure developed for California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) Security and Privacy Framework shall be using open security standards and frameworks such as: A) Policy: WS-Policy, WS-Trust, WS-Privacy, Security Assertion Markup Language (SAML), Enterprise Privacy Authorization Language (EPAL) B) Federation: WS-Secure Conversation, WS-Federation, WS-Authorization, XML Key Management (XKMS) C) Mechanism: Extensible Access Control Markup Language (XACML), XML Encryption, XML-Digital Signatures, Extensible rights Markup Language (XrML)
Security	General Requirement	44988	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) Security and Privacy Framework shall comply with the Administrative/Management Safeguard requirements mandated by California DHCS ISO as defined in Information Technology Projects Security Requirements 1 (SR1) document.
Security	General Requirement	44989	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) Security and Privacy Framework shall comply with the Technical/Operational Safeguard requirements mandated by California DHCS ISO as defined in Information Technology Projects Security Requirements 1 (SR1) document.
Security	General Requirement	44990	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) Security and Privacy Framework shall comply with the Physical Safeguard requirements mandated by California DHCS ISO as defined in Information Technology Projects Security Requirements 1 (SR1) document.
Security	General Requirement	44991	The Vendor shall comply with State of California-required actions in response to a breach, including, but not limited to: A) Reporting timeframes B) Reporting party C) Research and investigation activities D) Mitigation of the circumstances that resulted in the breach
Security	General Requirement	44992	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall provide the functionality to report Personal Identifiable Information (PII) and Personal Health Information (PHI) viewing through an audit log that includes at a minimum, login ID and timestamp.
Security	General Requirement	44993	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall adhere to Tax Return security: IRS Section 6103
Security	General Requirement	44994	The Vendor shall design, document and implement a California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) Risk-Based Security & Privacy Framework.
Security	General Requirement	44995	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) Risk-Based Security & Privacy Framework shall include definition and process to design, implement, manage, administer, govern the Security and Privacy of the California Health Benefit Exchange System and data.
Security	General Requirement	44996	The Vendor shall implement the California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) Risk-Based Security & Privacy Framework.
Security	General Requirement	44997	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall have the capability to receive faxed application materials on secured fax servers.
Security	General Requirement	44999	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) Security and Privacy Framework shall implement a comprehensive process and centralized service for Identity, Credential and Access Management (ICAM).
Security	General Requirement	45000	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) Security and Privacy Framework shall implement data encryption mechanism for all equipment, workstations and laptops that process and/or store PHI or PI shall be encrypted using FIPS 140-2 validated Software. The encryption solution shall be full-disk unless otherwise approved by the ISO
Security	General Requirement	45001	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall have an identity management tool that will identify, match, and report individuals that are in the corresponding interface Systems (SAWS, MEDs) are the same individuals in the System. The Vendor is encouraged to leverage existing State efforts conducted with identify management with the Department of Motor Vehicles and the California Employment Development Department.
Security	General Requirement	45002	The Vendor shall support the State in ensuring Business Associate Agreements are in place in order to exchange Personal Identifiable Information (PII) and Personal Health Information (PHI), following DHCS policies, best practices, and HIPAA regulations. DHCS will function as Subject Matter Expertise support with this requirement
Security	General Requirement	45006	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) Security and Privacy Framework shall comply with the following Federal and California state security and privacy policies: A) Federal Information Security Management Act (FISMA) of 2002 B) Health Insurance Portability and Accountability Act (HIPAA) http://csrc.nist.gov/publications/PubsFIPS.html C) Health Information Technology for Economic and Clinical Health Act of 1996 D) Privacy Act of 1974 E) Patient Protection and Affordable Care Act (ACA) of 2010, Section 1561 F) Safeguarding and Protecting Tax Returns and Return Information (26 U. S. C. 6130 and related provisions) G) E-Government Act of 2002 H) National Institution of Standards & Technology (NIST) Special Publications. NIST's Special Publications are available at: http://csrc.nist.gov/publications/PubsSPs.html I) National Security Agency (NSA) Security Recommendation Guides J) California Department of Health Care Services (DHCS) - Information Technology Projects Security Requirements 1 (SR1)

Appendix A-4 - SOW Exhibit A - System Requirements Specification
(Extracted from CalHEERS RTM)

Category	Sub Category	Req ID	Requirement
Security	General Requirement	45007	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) Security and Privacy Framework shall implement federal guidance and requirements for those with whom Exchange data are shared, and to enable effective security and privacy implementation and operation by the state of California in the following areas (but not limited to): A) System and Data Classification B) Security Controls C) OCIO Federated Identity Management Standards including WSSecurity, SAML 2.0 or greater, Liberty ID-FF and WS* Identity Standards D) Secured Infrastructure and Managed Services computing E) Data Encryption F) Audit Trails G) Continuity of Operations and Disaster Recovery H) Compliance Oversight I) Privacy
Security	General Requirement	45008	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) Security and Privacy Framework shall comply with the general guidance for managing risk in National Institute of Standards and Technology (NIST) Special Publication (SP) 800-37, Guide for Applying the Risk Management Framework to Federal Information Systems.
Security	General Requirement	45009	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) Security and Privacy Framework shall comply with the security classification guidelines for IT data and Systems (Low, Moderate and High) and use the security controls established at level as defined by NIST Federal Information Processing Standards (FIPS) Publication 199, Standards for Security Categorization of Federal Information and Information Systems. The data and the System categorization shall follow the guidance and standards defined in NIST SP 800-60, Guidance for Mapping Types of Information and Information Systems to Security Categories.
Security	General Requirement	45013	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) Security and Privacy Framework shall identify a minimum set of security controls commensurate with the sensitivity of data stored and exchanged that will be adapted by all entities implementing and operating the Health Benefit Exchange. The minimum set of security control identified and defined shall follow the requirements of HIPAA, HITECH, FISMA, Tax Information Safeguarding Requirements and California state's security and privacy framework.
Security	General Requirement	45020	The Vendor shall monitor and maintain security and privacy standards to protect consumer privacy and continually add best practices to ensure consumer privacy is consistently maintained.
Security	General Requirement	45021	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) multi-zone architecture shall follow the recommendations defined in Medicaid Information Technology Architecture 2.0 (MITA 2.0).
Security	General Requirement	45023	The ICAM services shall implement the following principles: A) Identity Proofing: Provide a minimum set of administrative controls and requirements for identity proofing (user proofing who they say they are) and for periodic management of authenticators. B) Authorization: Users will be assigned roles to ensure that they have access to data that is needed to get the job done and nothing more (least privilege). C) Authentication: Enabling increasing complexity of authentication as the sensitivity of the System and data increases including but not limited to password policies, automatic password expiration policies etc. D) In addition to implementing ICAM services, California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) Security and Privacy Framework shall consider appropriate Accountability and Non-repudiation requirements for most critical transactions.
Security	General Requirement	45024	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) Security and Privacy Framework shall implement data encryption mechanism for all electronic files that contain PHI or PI data shall be encrypted using FIPS 140-2 validated Software when stored on any removable media or portable device (i.e., USB thumb drives, floppies, CD/DVD, Blackberry, backup tapes, etc.)..
Security	General Requirement	45025	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) Security and Privacy Framework shall implement data encryption mechanism for all transmissions and data-links sending PHI or PI data between the application/ System and the Database Management System (DBMS) shall be encrypted using FIPS 140-2 validated Software.
Security	General Requirement	45026	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) Security and Privacy Framework shall support the following baseline oversight activities: A) California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) Security and Privacy Framework, shall define and implement appropriate process, tools and technologies to integrate compliance oversight activities with the Operations Governance of the Exchange. B) Ensuring risk management is performed in accordance with NIST SP 800-37 guidance C) Ensuring secured coding practices are implemented in the SDLC best practices to avoid common Software weaknesses and vulnerabilities D) Ensuring documentation of necessary and appropriate privacy artifacts. E) Serving as approval authority for accreditation of Systems and interconnections F) Enforcing ongoing monitoring and periodic compliance reporting and providing evidences on the compliance levels of security and privacy requirements, data exchange and usage agreements. G) Conducting System assessment.
Security	General Requirement	45027	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) Security and Privacy Framework shall adopt the following privacy principle in guidance with DHHS: A) Individual Access B) Correction C) Openness and Transparency D) Individual Choice E) Collection F) Use and Disclosure Limitation G) Data Integrity H) Accountability
Security	General Requirement	45028	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall have the ability to time-out users using the web portal after a period of inactivity. The period of time shall be defined by the Exchange.

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(Extracted from CalHEERS RTM)

Category	Sub Category	Req ID	Requirement
Security	General Requirement	45036	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) Security and Privacy Framework shall implement the Public Key Infrastructure (PKI) that follows standard practices such as the use of accepted Certification Authorities (CA), documented Certificate Policies (CP), and Certificate Practice Statements (CPS) which will include key escrow strategy. Implementation shall use fundamental technical standards such as X.509 certificate format and Public Cryptographic Standards (PKCS). The PKI used across entities shall address interoperability requirements.
Security	General Requirement	45037	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) Security and Privacy Framework shall address the following to minimize loss and facilitate effective disaster recovery: A) Systems shall be "fail-safe" to ensure that the System in failed state doesn't reveal any sensitive information or leave any access controls open for attack. B) Fully redundant network and Equipment components C) Use offsite storage in the event of physical disaster D) Build in contingencies for the storage of transactions where there is dependency on availability of data from business partners that provide authoritative data (e.g. the IRS, DHS and SSA). E) Leverage Virtualization to expedite disaster recovery.
Security	General Requirement	45038	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) Security and Privacy Framework shall support necessary auditing mechanism to track and monitor access to all sensitive data, specifically PII and PHI information in compliance with Privacy Act, HIPAA and the Audit requirements defined in the Technical/Operational Safeguard section of (California DHCS ISO) Information Technology Project Security Requirements 1 (SR1) November 2011.
Security	General Requirement	45085	The CAIHEERS system shall limit access to ADMIN users to Covered California.Com to Information Security Officer(ISO) approved IP Addresses
Security	General Requirement	45119	The CalHEERs System's Login Flow, Registering Security Questions, Forgot Password, and Strong Authentication web page flows shall be developed and maintained by the Portal Team.
Security	General Requirement	45120	The CalHEERs system's Login Flow Web Pages shall utilize the Out of the Box (OOTB) Simple Object Access Protocol (SOAP) Application Programming Interfaces (APIs) from OAAM to support the login flow.
Security	General Requirement	45121	The CalHEERs System's Login Flow shall be configured to validate the user's credentials via the OAM Access Software Development Kit (ASDK).
Security	General Requirement	45144	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) Security and Privacy Framework shall implement federal guidance and requirements for those with whom Exchange data are shared, and to enable effective security and privacy implementation and operation by the state of California in the following areas (but not limited to): A) System and Data Classification B) Security Controls C) OCIO Federated Identity Management Standards including WSSecurity, SAML 2.0 or greater, Liberty ID-FF and WS* Identity Standards D) Secured Infrastructure and Managed Services computing E) Data Encryption F) Audit Trails G) Continuity of Operations and Disaster Recovery H) Compliance Oversight I) Privacy
Security	General Requirement	45145	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) Security and Privacy Framework shall comply with the following Federal and California state security and privacy policies: A) Federal Information Security Management Act (FISMA) of 2002 B) Health Insurance Portability and Accountability Act (HIPAA) http://csrc.nist.gov/publications/PubsFIPS.html C) Health Information Technology for Economic and Clinical Health Act of 1996 D) Privacy Act of 1974 E) Patient Protection and Affordable Care Act (ACA) of 2010, Section 1561 F) Safeguarding and Protecting Tax Returns and Return Information (26 U. S. C. 6130 and related provisions) G) E-Government Act of 2002 H) National Institution of Standards & Technology (NIST) Special Publications. NIST's Special Publications are available at: http://csrc.nist.gov/publications/PubsSPs.html I) National Security Agency (NSA) Security Recommendation Guides J) California Department of Health Care Services (DHCS) - Information Technology Projects Security Requirements 1 (SR1)
Security	General Requirement	45146	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) Security and Privacy Framework shall comply with the general guidance for managing risk in National Institute of Standards and Technology (NIST) Special Publication (SP) 800-37, Guide for Applying the Risk Management Framework to Federal Information Systems.
Security	General Requirement	45147	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) Security and Privacy Framework shall comply with the security classification guidelines for IT data and Systems (Low, Moderate and High) and use the security controls established at level as defined by NIST Federal Information Processing Standards (FIPS) Publication 199, Standards for Security Categorization of Federal Information and Information Systems. The data and the System categorization shall follow the guidance and standards defined in NIST SP 800-60, Guidance for Mapping Types of Information and Information Systems to Security Categories.
Security	General Requirement	45149	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) system shall generate and report ALERTS for ADMIN users attempting to log in to coveredca.com from unauthorized IP Addresses
Security	General Requirement	45153	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall have the ability to identify users location and allow/block users from logging in from identified regions and/or countries

Appendix A-4 - SOW Exhibit A - System Requirements Specification
(Extracted from CalHEERS RTM)

Category	Sub Category	Req ID	Requirement
Security	General Requirement	45167	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall align with FIPS 140-2 validated soft token to meet the following IRS VPN Safeguard Computer Security Evaluation Matrix (SCSEM) requirements: - Shall have private keys that are non-exportable - Keys shall not be stored in plaintext (unencrypted) form - Distribution of the seed record and initial passphrases must be sent over a confidential channel to ensure that it is not duplicated in transit - Activation of the token must occur every time user authenticates using the soft token software - Token time limit must be 2 minutes or less
Security		45174	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) system shall provide the ability for Security Administrators to reset password, one-time passcode, security questions and unblock California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) Application accounts for their assigned users within the same organization.
Security		45175	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) system shall allow Service Center representatives to reset password, one-time passcode, security questions and unblock California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) Application accounts for all individual consumers and Sales users.
Security		45176	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) system shall allow L1 & L2 Help Desk Users to reset password, one-time passcode, security questions and unblock California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) Application accounts for all California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) users.
Security	General Requirement	45199	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall implement a security framework providing field level security for application pages.
Security	General Requirement	45200	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall document all specific field level security requirements in the Security Matrix.
Security	General Requirement	45201	Security Roles Matrix will be reviewed and updated to meet current business need.
Security	General Requirement	45202	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall develop required roles in the access management tool.
Security	General Requirement	45283	The data centers shall have a minimum of two physical barriers between FTI and those individuals without a need-to-know (Section 4.2, Table 3 of the IRS 1075 - September 2016).
Security	General Requirement	45294	The SIEM archival recovery system shall have the ability to retrieve the historical archive log data from tapes stored in a proprietary LogRhythm database.
Security	General Requirement	45295	The SIEM archival recovery system shall leverage virtual machines as opposed to the physical footprint at the data center.
Security	General Requirement	45296	The SIEM archival recovery system shall leverage the virtual machine and be capable to connect to the ZFS share for data recovery purposes.
Security	General Requirement	45297	Current LogRhythm physical deployment shall be decommissioned and removed from enclosures at the data centers.
Security	General Requirement	45732	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) system database backups shall be configured accordance with defined Recovery Time Objective(RTO) and recovery point objective(RPO) in project
Security		45733	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) system shall be take full Backup and continuous/ongoing incremental backups
Security		45734	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) system database backups shall be support disaster recovery policies
Security		45735	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) system shall be sent Backups to archive storage for 10-year retention purpose
Security	General Requirement	45736	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) Technology Refresh - Oracle to RDS Aurora PostgreSQL Database - Database - Restore & Recovery
Security	General Requirement	45737	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) system shall be capable to recover data lost or data corruption over a period, including Requirement to roll back individual records to fix database corruptions.
Security		45738	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) system shall be capable to recover storage level corruption
Security		45739	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) system shall be able to perform Point in Time Recovery(PITR) in case data corruption or release rollback, Point in Time recovery is possible for 35 days in RDS aurora.
Security		45740	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) system shall be able to restore Old Image of database for Compliance with regulatory or internal policies
Security	General Requirement	45741	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) system shall be able to restore current image in event of hardware of software issue
Security	General Requirement	45742	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) system shall be able to restore current image in event of disaster recovery
Security	General Requirement	45743	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) Technology Refresh - Oracle to RDS Aurora PostgreSQL Database - Database - Migration
Security	General Requirement	45744	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) system shall capable to store migrated data in terms of database storage size, table size, index size, tables rows from source database (Oracle)
Security		45745	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) system shall support migration of different data type(or have compatible datatype) compared to source database (Oracle)
Security		45746	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) system shall support object type or alternative object type (like partition tables, soundex index) with similar functionality compared to source database (Oracle)
Security		45747	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) system shall have capability to migrate full data from Source database (Oracle)
Security	General Requirement	45748	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) system shall have capability to sync continuous data from Source database (Oracle)
Security	General Requirement	45749	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) system shall be support validation of data and structure from Source database (Oracle)
Security	General Requirement	45750	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) system shall be using optimal data migration process to have minimum impact on production database
Security	General Requirement	45751	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) Technology Refresh - Oracle to RDS Aurora PostgreSQL Database - Database - Code Deployment
Security	General Requirement	45752	Automatic deployment
Security	General Requirement	45753	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) system shall be able to maintain versioning of DB structure scripts/DBCR
Security	General Requirement	45754	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) system shall be able to deploy the code fixes

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(Extracted from CalHEERS RTM)

Category	Sub Category	Req ID	Requirement
Security	General Requirement	45755	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) system shall be able to compare deployed codes between environments
Security	General Requirement	45756	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) Technology Refresh - Oracle to RDS Aurora PostgreSQL Database - Database - Monitoring
Security	General Requirement	45770	Calheers Database system shall support continous monitoring of database and database server
Security	General Requirement	45771	Calheers Database system shall configure alerts on critical metrics
Security	General Requirement	45772	Calheers Database system shall support monitoring internals of database
Security	General Requirement	45773	Calheers Database system shall support monitoring of database backups
Security	General Requirement	45774	Calheers Database system shall use monitoring tool
Security	General Requirement	45775	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) Technology Refresh - Oracle to RDS Aurora PostgreSQL Database - Database - Decommission/Retire
Security	General Requirement	45776	Calheers Database system shall ensure sanitization mechanisms are in line with NIST 800 88 Guidelines for Media Sanitization
Security	General Requirement	45777	Calheers Database system shall support hypervisor enforces sanitization of the instance (container) image file space upon release
Security	General Requirement	45778	Calheers Database system shall support database engine upgrade and Patching activity as per project guideline
Security	General Requirement	45779	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) system shall conducts capacity planning to ensure the necessary capacity for database storage and compute
Security	General Requirement	45780	archive data older from business tables
Security	General Requirement	45781	archive data older from business tables
Security	General Requirement	45813	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall upgrade reCAPTCHA to v2 Enterprise.
Security	General Requirement	45814	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall implement Google reCAPTCHA v2 Enterprise Invisible.
Security	General Requirement	45815	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall add Execute and Assessment to detect Password Leakage.
Security	General Requirement	45843	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall provide messaging with clear instructions at login attempt for consumers whose California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) account have been disabled due to their dependent(s) being identified as a part of population with Sensitive Contact information.
Security	General Requirement	45844	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall provide messaging with clear instructions at new account creation attempt for consumers who are not permitted to create a California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) account, due to their dependent(s) being identified as a part of population with Sensitive Contact information.
Security	General Requirement	45935	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall display a message advising the user to update their password when Password Leakage is detected.
Security	General Requirement	46216	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall provision required infrastructure and implement PAM solution (Beyond Trust)
Security	General Requirement	46286	Version upgrade is required to address the vulnerabilities with existing Fuse (7.9) version to keep the system updated
Security	General Requirement	46287	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall enforce the use of TLS 1.2 or above for all California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) portal user sessions.
Security	General Requirement	46288	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall implement Multi Factor Authentication (MFA) for Consumers and Authorized Representatives. All users in California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) eco system shall be prompted for MFA.
Security	General Requirement	46289	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall implement Adaptive Authentication (based on device fingerprinting) to reduce the number of MFA challenges/questions for Privileged/Admin users (e.g. Admin Supervisor, County Eligibility Worker, etc.) and Sales users (Agent, CEC, Enroller etc.)
Security	General Requirement	46290	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall disable the accounts for the Consumers, Authorized Representatives and Sales users (Agent, CEC, Enroller etc.) after 430 calendar days of inactivity
Security	General Requirement	46291	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall display a message to users during the login process, whose accounts are getting disabled due to 430 calendar days of inactivity.
Security	General Requirement	46292	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall re-direct the user to Contact Us Page (https://www.coveredca.com/Contactus/support/) during self re-eanble process, when user is not registered with MFA Options (email/mobile)
Security	General Requirement	46293	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall create a process workflow for re-enabling (self service) disabled accounts of Consumers and Authorized Representatives.
Security	General Requirement	46294	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall capture the justification for disabling and re-enabling the accounts.
Security	General Requirement	46295	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall provide account re-enable capabilities to specific Service Center admin staff to re-enable Consumers and Authorized Representatives by using UserAccountAdministration module
Security	General Requirement	46296	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall display appropriate message to Service Center admins while re-enabling the accounts, disabled due to inactivity (i.e. Applicable for Consumers/AuthReps)
Security	General Requirement	46297	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall only allow service center admins to re-enable the disabled sales accounts, which are not disabled due to inactivity
Security	General Requirement	46298	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall implement stronger password length as per MARS-E 2.2 requirements
Security	General Requirement	46299	Enforce at least the following minimum password requirements for Privileged/Admin users (e.g. Admin Supervisor, County Eligibility Worker, etc.) 1. MinimumPasswordLength = 15 characters
Security	General Requirement	46300	Enforce at least the following minimum password requirements for Sales users (Agent, CEC, Enroller etc.) 1. MinimumPasswordLength = 15 characters
Security	General Requirement	46301	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall onborad, identified existing privileged accounts (system accounts, service accounts, SaaS accounts to) the new privilege management solution (PAM)

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(Extracted from CalHEERS RTM)

Category	Sub Category	Req ID	Requirement
Security	General Requirement	46302	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall Implement auto rotation of secrets/passwords for identified application accounts.
Security	General Requirement	46303	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall implement a solution to support manual password rotation for secrets/passwords via authorized admins
Security	General Requirement	46304	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall implement access control for the system accounts (to adhere with least privilege access principles) within PAM solution
Security	General Requirement	46305	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall implement the monitoring capabilities in PAM solution to monitor access logs
Security	General Requirement	46306	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall implement secure access of the SSH Keys,SSH/RDP Sessions for identified servers
Security	General Requirement	46307	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) PAM solution shall provide the capability to securely elevate the access for an identified system account during the specified time window
Security	General Requirement	46308	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall Implement Pass-through authentication for identified accounts through the PAM Console
Security	General Requirement	46309	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall Implement access certification for PAM Access
Security	General Requirement	46310	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall implement SSO and MFA for PAM Application using OKTA
Security	General Requirement	46311	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall create/update required SOPs and compliance documentation for new PAM solution
Security	General Requirement	46312	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall implement stronger password requirements as per MARS-E 2.2 Enforce the following minimum password requirements for Consumer Accounts and Authorized Representatives?MaximumPasswordAge = 430 calendar days
Security	General Requirement	46322	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall create federated users for the new Agents with relevant access
Security	General Requirement	46323	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shallcreate Salesforce Partner Community user with right access
Security	General Requirement	46781	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall implement a secure two way file transfer set-up between California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) and CalSAWS.
Security	General Requirement	46782	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall implement an outbound fuse interface to connect with the CalSAWS FTP over the SFTP.
Security	General Requirement	46783	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall utilize the AWS family to authenticate the incoming CalSAWS Request file(s).
Security	General Requirement	46784	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall implement the outbound fuse application to scan and process the file(s).
Security	General Requirement	46879	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall modernize non-production firewalls to NGFW software with flexible subscription models because the current VM 300 (4 vCPUs) firewall cannot meet California Healthcare Eligibility, Enrollment and Retention System (CalHEERS)' increasing demands. To enhance capacity, existing non-prod firewalls to be modernized with a new NGFW flexible vCPUs firewall with 8 vCPUs.
Security	General Requirement	46880	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall use a Lambda function to provide automated failover of active/passive firewalls to ensure high availability of non-production firewalls by replacing the current setup of manual failover of firewalls.
Security	General Requirement	46881	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall deploy new non-production firewalls that will require design and configuration changes in the architecture to ensure consistency with production firewall designs.
Security	General Requirement	46882	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall modify non-production traffic routes to disable the public interface and divert all outbound traffic to the Untrust interface. Change on California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) side and impacting interface partners will require SOPs update and SIT testing.
Security	General Requirement	47002	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall implement Malware scan for all the inbound files received from KP Corp Print Vendor over SFTP
Security	General Requirement	47003	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall isolate all the incoming files (Safe/Infected) from the California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) application infrastructure
Security	General Requirement	47004	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall scan the incoming files for the malware and move the infected files to the quarantine folder
Security	General Requirement	47005	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall quarantine and send email alerts if a malicious file is detected as part of scans
Security	General Requirement	47006	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall generate email alerts for California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) Security and Operations team, if a malicious file is detected
Security	General Requirement	47007	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall generate audit logs for malicious files detected as part of scans by clamAV
Security	General Requirement	47009	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall update the Password Hash algorithm for the incoming EHIT and VLP service requests for CalSAWS systems
Security	General Requirement	47010	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall update the Password Hash algorithm for the incoming EHIT and VLP service requests from CalSAWS (SHA-1 to SHA-2)
Security	General Requirement	47011	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall have a backward compatibility to support SHA-1 for the Password Hash Alogirthm for the incoming/outgoing EHIT and VLP Services requests from CalWIN
Security	General Requirement	47012	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall update the Password Hash algorithm for the outgoing EHIT and VLP service requests for CalSAWS
Security	General Requirement	47013	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall update the Password Hash algorithm for the outgoing EHIT and VLP service requests from California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) to CalSAWS (SHA-1 to SHA-2)
Security	General Requirement	47360	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall allow a self registration capability for the creation of Family PACT client accounts.
Security	General Requirement	47361	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall require SSApp clients to create a new account to apply for Family PACT program.
Security	General Requirement	47364	Account Creation Requirements for Family PACT clients: 1. California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall collect the following attributes for creation of a Family PACT account in IDM First Name, Last Name, DOB, User Name, Email Address or Phone, Password, User Type

Category	Sub Category	Req ID	Requirement
Security	General Requirement	47365	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall verify legitimacy of user by sending email/mobile OTP on provided email or phone in Family PACT account creation profile (to stop fake account creation)
Security	General Requirement	47366	Password Policy Requirements California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall enforce below password policy for Family PACT client accounts 1. MaximumPasswordAge = 430 calendar days (one year + three months) 2. Have at least 8 characters 3. Have no more than 50 characters 4. Not contain dictionary words, names, or common keyboard patterns (example: Qwerty1!)5. Disallow previous 24 passwords 5. And must contain at least three of the following: - UPPERCASE letter (A-Z) - Lowercase letter (a-z) - Number (0-9) - Special Character ` ~ ! @ # \$ % ^ & * () _ + - = [] \ { } ; ' : " , . / < > ?
Security	General Requirement	47367	Provision to downstream systems 1. California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall provision the Family PACT users to LDAP system 2. California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall provision the Family PACT users to the identified OU for Family PACT Clients
Security	General Requirement	47368	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall restrict duplication of Email or Phone for Family PACT users during registration or profile updates.
Security	General Requirement	47369	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall allow a self registration capability for the creation of a Family PACT provider account.
Security	General Requirement	47370	Family PACT Account Creation Requirements 1. California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall collect the following attributes for creation of Family PACT account in IDM: DOB, User Name, email address, or Phone, Password, User Type
Security	General Requirement	47371	Password Policy Requirements California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall enforce below password policy for Family PACT provider accounts 2. MaximumPasswordAge = 60 calendar days 3. Have at least 15 characters 4. Have no more than 50 characters 5. Not contain dictionary words, names, or common keyboard patterns (example: Qwerty1!)5. Disallow previous 24 passwords 6. And must have the following: - UPPERCASE letter (A-Z) - Lowercase letter (a-z) - Number (0-9) - Special Character ` ~ ! @ # \$ % ^ & * () _ + - = [] \ { } ; ' : " , . / < > ?
Security	General Requirement	47372	Provision to downstream systems 1. California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall provision the Family PACT users to LDAP system 2. California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall provision the Family PACT users to the identified OU for Family PACT Providers
Security	General Requirement	47374	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall create a process for Family PACT Admin Account Creation
Security	General Requirement	47375	Family PACT Account Creation Requirements 1. California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall collect the following attributes for creation of Family PACT account in IDM - First Name, Last Name, DOB, Email Address User Type, Middle Name (Optional), (Optional)
Security	General Requirement	47376	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall provide the capability to auto generate username based on the First Name, Last Name, Middle Name combination during account creation and the username shall be notified to the Family PACT users on the provided email address.
Security	General Requirement	47377	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall provide the capability to generate a temporary password and the password shall be notified to the Family PACT users on provided email address.
Security	General Requirement	47378	Password Policy Requirements California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall enforce below password policy for Family PACT admin accounts 1. MaximumPasswordAge = 60 calendar days 2. Have at least 15 characters 3. Have no more than 50 characters 4. Not contain dictionary words, names, or common keyboard patterns (example: Qwerty1!)5. Disallow previous 24 passwords 5. And must have the following: - UPPERCASE letter (A-Z) - Lowercase letter (a-z) - Number (0-9) - Special Character ` ~ ! @ # \$ % ^ & * () _ + - = [] \ { } ; ' : " , . / < > ? 6. California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall notify users on approaching the Password Expiry Date - Password Warning Notification - 45 days - Password Expiry Notification - 60 days

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(Extracted from CalHEERS RTM)

Category	Sub Category	Req ID	Requirement
Security	General Requirement	47379	Provision to downstream systems 1. California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall provision the Family PACT users to LDAP system 2. California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall provision the users to Family PACT system 3. California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall provision the users to the identified OU for Family PACT Admins
Security			California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall create Family PACT security profiles for Family PACT admin users.
Security			California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall allow a Family PACT super admins role.
Security			California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall allow a Family PACT SCR admin role.
Security	General Requirement	47382	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall allow a Family PACT admin read-only role.
Security	General Requirement	47383	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall allow a Family PACT admin read-only role.
Security	General Requirement	47384	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall design & create the required Family PACT User Types for Client, Provider, Admin Users
Security	General Requirement	47385	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall provide capability to disable and enable the accounts of Family PACT users
Security	General Requirement	47386	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall disable the Family PACT accounts for the Family PACT Client and Providers after 430 calendar days of inactivity; also admins shall have capabilities to disable consumer and provider account
Security			California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall disable the Family PACT admin accounts after 60 days of inactivity
Security			California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall allow specific Family PACT admins & super admins capability to enable client, provider and admin accounts disabled due to inactivity via Family PACT application
Security			California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall clear the email/phone of Provider accounts (Staff and Site Certifier) when account is disabled due to Site Deactivation, disabled by site certifier or disabled by Admin
Security	General Requirement	47391	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall provide Family PACT account administration capabilities for authorized Family PACT admins & super admins to perform the following: - Search an user using First Name, Last Name, Username, Email, Phone, User type - Reset user password (manual/auto reset password) - User shall be notified with the new password over provided email address when performing auto reset password - Update User Type for Admin Users - Unblock user account - Enable/Disable user accounts
Security			California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall provide the following self-service capabilities for Family PACT clients: - Update basic profile information (First Name, Last Name, Email Address, Phone) - Update Password - Update MFA preferences - Retrieve User Name - Reset forgotten password - Reset Password on Password Expiry
Security			California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall only allow a Family PACT user with an email address associated to their account to retrieve user name
Security			California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall require a Family PACT user that does not have an email address associated to their account to call an admin to retrieve user name
Security	General Requirement	47395	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall allow Family PACT clients with an email address or phone associated to their account to reset forgotten password
Security			California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall authenticate the Family PACT users using User Name and Password
Security			California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall enforce registration of Email or Phone as a preferred MFA option
Security			California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall lock a Family PACT user account for 30 minutes on 3 invalid password attempts
Security	General Requirement	47399	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall auto unlock a Family PACT account after 30 minutes from last login attempt on a locked account that was locked due to 3 invalid password attempts.
Security			California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall not allow disabled Family PACT user to access the Family PACT account
Security			California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall collect additional information before allowing the access to the Family PACT account
Security			California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall implement Multi Factor Authentication (MFA) for Family PACT Clients, Providers, and Admin users
Security	General Requirement	47403	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall block a Family PACT user account on 5 invalid MFA attempts
Security			California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall allow a Family PACT admin to unblock a user's account after the account was blocked due to 5 invalid MFA attempts.
Security			California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall allow a Family PACT user account 3 total attempts to generate the OTP such that the OTP is generated once and can be resent 2 time.
Security			California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall allow the MFA to be valid for 15 minutes.
Security	General Requirement	47407	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall allow a Family PACT user to switch verification method in case the user is registered with both Email and Phone
Security			California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall allow a Family PACT user to change the preferred method of verification during login or using profile updates
Security			California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall determine the access authorization for users authenticating to Family PACT application
Security			California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall design, create, and implement role matrix for coarse grained authorization of Family PACT user access

Appendix A-4 - SOW Exhibit A - System Requirements Specification
(Extracted from CalHEERS RTM)

Category	Sub Category	Req ID	Requirement
Security	General Requirement	47411	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall restrict unauthorized Family PACT users from accessing protected information/pages
Security	General Requirement	47412	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall implement session management for Family PACT.
Security	General Requirement	47413	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall allow maximum 30 concurrent Family PACT user sessions.
Security	General Requirement	47414	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall terminate a Family PACT session after 15 minutes of inactivity.
Security	General Requirement	47415	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall terminate a Family PACT session after 480 minutes of activity.
Security	General Requirement	47416	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall prevent Single Sign-on from California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) to Family PACT system and vice versa.
Security	General Requirement	47417	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall maintain log & audit of various transactions in Family PACT portal application to meet the required MARSE2.2 requirements
Security	General Requirement	47418	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall retain Family PACT audit records online for at least ninety (90) days and archive old records for ten (10) years to provide support for after-the-fact investigations of security incidents and to meet regulatory and organizational information retention requirements.
Security	General Requirement	47419	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall ingest the audit data for Family PACT Portal application to California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) Splunk for audit data analysis, monitoring and reporting
Security	General Requirement	47420	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall ingest the logs from Family PACT portal application into California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) Splunk for log analysis, monitoring and reporting
Security	General Requirement	47421	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall implement LW (microservices) to expose ForgeRock IAM APIs to Family PACT application
Security	General Requirement	47422	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall display appropriate error messages on Family PACT user creation, profile update, user administration, authentication & authorization
Security	General Requirement	47810	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall use the MARS-E 2.2 authentication requirements for the document verification solution.
Security	General Requirement	47811	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) system shall securely provision access to IDP based on a valid access authorization and intended system usage.
Security	General Requirement	47812	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) system shall ingest audit events to a central logging and monitoring solution.
Security	General Requirement	47813	Google Doc AI solution shall not retain consumer Personally Identifiable Information (PII) post document processing outside California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) system boundary.
Security	General Requirement	47814	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) system shall send the webservice transaction through 2-way SSL.
Security	General Requirement	47815	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) system shall send encrypted webservice transaction to IDP.
Security	General Requirement	47816	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) system shall receive encrypted web service transaction from IDP for search request.
Security	General Requirement	47817	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) system shall receive encrypted web service transaction from IDP for match result.
Security	General Requirement	47818	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) system shall use certificate authentication for the encrypted match result web service transactions.
Security	General Requirement	47819	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall generate a transaction to be displayed on the transaction history and audit logs when eligibility is run as a result of an IDP pass.
Security	General Requirement	48141	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall update existing 3scale products with new endpoints associated with v20 schema.
Security	General Requirement	48142	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall update existing Gateway Fuse application with new endpoints associated with V20 EHIT schema.
Security	General Requirement	48209	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall implement 3scale/Fuse policies for outbound SAWS Imaging verificaion REST API
Security	General Requirement	48210	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall implement 3scale policy for outbound SAWS Imaging verificaion REST API
Security	General Requirement	48211	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall implement Fuse product for outbound SAWS Imaging verificaion REST API
Security	General Requirement	48494	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall isolate all the incoming files from the California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) application infrastructure prior to scanning
Security	General Requirement	48495	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall scan the incoming files for the malware and move the infected files to the quarantine folder
Security	General Requirement	48496	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall quarantine and send email alerts if a malicious file is detected as part of scans
Security	General Requirement	48497	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall generate email alerts for California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) Security and Operations team, if a malicious file is detected
Security	General Requirement	48498	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall generate email alerts for California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) Security and Operations team, if a malicious file is detected
Security	General Requirement	48499	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall implement Malware scan for all the inbound files received from all the Partners/carriers over SFTP
Security	General Requirement	48686	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall remove Security Q&A as MFA method for Service Center Reps, Privileged/Admin users, and Sales Users.
Security	General Requirement	48687	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall allow the Service Center Reps, Privileged/Admin users, and Sales Users having only security questions to authenticate (i.e Username/Password) and redirect user to "Register Your Account" page for the first-time login
Security	General Requirement	48688	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall allow the users having only security questions and expired passwords to authenticate (i.e. Username/Password) and redirect user to "Register Your Account" page for the first-time login
Security	General Requirement	48689	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall purge security question and answers from the California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) system for Service Center Reps, Privileged/Admin users, and Sales Users
Security	General Requirement	48690	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall require Service Center Reps, Privileged/Admin users, and Sales users to register for one of the OTP MFA methods (Email or Phone)

Category	Sub Category	Req ID	Requirement
Security	General Requirement	48691	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall require newly created Service Center Reps, Privileged/Admin users, and Sales users to register for one of the OTP MFA methods (Email or Phone)
Security	General Requirement	48692	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall require existing Service Center Reps, Privileged/Admin users, and Sales users to register for one of the OTP MFA methods (Email or Phone)
Security	General Requirement	48945	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall exclude Agency BOT users from mandatory OTP based (Email/Phone) MFA process
Security	General Requirement	48946	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall upgrade internal admin BOTs (used for Service center task automation) to use email based OTP as part of MFA process
Security	General Requirement	48947	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall update "Register OTP Reminder" modal and "Update your profile" banner on Account Home page for Consumers and Authorized Representative
Security	General Requirement	49101	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall restrict duplication of username during registration
Security	General Requirement	49102	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall clear the email/phone of a Family Super Admin, SCR Admin, and Read-Only Admin when the account is deactivated by a Family PACT Super Admin.
Security	General Requirement	49103	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall extend the existing ForgeRock IAM solution with a logical separation for HBX and Family PACT application - ForgeRock Identity Manager - ForgeRock Access Manager - OpenDJ
Security	General Requirement	49135	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall enable Multifactor authentication for Consumers and Authorized Representatives to access California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) application
Security	Interfaces		
Security	Interfaces	46731	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall transmit data to CMS via the REST API Channel using a TLS 1.2-encrypted endpoint for VLP suite Service (RX142).
Security	Interfaces	46732	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall update the 3Scale/Fuse policies to host the Context Path for VLP Suite Service (RX142).
Security	Interfaces	46733	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall implement OAuth token based authentication with CMS for VLP Suite Service.
Security	Interfaces	46763	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall transmit data to SAWS via the REST API Channel using a TLS 1.2-encrypted endpoint for California Healthcare Eligibility, Enrollment and Retention System (CalHEERS)-SAWS VLP Interface.
Security	Interfaces	46765	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall transmit data to SAWS via the REST API Channel using a TLS 1.2-encrypted endpoint for California Healthcare Eligibility, Enrollment and Retention System (CalHEERS)-SAWS VLP Interface.
Security	Interfaces	46766	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall create the 3Scale/Fuse policies to host the REST based service endpoints for Inbound Transaction.
Security	Interfaces	46767	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall create the 3Scale/Fuse policies to host the REST based service endpoints for Outbound Transaction.
Security	Interfaces	47423	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall implement edge security via 3scale/Fuse api gateway for Communication between Family PACT and HAP systems
Security	Interfaces	47424	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall Implement the Open Market SMS service capability to Family PACT application
Security	Interfaces	47425	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall implement the Google Invisible Re-Captcha/Password Leakage service capability to Family PACT application
Security	Interfaces	47426	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall Implement the Smarty Street Address Validation service capability to Family PACT application
Security	Interfaces	47427	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall onboard a new interface "HAP" for API Security with identified end points
Security	Interfaces	47428	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall onboard a new interface "CA-MMIS" for API Security with identified end points
Security	Interfaces	47573	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall update existing 3scale products with new endpoints associated with v18 schema
Security	Interfaces	47574	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall update existing Gateway Fuse application with new endpoints associated with V19 EHIT schema
Security	Interfaces	47639	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall create the 3Scale/Fuse policies to host the REST based service endpoints for Inbound Transaction.
Security	Interfaces	47640	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall create the 3Scale/Fuse policies to host the REST based service endpoints for Outbound Transaction.
Security	Interfaces	48773	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall enforce one time password (OTP) verification during the tax form download when tax form year is 2021 or before.
Security	Interfaces	48774	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall not enforce one time password (OTP) verification during the tax form download when tax form year is 2022 or after.
Security	Non-Functional Requirement		
Security	Non-Functional Requirement	46921	Security Testing for CR 180738
Security	Non-Functional Requirement	46922	Security Testing for CR 195947
Security	Non-Functional Requirement	46923	Security Testing for CR 200352
Security	Non-Functional Requirement	46924	Security Testing for CR 210202

Category	Sub Category	Req ID	Requirement
Security	Non-Functional Requirement	46925	Security Testing for CR 213539
Security	Non-Functional Requirement	46926	Security Testing for CR 216356
Security	Non-Functional Requirement	46927	Security Testing for CR 218155
Security	Non-Functional Requirement	46928	Security Testing for CR 221893
Security	Non-Functional Requirement	46929	Security Testing for CR 224879
Security	Non-Functional Requirement	46930	Security Testing for CR 230777
Security	Non-Functional Requirement	46931	Security Testing for CR 239636
Security	Non-Functional Requirement	46932	Security Testing for CR 247742
Security	Non-Functional Requirement	46933	Security Testing for CR 248890
Security	Non-Functional Requirement	46934	Security Testing for CR 246135
Security	Non-Functional Requirement	46935	Security Testing for CR 226625
Security	Non-Functional Requirement	47561	Security Testing for CR 195958
Security	Non-Functional Requirement	47562	Security Testing for CR 234868
Security	Non-Functional Requirement	47563	Security Testing for CR 247478
Security	Non-Functional Requirement	47564	Security Testing for CR 253565
Security	Non-Functional Requirement	47565	Security Testing for CR 247474
Security	Non-Functional Requirement	47566	Security Testing for CR 250132
Security	Non-Functional Requirement	47862	Security Testing for CR 216695
Security	Non-Functional Requirement	47863	Security Testing for CR 219978
Security	Non-Functional Requirement	47864	Security Testing for CR 228956
Security	Non-Functional Requirement	47865	Security Testing for CR 241140
Security	Non-Functional Requirement	47906	Security Testing for CR 213355
Security	Non-Functional Requirement	48073	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall classify sensitive data types in-scope for data boundary protection use cases
Security	Non-Functional Requirement	48074	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall implement a solution to prevent data exfiltration to cover the following endpoint channels: USB, Print, Network Share and Bluetooth
Security	Non-Functional Requirement	48075	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall implement a solution to prevent data exfiltration to cover Web exfiltration channels
Security	Non-Functional Requirement	48076	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall implement controls to prevent access to certain website classifications based on Acceptable Use Policy
Security	Non-Functional Requirement	48077	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall implement Cloud Access Security Broker (CASB) controls to prevent data exfiltration from the following in-scope applications used in California Healthcare Eligibility, Enrollment and Retention System (CalHEERS): O365, SharePoint Online, OneDrive, Teams and ServiceNow
Security	Non-Functional Requirement	48078	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall implement API connections to the in-scope applications to identify potential sensitive data at rest

Category	Sub Category	Req ID	Requirement
Security	Non-Functional Requirement	48079	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall implement in-line protections to in-scope applications to prevent exfiltration to non-California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) tenants
Security	Non-Functional Requirement	48080	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall prevent uploading/downloading of files infected with potential malware/virus to the in-scope applications
Security	Non-Functional Requirement	48081	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall integrate the data boundary protection solution with the existing Security Incident Event Monitoring (SIEM) solution
Security	Non-Functional Requirement	48082	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall create two dashboards for tracking incidents and alerts related to data boundary protection solution
Security	Non-Functional Requirement	48083	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall create a Data Boundary Protection Standard Operation Procedures (SOP) for smooth operations of the implemented solution
Security	Non-Functional Requirement	48329	Security Testing for CR 261909
Security	Non-Functional Requirement	48330	Security Testing for CR 165890
Security	Non-Functional Requirement	48331	Security Testing for CR 173678
Security	Non-Functional Requirement	48332	Security Testing for CR 178286
Security	Non-Functional Requirement	48333	Security Testing for CR 203445
Security	Non-Functional Requirement	48334	Security Testing for CR 214183
Security	Non-Functional Requirement	48335	Security Testing for CR 224268
Security	Non-Functional Requirement	48336	Security Testing for CR 228979
Security	Non-Functional Requirement	48337	Security Testing for CR 228988
Security	Non-Functional Requirement	48338	Security Testing for CR 230828
Security	Non-Functional Requirement	48339	Security Testing for CR 231622
Security	Non-Functional Requirement	48340	Security Testing for CR 232582
Security	Non-Functional Requirement	48341	Security Testing for CR 243176
Security	Non-Functional Requirement	48342	Security Testing for CR 243177
Security	Non-Functional Requirement	48343	Security Testing for CR 253360
Security	Non-Functional Requirement	48344	Security Testing for CR 254732
Security	Non-Functional Requirement	48345	Security Testing for CR 255205
Security	Non-Functional Requirement	48346	Security Testing for CR 262403
Security	Non-Functional Requirement	48585	Security Testing for CR 228969
Security	Non-Functional Requirement	48586	Security Testing for CR 228972
Security	Non-Functional Requirement	48587	Security Testing for CR 61104
Security	Non-Functional Requirement	48588	Security Testing for CR 173135
Security	Non-Functional Requirement	48589	Security Testing for CR 206195

Category	Sub Category	Req ID	Requirement
Security	Non-Functional Requirement	48590	Security Testing for CR 227922
Security	Non-Functional Requirement	48591	Security Testing for CR 228980
Security	Non-Functional Requirement	48592	Security Testing for CR 229850
Security	Non-Functional Requirement	48593	Security Testing for CR 242023
Security	Non-Functional Requirement	48594	Security Testing for CR 250042
Security	Non-Functional Requirement	48595	Security Testing for CR 256142
Security	Non-Functional Requirement	48596	Security Testing for CR 257891
Security	Non-Functional Requirement	48597	Security Testing for CR 258400
Security	Non-Functional Requirement	48598	Security Testing for CR 260133
Security	Non-Functional Requirement	48599	Security Testing for CR 261916
Security	Non-Functional Requirement	48600	Security Testing for CR 262775
Security	Non-Functional Requirement	48601	Security Testing for CR 264028
Security	Non-Functional Requirement	48602	Security Testing for CR 271127
Security	Non-Functional Requirement	48603	Security Testing for CR 271421
Security	Non-Functional Requirement	48949	Security Testing for CR 282633
Security	Non-Functional Requirement	48952	Security Testing for CR 266494
Security	Non-Functional Requirement	48954	Security Testing for CR 285944
Security	Non-Functional Requirement	48955	Security Testing for CR 230703
Security	Non-Functional Requirement	49181	Security Testing for CR 189273
Security	Non-Functional Requirement	49183	Security Testing for CR 252573
Security	Non-Functional Requirement	49185	Security Testing for CR 220303
Security	Non-Functional Requirement	49187	Security Testing for CR 249764
Security	Non-Functional Requirement	49189	Security Testing for CR 250226
Security	Non-Functional Requirement	49191	Security Testing for CR 251910
Security	Non-Functional Requirement	49193	Security Testing for CR 252575
Security	Non-Functional Requirement	49195	Security Testing for CR 252582
Security	Non-Functional Requirement	49197	Security Testing for CR 255968
Security	Non-Functional Requirement	49199	Security Testing for CR 257849

Category	Sub Category	Req ID	Requirement
Security	Non-Functional Requirement	49201	Security Testing for CR 262000
Security	Non-Functional Requirement	49203	Security Testing for CR 266495
Security	Non-Functional Requirement	49205	Security Testing for CR 272413
Security	Non-Functional Requirement	49207	Security Testing for CR 274025
Security	Non-Functional Requirement	49209	Security Testing for CR 274416
Security	Non-Functional Requirement	49211	Security Testing for CR 278590
Security	Non-Functional Requirement	49213	Security Testing for CR 280659
Security	Non-Functional Requirement	49215	Security Testing for CR 282926
Security	Non-Functional Requirement	49217	Security Testing for CR 285589
Security	Non-Functional Requirement	49219	Security Testing for CR 287405
Security	Non-Functional Requirement	49220	Security Testing for CR 252586
Security	Non-Functional Requirement	49666	Security Testing for CR 114946
Security	Non-Functional Requirement	49668	Security Testing for CR 216717
Security	Non-Functional Requirement	49670	Security Testing for CR 233034
Security	Non-Functional Requirement	49672	Security Testing for CR 252583
Security	Non-Functional Requirement	49674	Security Testing for CR 252587
Security	Non-Functional Requirement	49676	Security Testing for CR 252593
Security	Non-Functional Requirement	49678	Security Testing for CR 253341
Security	Non-Functional Requirement	49680	Security Testing for CR 253663
Security	Non-Functional Requirement	49682	Security Testing for CR 257485
Security	Non-Functional Requirement	49684	Security Testing for CR 258401
Security	Verify Application Information		
Security	Verify Application Information	39100	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall process all responses returned from the Federal Hub based on the ResponseCodes and ResponseDescription Text for RIDP Service
Security	Verify Application Information	39210	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall process all responses returned from the Federal Hub based on the ResponseCodes and ResponseDescription Text for RIDP FARS Service v2.
Security	Verify Application Information	39211	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall update Portal messaging based on FARS v2 response codes.
Security	Verify Application Information	41016	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall transmit data to US Street Address API via 3-scale using a TLS 1.2-encrypted endpoint. (Rest-API call).
Security	Verify Application Information	42206	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall use Remote Identity Proofing (RIDP) and Fraud Archive Reporting Service (FARS) for all Primary Contact applicants.
Security	Verify Application Information	42207	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall require ID Proofing before a consumer can submit an application for insurance affordability programs.

Category	Sub Category	Req ID	Requirement
Security	Verify Application Information	42208	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall interface with the Federal Data Services Hub for Remote ID Proofing services including FARS
Security	Verify Application Information	42209	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall present a series of questions to consumers for the purpose of ID Proofing. These questions will be passed from the FDSH RIDP service
Security	Verify Application Information	42210	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System capture the consumers answers to RIDP questions and send to the FDSH for validation and verification.
Security	Verify Application Information	42211	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall allow RIDP questions to be presented to service center representatives, county eligibility workers, agents and certified enrollment counselors upon receipt of permission from the consumer.
Security	Verify Application Information	42269	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall allow permissioned users to bypass RIDP questions if they attest to verifying identity through alternative processes.
Security	Verify Application Information	42270	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall allow a consumer to bypass RIDP questions and instead upload alternative documents to verify identity.
Security	Verify Application Information	42271	The system shall allow the upload of documents that can be used to as proof of identity by service center representatives.
Security	Verify Application Information	45190	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall use the current production interface (Schema), as defined by CMS, of Remote Identity Proofing (RIDP)
Security	Verify Application Information	45207	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall use the current production interface (Schema), as defined by CMS, of the RIDP Fraud Archive Reporting Service (FARS) v.2.
Security	Verify Application Information	46437	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall transmit data to CMS via the REST API Channel using a TLS 1.2-encrypted endpoint for RIDP (RJ139) and FARS (RJ140)service.
Security	Verify Application Information	46438	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall update the 3Scale/Fuse policies to host the Context Path for RIDP (RJ139) Service.
Security	Verify Application Information	46439	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall update the 3Scale/Fuse policies to host the Context Path for FARS (RJ140) Service.
Security	Verify Application Information	46440	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall implement OAuth token based authentication with CMS for RIDP (RJ139) Service.
Security	Verify Application Information	46441	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall implement OAuth token based authentication with CMS for FARS (RJ140) Service.
Security	Web Portal Online Help		
Security	Web Portal Online Help	38589	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall display a notification message when internal California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) users log in.
Service Center Operations			
Service Center Operations	Case Management		
Service Center Operations	Case Management	38351	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) system will allow authorized users to request a reprint and remailing of any notice listed in a consumer's Documents and Correspondence secure inbox.
Service Center Operations	Case Management	38392	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) system shall allow all users to upload documents to a case at any time.
Service Center Operations	Case Management	38451	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) system shall allow all users to upload documents to a case at any time.
Service Center Operations	Case Management	38452	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) system shall allow users to link existing documents that have already been transferred to California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) ECM/WCC by Novitex to a case.
Service Center Operations	Case Management	38453	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) system shall crate a BPM (manual verification) task when a consumer uploads a document via the Documents and Correspondence page.
Service Center Operations	Case Management	38454	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) system shall allow for one document to be associated to more than one outstanding verification to more than one consumer on a case.
Service Center Operations	Consumer Management		
Service Center Operations	Consumer Management	46602	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall update case assignment rules in Salesforce for documents with type of "1095" to enter the General Correspondence Queue with a priority level of low.
Service Center Operations	Consumer Management	46603	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall update the "RecordTypeEnum" object in the LW Salesforce BPM to load values from the cache instead of using enumeration.
Service Center Operations	Consumer Management	46604	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall display "Mail", "Fax" or "California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) Upload" for the case origin field on Salesforce BPM based on the case origin of the MWS case.

Category	Sub Category	Req ID	Requirement
Service Center Operations	Consumer Management	46606	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall add a new case origin type of “California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) Upload” to the list of available case origin types in Salesforce BPM.
Service Center Operations	Consumer Management	46607	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall include a case origin column in list views displayed on Salesforce BPM.
Service Center Operations	Consumer Management	46609	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall not create a BPM case, if the user attested to “Other QLE” and the system auto-detected a QLE while running the BRE.
Service Center Operations	Consumer Management	46610	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall update case assignment rules in Salesforce for documents with type of ‘Incarceration’ to enter the Manual Verification ROP Queue with a priority level of low.
Service Center Operations	Consumer Management	46611	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall update the case assignment rules in Salesforce for documents with type of “Deceased” to enter the Manual Verification ROP Queue with a priority level of low.
Service Center Operations	Consumer Management	46613	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall add a document type of ‘Deceased’ to the list of document types available to be sent to Salesforce BPM to create a MWS case.
Service Center Operations	Consumer Management	46614	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall create a ‘Deceased’ document type Manual Verification MWS case on Salesforce BPM when a Deceased document category file is uploaded to the Documents and Correspondence page.
Service Center Operations	Consumer Management	46615	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall create a BPM case with a status of “New” for MWS cases if there are no other open MWS cases in the respective assigned queue.
Service Center Operations	Consumer Management	46616	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall update the case assignment rules in Salesforce for documents with type of “Request to Amend Personal Information” to enter the General Correspondence Queue with a priority level of low.
Service Center Operations	Consumer Management	46617	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall categorize the following documents as 'Deceased' document types when received by mail or fax: - Notification of Deceased (HBEX 411 forms (a, b, or c)) -Copy of Death Certificate -Proof of Death - A signed declaration or affidavit attesting that the consumer is not deceased -Other
Service Center Operations	Consumer Management	46618	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall map "Deceased" document types received by mail or fax to the "Deceased" document type that is sent to Salesforce BPM to create an "Deceased" MWS case.
Service Center Operations	Consumer Management	46619	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall update the "RecordTypeID" object for "1095" documents from "PaperApplication" to "ManualVerification".
Service Center Operations	Consumer Management	46620	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall map “Request to Amend Personal Information” documents received by mail/fax as “Request to Amend Personal Information” document type instead of “Manual Verification” document type when sending the file to Salesforce BPM.
Service Center Operations	Consumer Management	46621	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall categorize the following documents as 'Incarceration' document types when received by mail or fax: -Official release papers from the institution or Department of Corrections -Parole papers -Non-Incarceration Attestation Form
Service Center Operations	Consumer Management	46622	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall map "Incarceration" document types received by mail or fax to the "Incarceration" document type that is sent to Salesforce BPM to create an "Incarceration" MWS case.
Service Center Operations	Consumer Management	46623	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall create an "MWS work with Case Origin by Queue and MWS Document Type" report in Salesforce BPM.
Service Center Operations	Enrollment		
Service Center Operations	Enrollment	38763	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall create a new IVR flow to support Medi-Cal customers transitioning to Covered California.
Service Center Operations	Enrollment	38764	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall create new call types to track the calls.
Service Center Operations	Enrollment	38765	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall add a new Precision Queues (PQ) called MTCC.
Service Center Operations	Enrollment	38766	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) system shall provide standard reporting for the new PQ.
Service Center Operations	Enrollment	38769	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) system shall add the new PQ to Work Force Management (WFM).
Service Center Operations	Enrollment	43794	The IVR system shall allow consumers to update their consent for verification via self-service
Service Center Operations	General Requirement		
Service Center Operations	General Requirement	37985	The IVR shall provide the functionality to announce the Expected Wait Time (EWT) to the English, Spanish, and Cantonese speaking callers.

Category	Sub Category	Req ID	Requirement
Service Center Operations	General Requirement	37986	The IVR must provide the functionality to provide the Caller with the option to be called back instead of waiting on hold in the call queue.
Service Center Operations	General Requirement	37987	The IVR must provide the functionality to play the call back messaging to the Caller after a variable amount of time. The variable time must be configurable.
Service Center Operations	General Requirement	37988	The IVR must provide the functionality to provide the the Caller with the option to remain on hold or to be called back.
Service Center Operations	General Requirement	37989	The IVR must provide the functionality to offer the Caller the option to be called back up to the time the queues are closed for the day. This will be a configurable item.
Service Center Operations	General Requirement	37990	The IVR must provide the functionality to place the phone number entered by the Caller into the Call Back Queue once. The system must not allow queueing of the same phone number multiple times.
Service Center Operations	General Requirement	37991	The IVR must provide the functionality to callback multiple times.
Service Center Operations	General Requirement	37992	The IVR must provide the functionality to validate the person answering the callback is the original caller.
Service Center Operations	General Requirement	38493	The California Healthcare Eligiblity, Enrollment and Retention System (CalHEERS) system shall move specialized teams to precision queue based routing and close down “legacy” skills routing.
Service Center Operations	General Requirement	41467	Provide a link to the Lead Generation Online Form from Covered California's website (www.coveredca.com).
Service Center Operations	General Requirement	41508	Provide a link to the Lead Generation Online Form within the cost calculator page.
Service Center Operations	General Requirement	41521	Provide a Lead Generation Online Form which will accept lead information and store a contact record in the CRM system for the purpose of tracking lead generation effectiveness.
Service Center Operations	General Requirement	41522	The system will store a list of grantees (name and grantee codes) for user selection via a drop down list.
Service Center Operations	General Requirement	41568	Migrate lead records generated by the Outreach and Education program from the mini call-center environment to the CRM system for Release 1.
Service Center Operations	General Requirement	42955	The Vendor must add a new skill group "County/Medi-Cal Liaison Team" to the Covered CA phone switch (ACD).
Service Center Operations	General Requirement	42956	The Vendor must associate the new skill group "County/Medi-Cal Liaison Team" to a dedicated toll-free phone number.
Service Center Operations	General Requirement	43769	The Vendor shall provide the capability within the Service Center to transfer callers to Healthy Families or County Welfare Departments call centers.
Service Center Operations	General Requirement	43771	The Vendor shall establish and provide a toll-free consumer service telephone and fax number for all applicants and enrollees that is available 24/7.
Service Center Operations	General Requirement	43772	The Vendor shall provide the Equipment, Software and Network to support a Service Center will provide services in English and Spanish and threshold languages identified in the Medi-Cal Managed Care Threshold languages; including but not limited to: IVR, Correspondences, Mail, Toll Free 800 number, Call Center, Imaging, and any other services conducted in the Service Center.
Service Center Operations	General Requirement	43773	The Vendor shall provide an automated Interactive Voice Response System (IVR) as part of the toll-free line.
Service Center Operations	General Requirement	43774	The Vendor shall maintain all IVR solution Software throughout the term of the Contract, inclusive of any application, customized and/or off-the-shelf software components that comprise the Imaging solution or related infrastructure.
Service Center Operations	General Requirement	43775	The IVR functionality must be able to recognize within query results and speak person and organization names, telephone numbers, dates and times, and dollars and cents amounts.
Service Center Operations	General Requirement	43781	The IVR functionality shall interact with a customer who is using a touch-tone phone and provide multiple authentication means for authenticating a user into the IVR System. The IVR functionality shall support the ability to authenticate a user by using a provided PIN number and have the ability to modify that number by the request of the customer.
Service Center Operations	General Requirement	43782	The System shall authenticate callers using their California Healthcare Eligiblity, Enrollment and Retention System (CalHEERS) application or account data. Callers will be required to enter their DOB, last 4 of SSN, zip code, and telephone number. All four data elements must be correctly entered for authentication to occur. IVR Authentication prompts must be implemented in English and Spanish only.
Service Center Operations	General Requirement	43783	The System shall use existing self-service functionality for account and application status. Explanation of the status will be expanded to include more detailed description of account or application status. Access to IVR self-service will be based on successful caller authentication. Information must be provided in English and Spanish only.
Service Center Operations	General Requirement	43784	The System shall prompt the self identified Medi-Cal eligible caller for the 5 digit zip code of their residence. The System will execute a look up of the associated telephone number for the County Medi-Cal office, based on the County of residence. This number will be provided to the caller. The prompt must be in English and Spanish.
Service Center Operations	General Requirement	43785	The System shall provide information regarding CoveredCA letters or notices received by the Caller. The prompt will provide an explanaiton of the notice and what, if any, actions the Consumer will need to complete. The system must also provide the Caller with the option to speak to an SCR. Information must be provided in English and Spanish.

Appendix A-4 - SOW Exhibit A - System Requirements Specification
(Extracted from CalHEERS RTM)

Category	Sub Category	Req ID	Requirement
Service Center Operations	General Requirement	43786	The current IVR logic for announcing estimated wait times in the non-English speaking queues, shall be removed.
Service Center Operations	General Requirement	43787	The System shall queue non-English calls for 40 minutes. After the 40 minute wait, the call will be routed to the General queue with no priority.
Service Center Operations	General Requirement	43788	The System shall provide Estimated Wait Time in 5 minute increments from 1 to 30 minutes, 15 minute increments from 31 to 89 minutes, and announce EWT of greater than 90 minutes thereafter. EWT threshold minutes must be configurable.
Service Center Operations	General Requirement	43789	Modify the existing IVR general information call tree to reflect program changes for renewals and open enrollment aligned with the attached "Basis of LOE Draft Call Tree".
Service Center Operations	General Requirement	43790	The IVR System shall include open enrollment and annual eligibility and enrolment renewal information, and application status.
Service Center Operations	General Requirement	43796	The IVR functionality must support text to speech (i.e., query results to speech) capability for all System supported language English and Medi-Cal Managed Care Threshold languages.
Service Center Operations	General Requirement	43797	The IVR functionality shall provide the capability for customers to query information on various programs within their cases or accounts (e.g., application status).
Service Center Operations	General Requirement	43798	The Vendor shall coordinate all IVR Equipment and Software warranty services for the IVR Equipment and Software that may be in use.
Service Center Operations	General Requirement	43799	The Vendor shall provide a development IVR environment to help develop code related to scripts, menu trees, caller decision points and call flow.
Service Center Operations	General Requirement	43800	The IVR functionality must be able to receive inbound calls and send outbound calls utilizing data from the California Healthcare Eligiblity, Enrollment and Retention System (CalHEERS) database.
Service Center Operations	General Requirement	43801	The IVR functionality must provide reports to analyze incoming call information and System usage. Report data must include, but is not limited to, call counts and duration, frequency of selected options, and points where customers end the call or exit the System.
Service Center Operations	General Requirement	43802	The Vendor shall be responsible for providing all Facilities that house IVR servers or data and must have, at a minimum, basic physical security measures to protect the IVR solution.
Service Center Operations	General Requirement	43803	The IVR functionality shall allow for a customer to be transferred to the appropriate office and/or worker.
Service Center Operations	General Requirement	43805	The System shall document all incoming SCR interactions received via phone channel, fax, and mail as an Incident and associate them to a specific contact (assuming that the contact is identified
Service Center Operations	General Requirement	43806	The System shall route incoming requests from CoveredCA.com based on form 'language' selected.
Service Center Operations	General Requirement	43807	The System shall store request/email text in the body of an Incident.
Service Center Operations	General Requirement	43808	The System shall capture incoming source channel as mail or fax, and the date in which correspondence was received by the fulfillment center.
Service Center Operations	General Requirement	43809	The System shall link the Incident record to image of mail received. For Release 1, fulfillment center will need scan image, and may need to eliminate confidential information from the attachments prior to scanning.
Service Center Operations	General Requirement	43810	The System shall administer and maintain the data to be captured for different incident types. Dynamically present a different data capture form to the SCR based on incident type.
Service Center Operations	General Requirement	43818	The System shall prompt alerts and notifications, based on statuses and information in California Healthcare Eligiblity, Enrollment and Retention System (CalHEERS) - to be defined by Business rules.
Service Center Operations	General Requirement	43819	The System shall integrate with Pitney Bowes to support visibility to campaign responses and general inquiries received through fax and mail channel and generate an Incident record.
Service Center Operations	General Requirement	43820	The System shall support the ability to update a lead with contact and application status information from California Healthcare Eligiblity, Enrollment and Retention System (CalHEERS).
Service Center Operations	General Requirement	43823	The Vendor shall provide a Customer Relationship Management (CRM) System that shall log, track, refer, and record resolution to customer contracts within its operation. The contact types shall include telephone, IVR, email, and web-based interactions (online chat).
Service Center Operations	General Requirement	43824	The System shall support the ability to update status of contact, based on campaign and/or source of contact (i.e. DNIS number).
Service Center Operations	General Requirement	43825	The System shall support the ability for a SCR to use assessment to generate Lead score.
Service Center Operations	General Requirement	43826	The System shall support the ability to generate opportunities for a Lead based on California Healthcare Eligiblity, Enrollment and Retention System (CalHEERS) and Marketing interactions.
Service Center Operations	General Requirement	43827	The System shall prioritize leads to work based on lead status.
Service Center Operations	General Requirement	43828	The System shall only allow an owner of a Lead and their supervisor to be able to edit Lead.

Appendix A-4 - SOW Exhibit A - System Requirements Specification
(Extracted from CalHEERS RTM)

Category	Sub Category	Req ID	Requirement
Service Center Operations	General Requirement	43829	The System shall systematically update Lead status and information.
Service Center Operations	General Requirement	43830	The System shall support the ability for a Lead task to include due date.
Service Center Operations	General Requirement	43831	The System shall support the ability for a SCR to indicate date completed on Lead task.
Service Center Operations	General Requirement	43833	The System shall display information from California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) including and if available: a) Contact information b) Dependent information c) Assister/Agent information d) Employer information (if applicable) e) Application information f) Appeal information g) Plan information h) Contact preference i) Outbound correspondence history (including link to document in California Healthcare Eligibility, Enrollment and Retention System (CalHEERS))
Service Center Operations	General Requirement	43834	The System shall support the ability to create a lead based on contact and application status information from California Healthcare Eligibility, Enrollment and Retention System (CalHEERS).
Service Center Operations	General Requirement	43835	The System shall receive a Notification when a Customer submits Complaint or Inquiry via California Healthcare Eligibility, Enrollment and Retention System (CalHEERS).
Service Center Operations	General Requirement	43836	The System shall create an Incident in CRM for a Complaint or Inquiry form submitted by a Customer via California Healthcare Eligibility, Enrollment and Retention System (CalHEERS)
Service Center Operations	General Requirement	43837	The System shall identify the Level 1 and Level 2 Incident Type based on Complaint and Inquiry Form Category and Subcategory.
Service Center Operations	General Requirement	43838	The System shall have the ability to store content of Complaint and Inquiry Form fields in the Incident (Subject, Message Content).
Service Center Operations	General Requirement	43839	The System shall automatically create a new Contact record when a Customer submits a Complaint or Inquiry Form via California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) if the Contact does not exist in RightNow, or associate the Incident to an existing Contact.
Service Center Operations	General Requirement	43840	The System shall have the ability to generate an automatic acknowledgement to the Customer when Complaint or Inquiries are received by California Healthcare Eligibility, Enrollment and Retention System (CalHEERS).
Service Center Operations	General Requirement	43841	The system shall support the ability to respond to Complaints and Inquiries through email, if an email address is available.
Service Center Operations	General Requirement	43842	The System shall allow for a Contact to initiate a web chat (both logged in and not logged into California Healthcare Eligibility, Enrollment and Retention System (CalHEERS)).
Service Center Operations	General Requirement	43843	The System shall require information to be collected when a web chat is initiated via California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) -Customer First and Last Name -Customer Email Address -Subject (Dropdown) -Language
Service Center Operations	General Requirement	43844	The System shall receive Contact information from California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) if the Customer is logged into California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) when Chat is initiated, including: - First and Last Name - Email address
Service Center Operations	General Requirement	43845	The System shall associate a dummy contact record to an anonymous web chat session (not initiated in California Healthcare Eligibility, Enrollment and Retention System (CalHEERS))
Service Center Operations	General Requirement	43846	The System shall support the ability to store a Chat Incident and associate it with a new/existing Contact record in RightNow. The Chat Incident should include the content of the Chat (read-only).
Service Center Operations	General Requirement	43847	The System shall prompt a Contact to initiate a proactive web chat when the Contact has been idle on a page for XX period of time.
Service Center Operations	General Requirement	43848	The System shall allow for a chat skilled SCR to receive up to 5 chats simultaneously.
Service Center Operations	General Requirement	43849	The System shall route web chat based on Language into Chat Queues for Chat Skilled Agents.
Service Center Operations	General Requirement	43850	The System shall support the ability to initiate co-browse during a customer interaction.
Service Center Operations	General Requirement	43851	The System shall track the date and time of when co-browse was initiated on the Incident Workspace.

Category	Sub Category	Req ID	Requirement
Service Center Operations	General Requirement	43852	The System shall support the ability to document Contact agreement to initiate co-browse.
Service Center Operations	General Requirement	43853	The system shall indicate if a co-browse occurred during an incident
Service Center Operations	General Requirement	43854	The system shall track whether or not the SCR received permission to take control of the customer’s screen using a Yes/No checkbox
Service Center Operations	General Requirement	43855	The system shall track the frequency of co-browse usage per incident record
Service Center Operations	General Requirement	43856	The System shall support additional Level 1 and Level 2 Incident categorization to organize Customer intent, including: - Eligibility - Application Assistance - Enrollment - Appeals - Disenrollment / Exit - Complaints
Service Center Operations	General Requirement	43857	The system shall support Supervisor escalations and reassignment of unresolved escalations per predefined business process.
Service Center Operations	General Requirement	43858	The system shall support Incident aging, and escalation of Incidents based on pre-defined business rules and: -Incident Type
Service Center Operations	General Requirement	43859	The System shall search contacts by: a) Lead status b) Customer segmentation c) Language
Service Center Operations	General Requirement	43860	The System shall have the ability to generate reports based on: a) Lead status b) Customer segmentation c) Language
Service Center Operations	General Requirement	43861	The System shall support the ability to input an individual lead into the system manually.
Service Center Operations	General Requirement	43862	The System shall support the ability to input a batch of leads (from a source like pre-load files).
Service Center Operations	General Requirement	43863	The System shall support the ability for a SCR to create an opportunity for a qualified lead and associate it to a Contact record.
Service Center Operations	General Requirement	43864	The System shall support the ability to assign a lead(s) to an SCR/SCR group/automated action based on pre-determined rules.
Service Center Operations	General Requirement	43865	The System shall support the ability to create aging rules for reminders.
Service Center Operations	General Requirement	43866	The System shall support the ability for a SCR to edit assigned Lead profile.
Service Center Operations	General Requirement	43867	The System shall support the ability to assign and re-assign ownership of a Lead.
Service Center Operations	General Requirement	43868	The System shall support the ability for a SCR to receive updates on Leads assigned to them.
Service Center Operations	General Requirement	43869	The System shall support the ability for a SCR to view report of Opportunity history/status (open, closed, etc.).
Service Center Operations	General Requirement	43870	The System shall support the ability to view create Opportunity views including: -Supervisor view of all incidents by team (i.e. for Lead) -Supervisor view of all teams (by team) (i.e. for Manager Level 1) -Command Center view of everything
Service Center Operations	General Requirement	43871	The System shall support the ability for a supervisor to reassign a Lead to another SCR.
Service Center Operations	General Requirement	43872	The System shall support the ability for an Opportunity to be re-assigned/re-distributed based on aging criteria.
Service Center Operations	General Requirement	43873	The System shall support the ability for a SCR to document notes and outcomes of interaction with Lead.
Service Center Operations	General Requirement	43874	The System shall support the ability for a SCR to update Lead profile based on interaction.
Service Center Operations	General Requirement	43875	The System shall set alerts to roles (e.g. supervisor, manager) in relation to task due date.

Category	Sub Category	Req ID	Requirement
Service Center Operations	General Requirement	43876	The System shall support the ability to end disposition of Lead task to trigger follow-up reminder/task.
Service Center Operations	General Requirement	43877	The System shall generate a weekly summary report of leads by Grantee (Grantee Code Number and Name). This report would show the reporting week and a running YTD column.
Service Center Operations	General Requirement	43878	The System shall generate a report showing distributed leads by assister and agent.
Service Center Operations	General Requirement	43879	The System shall document detailed task, including: b) Assignment c) Status d) Time Created e) Time Assigned
Service Center Operations	General Requirement	43882	The System shall support the ability for a SCR to manually set follow-up reminder/task.
Service Center Operations	General Requirement	43889	The System shall constrain a list of sub Incident type based on the parent Incident Type. Example: Release 1 'General Information' (Level 1) will have the following Level 2s: Plan Information, Affordable Care Act Information, Eligibility, Non-Covered California Programs, Other. 'Fulfillment Request' is a Level 1 Incident Type.
Service Center Operations	General Requirement	43890	The Administrator shall be able to update Level 1 and Level 2 Incident Type categorization per business need.
Service Center Operations	General Requirement	43891	The System shall associate an Incident type with every interaction.
Service Center Operations	General Requirement	43892	The SCR shall create incident notes associated with an Incident: including Incident Notes (Private Notes visible to SCRs only), and notes that may be customer facing for outbound responses.
Service Center Operations	General Requirement	43893	The System shall document all outbound SCR interactions via, phone, fax, email and mail as an Incident and associate them to a specific contact (assuming that the contact is identified).
Service Center Operations	General Requirement	43894	The System shall route calls intelligently based on incident type (lead generation call vs. inquiry call) and actor type.
Service Center Operations	General Requirement	43895	The System shall administer and maintain a set of scripts that can be presented to the SCR as recommendations. The System shall maintain a set of rules that control which script is presented to the SCR based on parameters contact type and/or incident type.
Service Center Operations	General Requirement	43896	The System shall associate a dialogue script with the business process to collect customer information.
Service Center Operations	General Requirement	43897	The System shall administer and maintain a set of checklists that can be presented to the SCR as recommendations.
Service Center Operations	General Requirement	43898	The System shall maintain a set of rules that control which checklist is presented to the SCR based on parameters contact type, incident type and/or CTI information.
Service Center Operations	General Requirement	43899	The System shall maintain a list of items (fields) that must be completed after a customer interaction that is specific to the product, call type- Incident Type (Level 1, Level 2), Actor Type.
Service Center Operations	General Requirement	43900	The System shall ensure all incidents will be tied to a contact. If contact does not exist, provide SCRs with the ability to associate the incident to a anonymous Contact record.
Service Center Operations	General Requirement	43901	The System shall associate multiple incidents with a Contact.
Service Center Operations	General Requirement	43902	The SCR shall have the ability to manually reassign the Incident to the appropriate Contact.
Service Center Operations	General Requirement	43903	The System shall document all incoming Phone interactions, and associate them to a Contact. A Contact is required for all Interactions.
Service Center Operations	General Requirement	43904	The System shall integrate with Cisco Softphone/CTI to pull in call details to incident record (details specified in Requirement 1.3.2.4).
Service Center Operations	General Requirement	43905	The System shall document interaction details including: a) Incident ID b) Incident Creator c) Incident Owner d) Incident Status e) Resolution Owner f) Incident Resolution (ex: document sent, etc.) g) Incident Channel i) Basic Contact Information j) Incident Type and Subtype and Associated Notes k) Date/Time (and Updated Date/Time)

Category	Sub Category	Req ID	Requirement
Service Center Operations	General Requirement	43906	The System shall view a calendar when logging an incident.
Service Center Operations	General Requirement	43907	The System shall associate information captured from telephony (CTI/IVR) with the incident: a) Routing selections b) ANI c) DNIS d) Language e) Call Type
Service Center Operations	General Requirement	43908	The System shall send the Incident # and disposition code to CTI (softphone) during call wrap up. The System shall prevent agent from leaving wrap state if disposition code (Incident Type) is blank.
Service Center Operations	General Requirement	43909	The System shall identify and assign SCR skill group profiles to determine work queue and tool access permissions.
Service Center Operations	General Requirement	43910	The System shall establish an escalation hierarchy based on SCR profile, which includes the following queues: a) Supervisor/supervisor queue, or b) Exchange home office queues
Service Center Operations	General Requirement	43911	The System shall reassign an Incident to a work queue or a specific individual including: a) Reassign to back office b) Support service c) Directly to an Individual (for supervisors only)
Service Center Operations	General Requirement	43912	The System shall associate tasks with an Incident.
Service Center Operations	General Requirement	43913	The System shall document all outgoing Phone interactions, and associate them to a Contact. A Contact is required for all Interactions.
Service Center Operations	General Requirement	43914	The System shall track incidents/contacts audit history: a) Date created b) Creator c) Last Modified d) Last Modified Date e) Assignment/Reassignment f) Status
Service Center Operations	General Requirement	43915	The System shall view, search and sort customer interactions by: a) Contact type b) Incident type c) Channel d) Date and Time Created e) SCR (Full Name)
Service Center Operations	General Requirement	43916	The SCR shall be able to view previous incidents/interactions performed with a Contact.
Service Center Operations	General Requirement	43917	The System shall manage Incident escalations (directly to supervisor or supervisor queue).
Service Center Operations	General Requirement	43918	The System shall customize notifications and reminders based on Incident type.
Service Center Operations	General Requirement	43919	The System shall push/pull Incidents based on SCR profiles (e.g. Tier 1 SCRs may have Incidents 'pushed' to them, Tier 2 SCRs may 'pull' Incidents based on workload).
Service Center Operations	General Requirement	43920	The System shall route/manage intake of Incidents from queues to SCR inbox based on: a) Skill b) Volume c) Language
Service Center Operations	General Requirement	43921	The SCR shall be able to view Incidents assigned (My Incident View) and status of Incidents.
Service Center Operations	General Requirement	43922	The System shall enforce security requirements and access-levels for incidents: a) Read only incident threads (free form incident notes) for peer-SCR b) Edit-access for TBD Manager/Admin level c) Incidents are automatically reassigned to an SCR that edits the incidents (i.e. if the incident is in another SCRs queue and a different SCR edits it, the incident is reassigned to the second SCR)

Category	Sub Category	Req ID	Requirement
Service Center Operations	General Requirement	43923	The System shall view incidents including: a) Supervisor view of all incidents by team (i.e. for Lead) b) Supervisor view of all teams (by team) (i.e. for Manager Level 1) c) Command Center view of everything
Service Center Operations	General Requirement	43924	The System shall support routing and receipt of emails sent to Covered California’s email inbox for general inquiries (info@hbex.ca.gov). All incoming email will generate an incident record in RightNow. Refer to website: http://www.healthexchange.ca.gov/Pages/ContactUs.aspx
Service Center Operations	General Requirement	43925	The System shall correlate incoming DNIS with particular set of marketing materials for both inbound correlation and outbound fulfillment.
Service Center Operations	General Requirement	43926	The System shall provide screen pop to SCR that identifies the campaign associated with the caller.
Service Center Operations	General Requirement	43927	The System shall provide data on a campaign level, including: a) Source of calls b) Number of calls c) Disposition
Service Center Operations	General Requirement	43928	The System shall search for existing contacts in RightNow by combination of: a) Last Name and First Name b) Last Name, First Name, and ANI c) Last Name, First Name, and DOB (R2 for DOB) d) Last Name, First Name, ANI and Zip Code e) Last Name, Middle Initial, First Name f) Range for date of last contact (pertinent for all contact types) g) ANI Only h) Company Name Only i) FEIN Only (R2 or R3 only) j) Assister ID Only k) Health Plan ID Only
Service Center Operations	General Requirement	43929	For telephony initiated searches, the System shall automatically search for existing contacts in RightNow by ANI and screen pop to: a) Contact Detail View for exact match b) Contact List View for multi-match c) Contact Search View for no match
Service Center Operations	General Requirement	43930	For a manual search, the System shall alert the SCR of any invalid formats.
Service Center Operations	General Requirement	43931	The System shall allow case insensitive search on Last Name, First Name, alphanumeric IDs, and Company Name.
Service Center Operations	General Requirement	43932	The System shall display search results for the purpose of identification including: a) Last Name (individual only) b) First Name (individual only) c) Middle Initial (individual only) d) Zip Code (pertinent for multiple Contact types) e) Contact Type (pertinent for all Contact types) f) Phone Number (pertinent for multiple Contact types) g) Company Name Only (pertinent for multiple Contact types) h) FEIN Only (R2 or R3 only) i) Assister ID Only j) Health Plan ID Only
Service Center Operations	General Requirement	43933	The System shall display additional contact details (including demographics, contact preferences, current status) and list of previous interactions (incident history), and attachments.
Service Center Operations	General Requirement	43934	The System shall provide a dialogue script to authenticate the contact based on predefined business rules (i.e. provide a dialogue script by contact type).
Service Center Operations	General Requirement	43935	The SCR shall be able to retrieve a list of open incidents generated via the Covered California’s email inbox for general inquiries (info@hbex.ca.gov) (e.g. ‘Fill my Inbox’ feature in RightNow pulls a certain amount of email incidents’ records for an agent to work on).
Service Center Operations	General Requirement	43937	The System shall execute a search and display contact information based on information received from IVR and delivered via softphone when call arrives to SCR.
Service Center Operations	General Requirement	43938	The System shall support the ability to track: a) Lead status b) Enrollment outcomes based on Lead activities c) Number of attempts

Category	Sub Category	Req ID	Requirement
Service Center Operations	General Requirement	43939	The System shall support the ability to track and maintain Opportunity statuses.
Service Center Operations	General Requirement	43940	The System shall support the ability to track Opportunity outcomes based on the Opportunity status. (Win/Lost, Lost Reason).
Service Center Operations	General Requirement	43941	The System shall populate knowledge base content, based on the chat subject.
Service Center Operations	General Requirement	43942	The System shall provide the ability for a Supervisor or Executive to generate ad-hoc reports and publish them as Public reports to CRM users.
Service Center Operations	General Requirement	43943	The System shall restrict a SCR from generating real-time productivity reports (Note: Business process shall include SCR productivity reports which are generated and scheduled on a weekly or monthly basis)
Service Center Operations	General Requirement	43944	The System shall provide the ability for a Supervisor or Executive to schedule reports
Service Center Operations	General Requirement	43945	The System shall provide the ability for a Supervisor or Executive to create dashboards
Service Center Operations	General Requirement	43946	The System shall provide the ability for a Supervisor or Executive to email reports
Service Center Operations	General Requirement	43947	The System shall report on number of individuals who filled out the contact us form and the subcategories (i.e. number of English).
Service Center Operations	General Requirement	43948	The System shall generate a report on number of opportunities created on a daily, weekly, and monthly basis.
Service Center Operations	General Requirement	43949	The System shall provide analytical reporting on opportunity win/loss results including percentage of win/loss, time to enrollment, and win/loss reason codes.
Service Center Operations	General Requirement	43950	The System shall report on number of pending opportunities on a daily, weekly, and monthly basis for purpose of managing opportunity pipeline.
Service Center Operations	General Requirement	43951	The System shall provide the telephone number to the Pinnacle Service Center and the Mini Call Center for Agents and CECs. This will replace the existing functionality of transferring the call to Pinnacle and Mini Call Center. The Caller will not be given the option to speak to an SCR. The Caller will be given the option to repeat the message.
Service Center Operations	General Requirement	43952	The System shall create and store a new Contact for: a) Individual b) Employee c) Employer d) Assister (need to determine if there is a difference between Assisters and grantees, and what differences to track) e) Agent/Broker f) QHP (Issuer)
Service Center Operations	General Requirement	43953	The System shall identify/associate Contact by Contact type.
Service Center Operations	General Requirement	43954	The system shall associate an Individual Customer with a Contact Type.
Service Center Operations	General Requirement	43955	The System shall provide the ability to change the contact type associated with an individual (e.g. an individual who is insured via their employer on the exchange, then changes job and is as an independent member on the exchange).
Service Center Operations	General Requirement	43956	The System shall conditionally capture information associated with the Contact for all of the Contact types associated with them.
Service Center Operations	General Requirement	43957	The System shall associate unique information associated with an individual's Contact record: a) First Name b) Middle Initial c) Last Name d) Zip Code e) ANI f) Address (need to confirm if we can store the address) g) Email Address h) Data Source (for batch uploads) i) Language Preference j) Preferred method of Communication (e.g. email, phone)

Category	Sub Category	Req ID	Requirement
Service Center Operations	General Requirement	43958	The System shall associate unique information associated with an employee's Contact record: a) First Name b) Middle Initial c) Last Name d) Zip Code e) ANI f) Address (need to confirm if we can store the address) g) Email Address h) Employer Name i) Language Preference j) Preferred method of Communication (e.g. email, phone)
Service Center Operations	General Requirement	43959	The System shall associate unique information associated with an assister's Contact record: a) Assister ID b) First Name c) Middle Initial d) Last Name e) ANI f) Email Address g) Assister Entity (the name of the company that the assister works for)
Service Center Operations	General Requirement	43960	The SCR shall retrieve document requests and/or information requests submitted via CoveredCA.com. CoveredCA.com provides customers with a pre-defined email form template to fill out. All incoming email from this channel will generate an incident record in RightNow.
Service Center Operations	General Requirement	43961	The System shall associate unique information associated with an employer's Contact record: a) Business Address b) Company Name c) ANI (or business phone) d) Email Address
Service Center Operations	General Requirement	43962	The System shall associate unique information associated with an issuer's (QHPs) Contact record: a) Business Address b) Company Name d) ANI (or business phone) e) Email Address
Service Center Operations	General Requirement	43963	The System shall associate unique information associated with an agent/broker's Contact record: a) Business Address b) Company Name c) ANI (or business phone) d) Email Address e) Agent/Broker ID (if available)
Service Center Operations	General Requirement	43964	The System shall collect unique identifiers specific to the Contact type.
Service Center Operations	General Requirement	43965	The System shall batch load Contact records from external systems.
Service Center Operations	General Requirement	43966	The System shall merge a Contact record (i.e. individual and employee).
Service Center Operations	General Requirement	43967	The System shall segment Contact's by demographic information, if available.
Service Center Operations	General Requirement	43968	The System shall prompt campaign related dialogue scripts to the SCR based on the DNIS number.
Service Center Operations	General Requirement	43969	The System shall segment Contact's by: a) the number the Contact dialed in on b) the DNIS number
Service Center Operations	General Requirement	43970	The System shall track a Contact's contact preferences.
Service Center Operations	General Requirement	43971	The System shall maintain a document request queue and/or an email request queue from CoveredCA.com (different from California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) inbound email queue).
Service Center Operations	General Requirement	43972	The System shall capture Contact status (i.e. Lead, Member).

Category	Sub Category	Req ID	Requirement
Service Center Operations	General Requirement	43973	The System shall capture different Contact status by Contact type based on pre-defined business rules.
Service Center Operations	General Requirement	43974	The System shall indicate “Do Not Contact” for customer.
Service Center Operations	General Requirement	43975	The System shall view the relationships between different contacts including: a) Employee/Employer relationship b) Individual/Assister relationship (if it exists) c) Employer/Agent/Broker relationship (if it exists)
Service Center Operations	General Requirement	43976	The System shall store basic demographic information, such as: a) Zip Code b) Date of Birth c) County d) Email Note: No SSN
Service Center Operations	General Requirement	43977	The System shall update demographic information directly in tool.
Service Center Operations	General Requirement	43978	The System shall sort incidents associated with a Contact by defined classifications (e.g. the Contact type under which the interaction occurred, the subject of the incident).
Service Center Operations	General Requirement	43979	The System shall view incidents/interactions related to a Contact in chronological order and the date/time associated with the incident/interaction.
Service Center Operations	General Requirement	43980	The System shall pre-populate approved email content from the Knowledge Base and send as outbound email communications to the customer from RightNow.
Service Center Operations	General Requirement	43981	The Vendor is required to provide the Equipment, Software, training, and Facilities to support the processing of high-volume, incoming mail, outgoing mail, and print processing functionality; specifically: A) Incoming Mail and Fax shall be: I) Scanned, tracked, and linked to the consumer application or case file in California Healthcare Eligiblity, Enrollment and Retention System (CalHEERS). II) Available online for review by multiple people III) Routed for the appropriate type of processing IV) Received Mail shall include the following sources: V) All mailed applications received at the central post office box – including attached customer verification and Documentation. VI) Undelivered/returned mail received at the central post office box. B) Incoming Email and Text messages shall be routed for the appropriate type of processing and/or to a specific Call Center Operator. I) Outgoing Correspondence shall be able to be generated dynamically or on-demand and be viewable through the presentation layer. California Healthcare Eligiblity, Enrollment and Retention System (CalHEERS) is expected to issue mailings in the following categories: II) Eligibility and Enrollment, including the request for individuals to verify key eligibility factors (e.g., income, household composition, residency, etc.) for the purposes of annual eligibility and enrollment renewal and reporting changes, if necessary. III) Plan Management, including annual eligibility review materials. IV) Financial Management including reports and notifications regarding premium payments and other financial transactions per user type. V) Have the ability for correspondence to be generated as: a) Print Media, which shall be bundled for printing and sent through the mail or faxed. b) Email, text messages, or online account notifications. VI) Print processing, which includes, but is not limited to, the printing of all notices, forms, letters, postcards, flyers, brochures, enrollment packages, and ad hoc mass mailings. Printed documents shall include basic black printing on white paper to full-color glossy multifold brochures and presentation materials.
Service Center Operations	General Requirement	43982	The System shall notify Pitney Bowes to send materials to a Contact and capture the date and timestamp of when the request was created via the incident record.
Service Center Operations	General Requirement	43983	The System shall restrict who can create and access fulfillment requests. Ability for all Service Center personnel to have the ability to create fulfillment requests, and track initiator. Fulfillment request statuses should only be updatable by Pitney Bowes.
Service Center Operations	General Requirement	43984	The System shall resolve and close a fulfillment request once all requested materials are sent.
Service Center Operations	General Requirement	43985	The System shall view a list of all of the available materials to send to a Contact. The list of available materials can be edited by a Business Administrator at any given time.
Service Center Operations	General Requirement	43986	The System shall select the specific materials to send to a Contact, and to send multiple materials to a Contact.
Service Center Operations	General Requirement	43987	The System shall document whether a Contact wants to receive the requested materials via physical mail or fax.

Category	Sub Category	Req ID	Requirement
Service Center Operations	General Requirement	43988	The System shall capture the appropriate Contact information to send a fax: a) First name b) Last name c) Fax number
Service Center Operations	General Requirement	43989	The System shall capture the appropriate Contact information to send a physical mail: a) First name b) Last name c) Address Line 1 d) Address Line 2 e) Address Line 3 f) City g) State h) Zip code
Service Center Operations	General Requirement	43990	Pitney Bowes shall be able to receive the transmission to send materials with all of the associated fulfillment details and acknowledge that request was received.
Service Center Operations	General Requirement	43991	Print/mail vendor shall be able to update the status of a fulfillment request: a) No Value b) Acknowledged c) Partial Fulfillment d) Sent e) Error
Service Center Operations	General Requirement	43992	The System shall associate a time and date on a fulfillment request with any change in status.
Service Center Operations	General Requirement	43994	The Vendor shall provide a Telecommunications Device for the Deaf (TDD) - Teletype (TTY) alternative phone number to provide service for hearing-impaired callers.
Service Center Operations	General Requirement	44011	The System shall search for existing contacts by combination of: a) Case ID b) Agent/Agent ID c) Agent name d) Assister numbers e) Agent numbers In addition to all of the search parameters captured in 3.1.1.1.
Service Center Operations	General Requirement	44012	The System shall search California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) records and RightNow records to provide all contact records available for the SCR.
Service Center Operations	General Requirement	44013	The System shall display search results for the purpose of identification including and if available: a) Case ID b) Agent/General Agent ID c) California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) Status
Service Center Operations	General Requirement	44014	The System shall display additional contact information, in addition to that decided in 3.1.4.1, from California Healthcare Eligibility, Enrollment and Retention System (CalHEERS), including and if available: a) Application Status b) Plan Information c) Associated contacts: Dependents, Employees d) Appeals and Appeals Status
Service Center Operations	General Requirement	44016	The system shall associate the application status to a Contact record: a) individual b) employee c) employer
Service Center Operations	General Requirement	44017	The system shall identify potential duplicate Contacts within RightNow and California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) based on pre-defined business rules.
Service Center Operations	General Requirement	44018	The System shall make specific fields for a Contact's RightNow Contact record (individual, employee, employer) read-only for reconciled Contacts, if the California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) Contact record contains information for those fields. Updates to these fields will be systematically updated from California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) upon opening the RightNow Contact record.
Service Center Operations	General Requirement	44019	The System shall provide the ability for duplicate Contacts to be presented to the SCR so that necessary updates can be made and saved against the Contact record.
Service Center Operations	General Requirement	44020	If the contact doesn't exist in RightNow, but does exist in California Healthcare Eligibility, Enrollment and Retention System (CalHEERS), the System will create a new Contact record with basic contact information (based on the contact type) in RightNow.

Category	Sub Category	Req ID	Requirement
Service Center Operations	General Requirement	44021	The System shall segment Contact's by status if available: a) Eligibility b) Application c) Eligibility and Application d) Enrollment
Service Center Operations	General Requirement	44022	The System shall capture Application status and Eligibility information from California Healthcare Eligiblity, Enrollment and Retention System (CalHEERS) for a contact depending on data availability from California Healthcare Eligiblity, Enrollment and Retention System (CalHEERS).
Service Center Operations	General Requirement	44023	The CRM Shall provide the following but not limited to tracking reports: A) Abandonment Rate D) Average Speed of Answer E) On Hold Time
Service Center Operations	General Requirement	44024	The System shall track and Report RightNow interactions by Agent, Supervisor, Team, Site and Enterprise which include the following: a) Incidents Outstanding (Aging report) b) Record and track incidents in RightNow (number and duration) c) Track fulfillment request and confirmations d) Track out-bound dialing interactions e) Track contact creation f) Track call types via call arrival through the IVR g) Track Call types via Call typing by agent
Service Center Operations	General Requirement	44025	The System shall support ad hoc reporting.
Service Center Operations	General Requirement	44119	Provide entry point for gathering leads online via form on website. Modify current form.
Service Center Operations	General Requirement	44120	Provide the functionality to store contact information from leads including: 1. Individual or Small Business 2. Preferred Method of Contact 3. Fname 4. LName 5. Address 6. Telephone number 7. E-mail address 8. Business Name (show only if Small Business button selected) 9. How did you hear about us? 10. Preferred Language
Service Center Operations	General Requirement	44121	Provide the functionality to track how lead was gathered
Service Center Operations	General Requirement	44122	Provide the functionality to track the Lead within the Non-Consumer facing Form: 1. Date Entered 2. Date Lead Captured 3. Status
Service Center Operations	General Requirement	44123	Provide an external facing CRM web portal that allows consumers to self-identify themselves as a lead.
Service Center Operations	General Requirement	44124	Provide the functionality to receive leads from a variety of different sources including: -Covered California App -Covered California Website -Through an external facing CRM web portal
Service Center Operations	General Requirement	44125	Provide an internal facing CRM web portal that allows Covered California staff to identify and enter leads
Service Center Operations	General Requirement	44126	Provide the functionality to allow for a variety of different types of users including: Internal Covered California Staff by Department External Associates (Agents, Counselors, Educators, etc.)

Category	Sub Category	Req ID	Requirement
Service Center Operations	General Requirement	44127	Provide the functionality to store information about Covered California Organizations including: Organization Number Organization Type Organization Name Organization Phone Number Organization Street Address Organization State / City / Zip Organization Email Organization Contact Person First Name Organization Contact Person Last Name Organization Contact Person Email Organization Contact Person Phone Organization Description
Service Center Operations	General Requirement	44128	Provide the functionality to associate an Organization with leads
Service Center Operations	General Requirement	44129	Provide the functionality to store information about Covered California Advertising Campaigns including: Campaign ID Campaign Name Campaign Start Date Campaign End Date Campaign Organizer First Name Campaign Organizer Last Name Campaign Organizer Phone Campaign Organizer Email
Service Center Operations	General Requirement	44130	Provide the functionality to associate Advertising Campaigns with Leads
Service Center Operations	General Requirement	44131	Provide the functionality to collect information on the preferred method for how each lead wishes to be contacted for follow-up for additional information including: - Follow-up by Covered California Representative - Follow-up with email notifications from Covered CA -Follow-up with printed materials from Covered CA
Service Center Operations	General Requirement	44132	Provide the functionality to collect information on the preference mode for how each lead wishes to be contacted including: -Phone Call -Email -In-Person -Mail
Service Center Operations	General Requirement	44133	Provide the functionality to allow one (1) of the following Progress values to be assigned to each Opportunity: Expressed Interest Created Account Submitted Application Determined Eligibility Selected Plan for Enrollment Provide the functionality to allow one (1) of the following Status values to be assigned to each Opportunity: Open In-Progress Inactive Closed (Won) Closed (Lost) Provide the functionality to allow a Win/Loss Reason value to be assigned to each Closed Opportunity.
Service Center Operations	General Requirement	44134	Provide the functionality to allow a lead to identify a primary language preference from the 13 threshold languages and any other language as requested by Covered California
Service Center Operations	General Requirement	44135	Provide the functionality to allow a lead to identify if they are one of the following: -Individual / Family -Small Business
Service Center Operations	General Requirement	44136	Provide import/export functionality that allows users to upload multiple leads through a manual import

Category	Sub Category	Req ID	Requirement
Service Center Operations	General Requirement	44137	Support the ability to input a batch of leads (from a source like pre-load files).
Service Center Operations	General Requirement	44138	Support the ability to input an individual lead into the system manually.
Service Center Operations	General Requirement	44139	Support the ability to update Lead profile based on interaction.
Service Center Operations	General Requirement	44140	Provide functionality to prioritize leads captured based upon business rules: • First Name • Last Name • Language Preference • Zip Code • Preferred Method of Contact • Contact information that correlates with preferred method of contact • Went through “Shop and Compare tool” process Description- Opportunity Score- Manual or Automatic Lead requests an application- Medium- Manual Lead expressed interest in a program or product but did not enroll- Low- Manual Lead responds to a campaign- Low Lead is deemed exchange eligible by Quicksort- High- Currently manual-potentially automatic Lead received from California Agency- Medium- Automatic Lead initiated but did not submit an application- Medium- Manual Lead requests to be contacted in the future- High- Proposed automatic Lead is referred by a grantee- High- Proposed for automatic Lead is eligible for special enrollment- High- Manual Lead submitted an application but did not enroll in a plan- High- Manual Member is up for enrollment renewal- High- Manual Lead loses coverage from employer- High - Manual Lead is brought into system through Expiring Health Programs- High - Manual
Service Center Operations	General Requirement	44141	Provide the functionality to automatically qualify a lead as a "Contact" based upon business rules: • Automatically qualifying a lead as a contact should occur if the contact information consists of First Name, Last Name, and Contact Information
Service Center Operations	General Requirement	44142	Provide the functionality to allow administrative users the ability to override the automatic system qualification of a lead
Service Center Operations	General Requirement	44143	Support the ability to use assessment to generate Lead score.
Service Center Operations	General Requirement	44144	Provide the functionality to assign the Lead with Non-Consumer facing Form (continued): -Lead Assigned To
Service Center Operations	General Requirement	44145	Provide the functionality to score each "Contact" opportunity
Service Center Operations	General Requirement	44146	Provide the functionality to assign each "Contact" opportunity to the following roles based on business rules: Certified Enrollment Entity Agent Sales Entity Role: Distribution Rules for CEEs • Language • Zip Code • Round Robin distribution to organizations in the zip code - o Number of leads each org gets is based on lead to sales force ratios. - o 5 leads per day per salesperson they have on staff. • If Zip Code orgs are unavailable, lead should go to nearest zip code orgs within a 10-mile proximity. • If orgs within 10 miles are not available of the lead, the leads should go to nearest county sales orgs. Role: Distribution Rules for Certified Agent Orgs • If an EE is not available, the "Opportunity" should go to Agents using a round robin distribution based on date of California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) Certification in CRM System and Language

Category	Sub Category	Req ID	Requirement
Service Center Operations	General Requirement	44147	Prioritize leads to work based on lead status (Opportunity Status, Progress, and Assignment).
Service Center Operations	General Requirement	44148	Support the ability to edit assigned Lead profile.
Service Center Operations	General Requirement	44149	Support the ability to assign a lead(s) to a group/automated action based on pre-determined rules.
Service Center Operations	General Requirement	44150	Support the ability to assign and re-assign ownership of a Lead.
Service Center Operations	General Requirement	44151	Support the ability for a supervisor to reassign a Lead to another SCR.
Service Center Operations	General Requirement	44152	Provide ability to track how many times a Lead is contacted and identify the date and notes associated with each contact.
Service Center Operations	General Requirement	44153	Provide functionality to run a variety of reports including the ability to run ad-hoc reports
Service Center Operations	General Requirement	44154	Provide the ability to re-distribute "Contact" opportunities
Service Center Operations	General Requirement	44155	Provide the ability to update a "Contact: file by adding notes and tracking the dates of each note throughout the life of that "Contact".
Service Center Operations	General Requirement	44156	Support the ability to update Opportunity Status, Progress, and Assignment based on source or Service Center interaction.
Service Center Operations	General Requirement	44157	Support the ability to document notes and outcomes of interaction with Lead.
Service Center Operations	General Requirement	44158	Support the ability to track and maintain Opportunity Progress. Default RightNow fields include: Expressed Interest Created Account Submitted Application Determined Eligibility Selected Plan for Enrollment
Service Center Operations	General Requirement	44159	Allow the owner of a Lead, their supervisor, SCRs, CCLAs, and Marketing Managers to edit an Opportunity Record. Allow the CCLA and Marketing Manager may always edit Opportunity Assignment.
Service Center Operations	General Requirement	44160	Support the ability for a user to receive updates on Leads assigned to them. E-mail notification templates to users who receive leads: • “Covered CA has sent you [XXX] leads. Please distribute among your sales force within two business days or your leads may be re-assigned another member of the Covered CA Sales Force.”
Service Center Operations	General Requirement	44161	Support the ability for a Lead task to include due date.
Service Center Operations	General Requirement	44162	Support the ability to create aging rules for reminders. User- Lead Status- Reminder to- CRM System Message- Reminder Schedule CRM System- Open- Business Analyst-“Distribute leads to LME’s”-Upon receipt of leads LME- Assigned to Sales Orgs- EEO Admins/Sales Execs- “Distribute leads to your Sales staff”- Upon receipt of leads Sales Org- Assigned to CEC/Agent- CEC/Agent- “You have new leads!”- Immediately when leads are assigned Sales Org/CEC/Agent Contacted Sales Org/CEC/Agent In Progress Sales Org/CEC/Agent App Started Sales Org/CEC/Agent Plan Selection Pending Sales Org/CEC/Agent Closed CRM System- Inactive- EEO- “[XXX] leads are about to become Inactive” - 4 days after a lead shows no progress CRM System- Dead-EEO/CCLA-“[XXX] leads are about to become Dead.” - 9 days after a lead shows progress
Service Center Operations	General Requirement	44163	Support the ability for an Opportunity to be re-assigned/re-distributed based on aging criteria. Lead Redistribution will occur for the following reasons: • Dead • Inactive • Declined by Sales Organization • Incorrectly assigned If a lead Redistribution should be needed, it will follow the same distribution rules as a new lead; accept that it will not go to the same sales organization that it was recalled from.

Category	Sub Category	Req ID	Requirement
Service Center Operations	General Requirement	44164	Set alerts to roles (e.g. supervisor, manager) in relation to task due date
Service Center Operations	General Requirement	44165	Systematically set follow-up reminder/task.
Service Center Operations	General Requirement	44166	Support the ability to track: - Lead status - Enrollment outcomes based on Lead activities - Number of attempts
Service Center Operations	General Requirement	44167	Support the ability to track Opportunity outcomes based on the Opportunity status. (Win/Lost, Lost reason).
Service Center Operations	General Requirement	44168	Support the ability for a user to indicate date completed on Lead task.
Service Center Operations	General Requirement	44169	The System shall search contacts by: - Lead status - Language
Service Center Operations	General Requirement	44170	Provide the ability to close a contact opportunity for a variety of reasons including: -Contact Enrolled -Contact Non-Responsive
Service Center Operations	General Requirement	44171	Provide the functionality to reopen a closed "Contact" opportunity
Service Center Operations	General Requirement	44172	Generate reports based on: - Lead status - Customer Segmentation - Language
Service Center Operations	General Requirement	44173	The System shall support the ability for a user to view report of Opportunity history/status (open, closed, etc.).
Service Center Operations	General Requirement	44174	The System shall support the ability to view create Opportunity views including: a) Supervisor view of all incidents by team (i.e. for Lead) b) Supervisor view of all teams (by team) (i.e. for Manager Level 1) c) Command Center view of everything
Service Center Operations	General Requirement	44218	CoveredCA Toll Free Number (TFN) 855-312-8161 will be disassociated from its hunt group destination in the Cisco Call Manager
Service Center Operations	General Requirement	44219	A new ACD skill for Callback Queuing will be established in the Call Manager
Service Center Operations	General Requirement	44220	SCRs currently assigned to the Callback Queue hunt group will be removed from that group and reassigned to the new ACD Callback Queuing Skill
Service Center Operations	General Requirement	44221	Inbound calls for TFN 855-312-8161 will be routed to the new ACD Callback Queuing Skill, with the appropriate greeting, time-of-day and holiday routing, and after hours messaging.
Service Center Operations	General Requirement	44222	Calls to the 855-312-8161 will remain in the Callback Queuing Skill queue until answered or abandoned, and will not overflow to any other skill group or queue in the CoveredCA Service Centers.
Service Center Operations	General Requirement	44223	Need English and Spanish language queues associated with the Callback Queuing Skill. English and all non-English (except Spanish) calls go to the English queue and Spanish only calls go to the Spanish queue.
Service Center Operations	General Requirement	44227	The IVR Call Flow must be update to announce the correct County Phone Number when the zip code entered crosses multiple counties. Information must be presented in both English and Spanish.
Service Center Operations	General Requirement	44228	The Vendor must add Cantonese language to all call flows and self-service of the IVR. All messaging will be the same as the exisitng English and Spanish versions.
Service Center Operations	General Requirement	44229	The IVR must allow the Cantonese speaking caller to navigate through all IVR option and listen to all messages in Cantonese. All messaging and options will be the same as the English and Spanish version.
Service Center Operations	General Requirement	44230	The IVR must provide all self-service functionality to the Cantonese speaking caller including: authentication, case/application status, plan information, premium amount, and plan effective dates.
Service Center Operations	General Requirement	44231	The IVR must provide the functionality for the Cantonese speaking caller to hear the same message as the English and Spanish speaking caller, in Cantonese, if they call the general number (1-800-300-1506) or the Cantonese number (1-800-339-8938).
Service Center Operations	General Requirement	44232	The IVR must provide the same options, etc... for the Cantonese speaking caller as the English and Spanish speaking caller, in Cantonese, if they call the general number (1-800-300-1506) or the Cantonese number (1-800-339-8938).
Service Center Operations	General Requirement	44233	Skill based routing for the Cantonese caller must be updated as these calls currently default to an SCR.

Category	Sub Category	Req ID	Requirement
Service Center Operations	General Requirement	44234	The IVR System must route incoming calls to Service Center Representatives who possess the skill level needed to complete the call. Routing is based on the path taken by the Customer in the IVR Call Flow.
Service Center Operations	General Requirement	44235	The IVR System must route the incoming call to a Service Center Representative (SCR) with a higher skill level, when there are no SCRs available with the assigned level needed.
Service Center Operations	General Requirement	44236	The IVR must provide the functionality and provisioning for identified staff to make updates to SCR skill levels and assignments. Over time, SCRs will acquire new skills and increase their skill level for each of the Call Types. Identified Covered CA staff will need to be given the ability to make changes to staff skill assignment.
Service Center Operations	General Requirement	44237	"The IVR System must be able to recognize the following call types and their associated skill levels: 1. Skill Level 1 - QHP Hotline 2. Skill Level 2 - New to Covered CA 3. Skill Level 2 - Renewing your enrollment with Covered CA 4. Skill Level 2 - Report a change to your account 5. Skill Level 2 - Special Enrollment 6. Skill Level 2 - Callback queue 7. Skill Level 3 - Need help accessing your online account 8. Skill Level 3 - Status of Applicaion - Covered CA 9. Skill Level 4 - Status of Applicaion - Medi-Cal 10. Skill Level 4 - Questions about a letter 11. Skill Level 4 - CEE/CEC/Agent 12. No Change to existing routing - Languages"
Service Center Operations	General Requirement	45040	The Vendor Service Center staff shall be available 24 hours a day, 7 days a week via the contracted onsite support hours or the after hour escalation process.
Service Center Operations	General Requirement	48404	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall trigger the creation of Renewal BPM cases for the enrollments that are not renewed successfully for the next year by Affordability Crosswalk and Catastrophic Age Out batches.
Service Center Operations	Plan and Benefit Assistance		
Service Center Operations	Plan and Benefit Assistance	38762	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) system shall change operating hours for QHP (Qualified Health Plan) queue to be independent of the main IVR.
Service Center Operations	Reports		
Service Center Operations	Reports	44026	"Cisco Courtesy Callback shall provide reporting functionality to identify and flag call types related to CCB options selected in the IVR."
Status Reporting			
Status Reporting	General Requirement		
Status Reporting	General Requirement	44295	The Vendor shall help prepare for and participate in periodic and ad-hoc meetings and presentations to Exchange, County, State and Federal Stakeholders, workgroups, and other committees regarding Project plans, status, risks, issues and recommendations, as appropriate.
Status Reporting	General Requirement	44310	The Vendor shall prepare and participate in Quarterly Balanced Scorecard Reviews to provide the California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) Steering Committee with tangible evidence regarding the overall progress and health of the California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) Project.
Status Reporting	General Requirement	44321	As part of normal ongoing status reporting, the Vendor must: A) Conduct weekly status meetings with Vendor and State California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) Project Team managers; other attendees may include but not be limited to Exchange PMO, QA, IV&V and oversight consultants. The Vendor shall commit to storing written status meeting records, in a format agreed to, within two (2) business days of the weekly status meeting B) Provide Weekly Status Reports at least 24 hours prior to the status meeting C) Lead and/or participate in standing status or committee meetings with Exchange Project staff, Exchange and State staff and QA, IV&V and oversight consultants.
Technical			
Technical	General Requirement		
Technical	General Requirement	40238	Code merge of Agile pilot effort to current codebase(CR 128570)
Technical	General Requirement	40239	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall merge the ROP config screen changes developed as part of CR 128570 into California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) current active code stream
Technical	General Requirement	40240	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall merge the batch changes (31A, 31C and 31B) developed as part of CR 128570 into California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) current active code stream
Technical	General Requirement	40241	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall update batch 31C to apply the filters as per the configuration page on the cases retrieved by 31A and update 31B to process the filtered cases for ROP processing
Technical	General Requirement	40242	Following existing ROP defects will be addressed as part of this CR 118210, 123545, 124091, 124089, 124092, 124452, 143657, 146134, 151530, 123830
Technical	General Requirement	45676	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) Technology Refresh - Oracle to RDS Aurora PostgreSQL Database - Database - Configuration

Category	Sub Category	Req ID	Requirement
Technical	General Requirement	45677	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall provide infrastructure for production and non-production environments for database migration
Technical	General Requirement	45678	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall install databases for production and non-production environments
Technical	General Requirement	45679	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall setup high availability for Production and Load Test Environments
Technical	General Requirement	45680	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall setup additional environment for performance test with production data
Technical	General Requirement	45681	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) database system shall complainace with security pocilies defined by project
Technical	General Requirement	45682	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) database system shall complainace with data rentention pocilies defined by project
Tools			
Tools	Enrollment		
Tools	Enrollment	49020	California Healthcare Eligiblity, Enrollment and Retention System (CalHEERS) shall employ Optimizely, an A/B testing platform, to facilitate configuration-based experiments for variants defined by modifications in screen display. These variants will encompass changes to the presentation of screen elements, including their display attributes, labels, and values.
Tools	Enrollment	49021	California Healthcare Eligiblity, Enrollment and Retention System (CalHEERS) shall setup the Optimizely Account.
Tools	Enrollment	49022	California Healthcare Eligiblity, Enrollment and Retention System (CalHEERS) shall configure Optimizely to accept requests from the California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) application.
Tools	Enrollment	49023	California Healthcare Eligiblity, Enrollment and Retention System (CalHEERS) shall update the California Healthcare Eligiblity, Enrollment and Retention System (CalHEERS) application to enable integration with Optimizely, allowing it to send and receive experimentation variations.
Tools	Enrollment	49024	California Healthcare Eligiblity, Enrollment and Retention System (CalHEERS) shall create, develop, and configure the selected use case within Optimizely.
Tools	Enrollment	49025	California Healthcare Eligiblity, Enrollment and Retention System (CalHEERS) shall develop custom tagging of the use case in BR 1.4 for metrics reporting.
Tools	General Requirement		
Tools	General Requirement	39903	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall remove all Google Analytics code/tags/events on Certified Enrollers webpage (Covered CA Home > Find Help > Certified Enrollers webpage (https://apply.coveredca.com/hix/broker/search?anonymousFlag=Y&recordType=null&recordId=null&lang=en)).
Tools	General Requirement	39904	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall add Google Tag Manager (GTM) on Certified Enrollers webpage (Covered CA Home > Find Help > Certified Enrollers webpage (https://apply.coveredca.com/hix/broker/search?anonymousFlag=Y&recordType=null&recordId=null&lang=en)).
Tools	General Requirement	39905	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall add the following elements to data layer. 1. pageName 2. pageCategory 3. referringPageUrl 4. destinationPageUrl 5. userRole 6. userDetailedRole 7. userSignin 8. getInsuredTool: 9. caseID 10. applicationID
Tools	General Requirement	40159	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall upgrade Adobe Lifecycle to Adobe Experience Manager 6.5
Tools	General Requirement	40160	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall support All existing notices with Adobe Experience Manager 6.5
Tools	General Requirement	40161	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall generate all supported language notices in Adobe Experience Manager 6.5
Tools	General Requirement	40162	California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) shall conduct/review performance of notices generated with Adobe Experience Manager 6.5
Tools	General Requirement	45029	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System database shall provide automatic replication and synchronization of table updates to multiple databases.
Tools	General Requirement	45030	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System database shall provide standard query language (SQL) capabilities for database queries.
Tools	General Requirement	45031	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall have a purge utility for removing records at a user-configurable time and criteria.
Tools	General Requirement	45032	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall have the ability for remote network monitoring and administration of all applications.
Tools	General Requirement	45033	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall provide archive and archive retrieval tools.
Tools	General Requirement	45034	The Vendor shall provide the necessary industry standard tools and technologies to support deployment, runtime operations, administration, monitoring, alerting and on-demand provisioning of resources.
Tools	General Requirement	45035	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) Data Layer shall include industry standard tools and technologies to support design, development, testing (e.g., functional, load and performance), runtime management and monitoring of all information Systems.
Tools	General Requirement	45041	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) environments shall provide necessary tools and technologies for development, deployment, runtime, operations, administration and governance of the shared services.
Tools	General Requirement	45045	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall utilize standard e-mail protocols. (e.g. IMAP, MAPI, POP3, SMTP, etc.).

Category	Sub Category	Req ID	Requirement
Tools	General Requirement	45046	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall provide toolsets to accommodate the following: A) Database maintenance B) Report design and generation C) Application security administration D) interface design E) System upgrade administration F) API maintenance; and G) Archiving/purging of data.
Tools	General Requirement	45048	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall provide an Interactive Voice Response (IVR) System.
Tools	General Requirement	45049	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall integrate error messages with on-line help function.
Tools	General Requirement	45050	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall include an industry standard Customer Relationship Management tool.
Tools	General Requirement	45051	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) Service Layer shall include the necessary industry standard tools and technologies such as web/application server, web services environment (e.g., SOAP engine), technology (e.g., Java/JEE, .NET) runtime environment, integration adapters to implement and provide runtime environment for California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) web services.
Tools	General Requirement	45052	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) Service Layer shall include the necessary industry standard tools and technologies to support end-to-end lifecycle phases such as analysis, design, implementation, discovery, runtime environment, management and monitoring of web services.
Tools	General Requirement	45053	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) Business Process Layer shall include Business Process Management System (BPMS) based on open standards (e.g., BPMN, WS-BPEL, WSDL, XML) to implement end-to-end business process lifecycle phases such as analysis and modeling, implementation, runtime management and monitoring and process optimization.
Tools	General Requirement	45054	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) Business Process Layer shall include tools and technologies to support effective Business Activity Monitoring (BAM) and reporting of various business performance matrices.
Tools	General Requirement	45056	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall include industry standard tools to implement the web portal, IVR and fax interfaces.
Tools	General Requirement	45059	The Vendor shall configure all fax servers to apply a unique identifier (e.g., document number) to each application and all related application materials for each specific application.
Tools	General Requirement	45060	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall support sending email messages.
Tools	General Requirement	45064	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall maintain a System-wide calendar, which can be updated on-line by the user, for production scheduling.
Tools	General Requirement	45066	The Vendor shall provide all the necessary industry standard tools and technologies to support all storage requirements including, but not limited to: file storage, content management, data warehouse, business intelligence, and reporting, relational database, business rules repository, identity storage, and certificate storage.
Tools	General Requirement	45068	The California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) System shall provide a configuration management tool.
Tools	General Requirement	45081	Accenture shall Provide (8) Quick Test Professional (QTP) licenses to the state.
Tools	General Requirement	45112	Accentrue shall provide (1) 4 hour class on the QTP product
Tools	General Requirement	45113	Accenture shall provide (80) hours of ongoing as need / one on one QTP product support.
Training			
Training	General Requirement		
Training	General Requirement	43475	Training content shall include information covering but not limited to: A) Core functionality available from the web portal; B) “Backend” reporting and data extraction such as xml that can then be used and combined with Non-MAGI Medi-Cal enrollment data, performance data on workflow completion timeframes and volume; C) How workflow is related to California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) functionality – where paper /System interfaces are required; D) How and what Systems interface with California Healthcare Eligibility, Enrollment and Retention System (CalHEERS)
Training	General Requirement	43476	The Vendor shall provide an approach and services for Statewide training development and delivery for all Exchange user/customer types. Responsibilities include all aspects of training on a Statewide basis, including but not limited to providing training Facilities (if needed), Equipment, materials, organization, logistics, and staffing. Training must be tailored specifically for each user group within the scope of California Healthcare Eligibility, Enrollment and Retention System (CalHEERS).
Training	General Requirement	43477	The Vendor shall develop training materials, curriculum and courses in support of its overall training approach.
Training	General Requirement	43478	The Vendor shall develop work instructions and procedures for training.
Training	General Requirement	43479	The Vendor shall determine the delivery method (Instructor-Led, Web-Based, Workshop) that is most appropriate for the Users and develop the materials accordingly.
Training	General Requirement	43481	The Vendor shall conduct training for each new System release or major feature addition or change, as requested per the Change Request Process. Training related to changes to baseline scope would require a change request.
Training	General Requirement	43482	The Vendor shall provide training to users Statewide. Training shall be tailored for each user group by functional role within the scope of California Healthcare Eligibility, Enrollment and Retention System (CalHEERS).

Category	Sub Category	Req ID	Requirement
Training	General Requirement	43483	The Vendor shall propose and provide training using a variety of delivery methods, to include but not limited to: A) Face-to-face / Direct Delivery – formal class sessions, lectures, hands-on demonstrations and examples; B) On-line; C) Hardcopy training materials and reference materials; D) Computer Based Training; E) Other innovative methods
Training	General Requirement	43484	The Vendor shall provide training Facilities (if proposed) that will include: A) Provide adequate space and Equipment; B) Facilitate the training of staff Statewide; C) Accommodate the volume of trainees
Training	General Requirement	43495	The Vendor shall commit to full responsibility of training through the terms of: A) System development; B) System Implementation; C) Operations and Maintenance
Transition Management			
Transition Management	General Requirement		
Transition Management	General Requirement	44074	The Vendor shall continue to maintain and update Documentation in the electronic library through the end of the Term.

APPENDIX B FORMS

APPENDIX B – FORMS

This appendix contains all forms and attachments referred to in the Office of Technology & Solutions Integration (OTSI) California Healthcare Eligibility, Enrollment, and Retention System (CalHEERS) System Development, Maintenance and Operations (SDMO) Request for Proposal (RFP) #73040873. Bidders should carefully review each section of the RFP to identify/review the submission requirements related to each form provided within Appendix B, FORMS.

Please note, links are provided as a courtesy. Therefore, the State makes no guarantee the links provided are currently valid. Bidders should visit the appropriate State web site for the current location to ensure compliance with a requirement.

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APPENDIX B-1: BIDDER QUESTIONS AND/OR REQUEST FOR CHANGES

In order to submit questions or to submit a request for change, you must obtain a User ID and password for SharePoint. Bidders must sign and submit Appendix B-4, CONFIDENTIALITY STATEMENT FORM and Appendix B-5, ACCESS AUTHORIZATION FORM to the Procurement Official.

It is the bidder's responsibility to provide the Procurement Official the required documentation to obtain a User ID and password for SharePoint access. The bidder must identify a single point of contact, email, street address, and phone number. The User ID, password and instructions will be provided to the single company contact within five (5) State business days after receipt of required documentation.

This will be the sole method for bidders to submit RFP questions, clarifications, and/or request for change. If questions, clarifications, and/or request for change are submitted using another method, bidders will be redirected to the SharePoint site.

APPENDIX B-2: PROPOSAL SUBMISSION CHECKLIST

Compliance Criteria
Has your Company submitted the following pre-proposal information? (See Section 1, INTRODUCTION AND OVERVIEW)
☐ Form B-3: Intent to Bid Form ☐ Form B-4: Confidentiality Statement Form ☐ Form B-5: Access Authorization Form
Does your Proposal follow the format specified in Section 8, PROPOSAL FORMAT?
☐ Packaged and labeled as identified ☐ Provided in the number of copies and formatted as identified ☐ Provided in the format as identified ☐ No cost data provided in any volumes, except Volume III
Is your Proposal provided in the following order, as identified in Section 8, PROPOSAL FORMAT?
Volume I – Response to Administrative and Bidder Requirements
Section 1 – Cover Letter and Executive Summary (see Section 5, ADMINISTRATIVE REQUIREMENTS)
☐ Table of Contents, Table of Tables, and Table of Figures ☐ Cover letter with original signature and information ☐ Executive Summary
Section 2 – Administrative Response (see Section 5, ADMINISTRATIVE REQUIREMENTS)
☐ Appendix B-6: Response to Administrative Requirements Form ☐ Appendix B-7: Workers' Compensation Certification Form ☐ Appendix B-8: GSPD-05-105 Bidder Declaration Form ☐ Appendix B-9: STD 843, Disabled Veteran Business Enterprise (DVBE) Declarations Form ☐ Appendix B-10: Bidding Preferences and Incentives Form ☐ Appendix B-11: Commercially Useful Function (CUF) Certification Form ☐ Appendix B-12: Secretary of State Certification ☐ Appendix B-13: Seller's Permit ☐ Appendix B-14: Payee Data Record Form ☐ Appendix B-15: Iran Contracting Act of 2010 Form ☐ Appendix B-16: Federal Debarment, Suspension, Ineligibility and Voluntary Exclusion - Certification Form ☐ Appendix B-17: California Civil Rights Laws Certification ☐ Letter of Bondability ☐ Appendix B-24: CalHEERS Artificial Intelligence Risk Assessment Form
Section 3 – Bidder Response
See Section 5, ADMINISTRATIVE REQUIREMENTS
☐ Appendix B-18: Statement of Compliance with SOW Requirements Form
See Section 6, BIDDER REQUIREMENTS
☐ Appendix B-19: Bidder (Company) Qualifications Instructions & Form(s)
☐ Appendix B-20: Bidder (Company) Reference Form(s)
☐ Appendix B-22: Key Staff Qualifications Form(s) (for each required Key Staff)
☐ Appendix B-23: Staff Reference Form(s)
☐ Bidder Responses to the Understanding & Approach Requirements
Volume II – Completed Contract
☐ Appendix A, STD 213 IT, Standard Agreement
☐ Entire copy of Appendix A-1, General Provisions - Information Technology
☐ Entire copy of Appendix A-2, CALHEERS SDMO Special Provisions
☐ Entire copy of Appendix A-3, CalHEERS SDMO Additional Federal Provisions
☐ Entire copy of Appendix A-4, Statement of Work
Volume III – Cost Data
☐ Appendix D - Cost Workbook
☐ Additional Cost Data

The State makes no warranty that the checklist is a full and comprehensive listing of every requirement specified in the solicitation. Checking off the items on the checklist does not establish your Company's intent nor does it constitute responsiveness to the requirements. The checklist is only a tool to assist participating bidders in compiling the Final Proposal response. Bidders are encouraged to carefully read the entire solicitation. The need to verify all documentation and responses prior to the submission of Final Proposals cannot be over emphasized.

APPENDIX B-3: INTENT TO BID FORM

Office of Technology & Solutions Integration

Send the this form to the Procurement Official (Alina Corpus) at:

CalHEERSProcurement@otsi.ca.gov

Select one:

_____ We intend to submit a bid and have no problem with the RFP Requirements.

_____ We intend to submit a bid but have one or more problem(s) with the requirements for the reason(s) stated below.

_____ We do not intend to submit a bid for reason(s) stated below and have no problem with the RFP Requirements.

_____ We do not intend to submit a bid for reason(s) stated below and have one or more problem(s) with the RFP Requirements.

Include reasons (as applicable):

The individual to whom all information regarding this RFP shall be transmitted is:

Name:			
Address:			
City, State and ZIP Code:			
Telephone:		FAX:	
Email:			

Sincerely,

_____ Signature	_____ Date
_____ Name and Title of Authorized Representative	_____ Telephone
_____ Company Name	_____ Street Address, City, State, Zip

APPENDIX B-4: CONFIDENTIALITY STATEMENT FORM

As an authorized representative and/or corporate officer of the company named below, I agree that all persons employed by this company will adhere to the following policy:

All information belonging to the Office of Technology & Solutions Integration (OTSI), or their affiliated agencies is considered sensitive and/or confidential and cannot be disclosed to any person or entity that is not directly approved to participate in the work required to execute this Contract.

I certify that I will keep all California Healthcare Eligibility, Enrollment, and Retention System (CalHEERS) Project information, including, but not limited to information concerning the planning, processes, development or procedures of the Project, and all communication with the OTSI or its affiliates derivative of any procurement process, confidential and secure. I will not copy, give or otherwise disclose such information to any other person unless the OTSI has on file a Confidentiality Statement signed by the other persons, and the disclosure is authorized and necessary for the Project.

I understand that the information to be kept confidential includes, but is not limited to, specifications, administrative requirements, terms and conditions, concepts and discussions, as well as written and electronic materials. I further understand that if I leave this Project before it ends, I must still keep all Project information confidential. I agree to follow any instructions provided by the Project relating to the confidentiality of Project information.

I fully understand that any unauthorized disclosure I make may be the basis for civil or criminal penalties and/or disciplinary action (for state employees). I agree to advise the contract manager immediately in the event of an unauthorized disclosure, inappropriate access, misuse, theft or loss of data.

All materials provided for this Project, except where explicitly stated will be promptly returned or destroyed, as instructed by an authorized OTSI representative. If the materials are destroyed and not returned, a letter attesting to their complete destruction which documents the destruction procedures must be sent to the contract manager at the OTSI before payment can be made for services rendered. In addition, all copies or derivations, including any working or archival backups of the information, will be physically and/or electronically destroyed within five (5) calendar days immediately following either the end of the contract period or the final payment, as determined by the OTSI.

All personnel assigned to this project shall be provided a Confidentiality Statement and will be expected to sign and return it to the representative listed below before beginning work on this project.

Name:	
Title:	
Company Name:	
Street Address:	
City / State / Zip Code:	
Signature / Date:	
Contact Phone #:	
Email Address:	

APPENDIX B-5: ACCESS AUTHORIZATION FORM

This form will provide a single company contact a User ID and password for access to SharePoint in order to submit questions, to submit a request for change, and access to the Bidders' Library.

Bidders submitting a question or request for change will require access to SharePoint.

This also provides access to the Bidders' Library. The Bidders' Library is provided to help bidders understand the scope of the California Eligibility, Enrollment and Retention System (CalHEERS) System Development, Maintenance and Operations (SDMO) Request for Proposal (RFP) and prepare a proposal response to the OTSI CalHEERS M&O RFP #73040873.

The content of the Bidders' Library includes detailed information on current CalHEERS services and background on CalHEERS.

All requirements, terms, conditions, rules, and instructions are included or referenced in the solicitation.

Bidders are not required to review the supplemental information but are strongly encouraged to do so. Items in the Bidders' Library may be updated at any time; therefore, bidders are advised to check for periodic updates.

The State does not guarantee the accuracy or the relevancy of the supplemental information and any of the supplemental information relied upon is at the bidder's risk.

To request access, please read the following and submit the information requested:

- Fill out the information below for the individual to whom access information is requested:
- The Confidentiality Statement Form must also accompany this request form in order to receive authorization.

Name:	
Title:	
Company Name:	
Street Address:	
City/State/Zip Code:	
Signature / Date:	
Contact Phone #	
Email Address	

Within five (5) business days upon receipt of this form, an Email will be generated providing a user identification (ID), a password, and Bidders' Library access instructions.

APPENDIX B-6: RESPONSE TO ADMINISTRATIVE REQUIREMENTS FORM

Bidder shall indicate agreement to each of the Administrative Requirements as presented in Section 5 of RFP #73040873. By responding with a “Yes” the bidder confirms that it:

- Read the individual requirements within each section of the Administrative Requirements identified below,
- Understands each individual requirement within each section of the Administrative Requirements, and
- Agrees to comply with each individual requirement within each section of the Administrative Requirements.

Bidders’ responses of a blank or a “No” answer for any mandatory requirement will be cause for the proposal to be deemed nonresponsive. Failure to provide a response to each mandatory requirement, where indicated, may result in disqualification.

RFP 5 Section	RFP 5 - Section Title	Admin. Req. #	Bidder Agrees (Y/N)
5.2	Confidentiality (M)	A1, A2	
5.3.1	Consumer In-Use (M)	A3	
5.3.3	Customer Reference (M, If Applicable)	A4	
5.4.1	Workers’ Compensation Insurance Requirements (M)	A5	
5.4.2	Commercial General Liability Insurance (M)	A6, A7	
5.4.3	Technology Professional Liability/Errors and Omissions	A8, A9	
5.4.4	Cyber Liability Insurance Requirements	A10, A11	
5.4.6	Performance Bonds for Contract and Transition-In (M)	A12	
5.5.2	Equipment (M)	A13	
5.5.3	Certification of Equipment Readiness (M)	A14	
5.5.4	Interface to Existing Equipment (M)	A15	
5.8.1	California DVBE Program Requirement (M)	A16	
5.8.2	DVBE Incentive (M)	A17	
5.8.3	DVBE Declarations (M)	A18	
5.13.1	Cover Letter and Executive Summary (M)	A19 - A29	
5.13.2	Amendment (M)	A30	
5.13.3	Subcontractors (M)	A31	
5.13.4	Commercially Useful Function (M)	A32	
5.13.5	Small Business Preference (Optional)	A33	
5.13.6	Financial Stability (M)	A34	
5.13.7	Secretary of State Certification (M)	A35	
5.13.8	Seller’s Permit (M)	A36	
5.13.9	Payee Data Record (M)	A37	
5.13.10	Iran Contracting Act of 2010 (M)	A38	
5.13.11	Federal Debarment (M)	A39	
5.13.12	Tax Debtor List: Franchise Tax Board (FTB) and California Department of Tax & Fee Administration (CDTFA) (AB 1424) (M)	A40	
5.13.13	California Civil Rights Law Certification (M)	A41	
5.13.14	Air or Water Pollution Violation (M)	A42	
5.13.15	AI Reporting and Risk Assessment Form (M)	A43	
5.14	Additional Equipment Purchases (M)	A44	
5.15.1	Ability to Perform (M)	A45	
5.15.2	Availability (M)	A46	
5.15.3	Proposal Rejection (M)	A47	
5.16	Statement of Work Compliance Requirements (M)	A48	
5.17	Bidder (Company) Qualification (M)	A49	
5.18	Bidder (Company) Reference Forms (M)	A50	

RFP 5 Section	RFP 5 - Section Title	Admin. Req. #	Bidder Agrees (Y/N)
5.19	Key Staff Qualifications Forms (M)	A51	
5.20	Key Staff Reference Forms (M)	A52	

The bidder shall complete and include this form in their response in accordance with RFP, Section 8, PROPOSAL FORMAT. Failure to sign this certification may result in the proposal being deemed nonresponsive.

Signature

Date

Name and Title of Authorized Representative

Telephone

Company Name

Street Address, City, State, Zip

APPENDIX B-7: WORKERS' COMPENSATION CERTIFICATION FORM

The undersigned in submitting this document hereby certifies the following:

I am aware of the provisions of *Section 3700 of the California Labor Code* which requires every employer to be insured against liability for workers' compensation or to undertake self-insurance in accordance with such provisions before commencing the performance of the work of this Contract.

Signature

Date

Name and Title of Authorized Representative

Telephone

Company Name

Street Address, City, State, Zip

APPENDIX B-8: GSPD-05-105 BIDDER DECLARATION FORM

A copy of the GSPD-05-105 Bidder Declaration and its instructions is available as a fill and print PDF at:

<https://www.documents.dgs.ca.gov/dgs/fmc/gsp/pd/gspd05-105.pdf>

APPENDIX B-9: STD 843 DVBE DECLARATIONS FORM

A copy of the STD 843 Disabled Veteran Business Enterprise Declarations (DVBE) and its instructions is available as a fill and print PDF at:

https://www.documents.dgs.ca.gov/dgs/fmc/gsp/pd/pd_843.pdf

APPENDIX B-10: BIDDING PREFERENCES AND INCENTIVES FORM

ALL BIDDERS: COMPLETE ALL SECTIONS BELOW AND SUBMIT WITH YOUR PROPOSAL.

SMALL BUSINESS PREFERENCE

Bidder must check the appropriate box from the choices below.

- ☐ I am a DGS certified Small Business and claim the Small Business Preference. My DGS Small Business certification number is: _____ Expires on: _____
- ☐ I have recently filed for DGS Small Business preference but have not yet received certification, but I am claiming the Small Business preference.
- ☐ I am not a DGS certified Small Business, but 25% or more of the revenue from the award will go to DGS certified Small Business Subcontractors performing a Commercially Useful Function and therefore I am claiming the preference.

Bidder must complete and submit Form B-8: GSPD-05-105 Bidder Declaration Form, indicating the percentage of the revenue that will be received by each DGS certified Small Business Subcontractor. The form can also be found at the following link:

<https://www.documents.dgs.ca.gov/dgs/fmc/gspd/gspd05-105.pdf>

- ☐ I am not claiming the DGS Small Business preference.

DVBE INCENTIVE

Bidder must check the appropriate box from the choices below.

- ☐ I am a DGS certified DVBE. A copy of my STD. 843 form is attached.
- ☐ I have recently filed for DGS DVBE certification but have not yet received certification.
- ☐ I am not a DGS certified DVBE, but a percentage of the revenue will be going to DGS certified DVBE Subcontractors performing a Commercially Useful Function, and therefore I am claiming the DVBE incentive.

Bidder must submit a completed Form B-8: GSPD-05-105 Bidder Declaration Form, indicating the percentage of the revenue that will be received by each DGS certified DVBE Subcontractor. Bidder must also submit a Form B-9: STD 843 DVBE Declarations Form, for each DVBE Subcontractor, signed by the DVBE owner/manager. The form can be found at the following link:

https://www.documents.dgs.ca.gov/dgs/fmc/gspd/pd_843.pdf

- ☐ I am not claiming the DVBE incentive.

Name of Bidder: _____

Signature & Date: _____

APPENDIX B-11: COMMERCIALLY USEFUL FUNCTION CERTIFICATION FORM

Bidder Name: _____

COMMERCIALLY USEFUL FUNCTION DOCUMENTATION

All certified small business, micro business, and/or DVBE Contractors, Subcontractors or suppliers must meet the commercially useful function requirements under Government Code Section 14837 (for SB) and Military and Veterans Code Section 999(e)(2)(for DVBE).

Please answer the following questions as they apply to your company for the goods and services being acquired in this solicitation.

Subcontractor Name (submit one form for each SB/DVBE): _____

Mark all that apply: DVBE: ☐ Small Business: ☐ Micro Business: ☐ N/A: ☐

1.	Will the Subcontractor be responsible for the execution of a distinct element of the resulting Contract?	Yes ☐	No ☐
2.	Will this Subcontractor actually be performing, managing, or supervising an element of the resulting Contract?	Yes ☐	No ☐
3.	Will this Subcontractor be performing work on the resulting Contract that is normal for its business, services, and functions?	Yes ☐	No ☐
4.	Will there be any further subcontracting that is greater than that expected to be Subcontracted by normal industry practices for the resulting Contract?	Yes ☐	No ☐
5.	Will this Subcontractor be responsible, with respect to products, inventories, materials, and supplies required for the Contract, for negotiating price, determining quality and quantity, ordering, installing, if applicable, and making payment?	Yes ☐	No ☐

A response of "No" in questions 1-3 or a response of "Yes" in question 4, may result in your proposal being deemed nonresponsive and disqualified.

The Bidder must provide a written statement below detailing the role, services and goods the Subcontractor(s) will provide to meet the commercially useful function requirement. If the Bidder is not claiming a Small Business or DVBE, indicate "Not claiming a preference" in the box below.

At the State's option prior to award, Bidders may be required to submit additional written clarifying information.

By signing this form, the undersigned Bidder certifies that the Certified Small Business or DVBE satisfies the Commercially Useful Function requirement, and will provide the role, services, and/or goods stated above.

Signature_____
Date_____
Name and Title of Authorized Representative_____
Telephone_____
Company Name,_____
Street Address, City, State, Zip

APPENDIX B-12: SECRETARY OF STATE CERTIFICATION

ATTACH A COPY OF THE BIDDER'S SECRETARY OF STATE CERTIFICATION TO THIS FORM.

For more information on the Secretary of State, Certification refer to the following website link:

<http://www.sos.ca.gov>

APPENDIX B-13: SELLER'S PERMIT

ATTACH A COPY OF THE BIDDER'S CALIFORNIA SELLER'S PERMIT TO THIS FORM.

For more information on seller's permit or certification of registration, refer to the following link:

<https://cdtfa.ca.gov/formspubs/pub73.pdf>

APPENDIX B-14: PAYEE DATA RECORD

ATTACH A COPY OF THE BIDDER'S STD 204, PAYEE DATA RECORD TO THIS FORM.

Refer to the following website link to obtain the appropriate form. Payee Data Record (STD 204) for information:

<http://www.documents.dgs.ca.gov/dgs/fmc/pdf/std204.pdf>

APPENDIX B-15: IRAN CONTRACTING ACT OF 2010**IRAN CONTRACTING ACT**

(Public Contract Code sections 2202-2208)

Prior to bidding on, submitting a proposal or executing a contract or renewal for a State of California contract for goods or services of \$1,000,000 or more, a Bidder must either: a) certify it is **not** on the current list of persons engaged in investment activities in Iran created by the California Department of General Services (DGS) pursuant to Public Contract Code section 2203(b) and is not a financial institution extending twenty million dollars (\$20,000,000) or more in credit to another person, for 45 days or more, if that other person will use the credit to provide goods or services in the energy sector in Iran and is identified on the current list of persons engaged in investment activities in Iran created by DGS; or b) demonstrate it has been exempted from the certification requirement for that solicitation or contract pursuant to Public Contract Code section 2203(c) or (d). The DGS list of entities prohibited from contracting with public entities in California per the Iranian Contracting Act, 2010, can be found at: [Department of General Services Procurement Division Iran Contracting Act List](#).

To comply with this requirement, please insert your Bidder or financial institution name and Federal ID Number (if available) and complete **one** of the options below. Please note: California law establishes penalties for providing false certifications, including civil penalties equal to the greater of \$250,000 or twice the amount of the contract for which the false certification was made; contract termination; and three-year ineligibility to bid on contracts. (Public Contract Code section 2205.)

OPTION #1 – CERTIFICATION

I, the official named below, certify I am duly authorized to execute this certification on behalf of the Bidder/financial institution identified below, and the Bidder/financial institution identified below is not on the current list of persons engaged in investment activities in Iran created by DGS and is not a financial institution extending twenty million dollars (\$20,000,000) or more in credit to another person/Bidder, for 45 days or more, if that other person/Bidder will use the credit to provide goods or services in the energy sector in Iran and is identified on the current list of persons engaged in investment activities in Iran created by DGS.

Bidder Name/Financial Institution (Printed):		Federal ID Number (or N/A):	
By (Authorized Signature):			
Printed Name and Title of Person Signing:			
Date Executed:		Executed in:	

OPTION #2 – EXEMPTION

Pursuant to Public Contract Code sections 2203(c) and (d), a public entity may permit a Bidder/financial institution engaged in investment activities in Iran, on a case-by-case basis, to be eligible for, or to bid on, submit a proposal for, or enters into or renews, a contract for goods and services.

If you have obtained an exemption from the certification requirement under the Iran Contracting Act, please fill out the information below, and attach documentation demonstrating the exemption approval.

Bidder Name/Financial Institution (Printed):	Federal ID Number (or N/A):
By (Authorized Signature):	
Printed Name and Title of Person Signing:	Date Executed:

APPENDIX B-16: FEDERAL DEBARMENT, SUSPENSION, INELIGIBILITY AND VOLUNTARY EXCLUSION – CERTIFICATION FORM

Federal Requirement

Contractors are required to provide the following certification to the agency before award of a purchase order using federal funds. This certification is required by the regulations implementing Executive Order 12549, Debarment and Suspension, 29 CFR Part 98, Section 98.510, Participants; responsibilities. The regulations were published as Part VII of the May 26, 1988 Federal Register (pages 19160-19211).

Present Status

The prospective recipient of federal assistance funds certifies, by submission of this signed certification, that neither it nor its principals are presently debarred, suspended, proposed for debarment, declared ineligible, or voluntarily excluded from participation in this transaction by any federal department or agency.

Attach Explanation

Where the prospective recipient of federal assistance funds is unable to certify to any of the statements in this certification, such prospective participant shall attach an explanation to this certification.

Instructions for Certification

BEFORE COMPLETING CERTIFICATION, READ THE FOLLOWING INSTRUCTIONS THAT ARE AN INTEGRAL PART OF THE CERTIFICATION.

1. By signing and submitting this certification, the prospective recipient of federal assistance funds is providing the certification as set out below.
2. The certification in this class is a material representation of fact upon which reliance was placed when this transaction was entered into. If it is later determined that the prospective recipient of federal assistance funds knowingly rendered an erroneous certification, in addition to other remedies available to the Federal Government, the Department of Labor (DOL) may pursue available remedies, including suspension and/or debarment.
3. The prospective recipient of federal assistance funds shall provide immediate written notice to the person to whom this certification is submitted if at any time the prospective recipient of federal assistance funds learns that its certification was erroneous when submitted or has become erroneous by reason of changed circumstances.
4. The terms "covered transaction," "debarred," "suspended," "ineligible," "lower tier covered transaction," "participant," "person," "primary covered transaction," "principal," "proposal," and "voluntarily exclude," as used in this clause, have the meanings set out in the Definitions and Coverage sections of rules implementing Executive Order 12549.
5. The prospective recipient of federal assistance funds agrees by submitting this certification that, should the proposed covered transaction be entered into, it shall not, knowingly enter into any lower tier covered transaction with a person who is debarred, suspended, declared ineligible, or voluntarily excluded from participation in this covered transaction, unless authorized by the DOL.

6. The prospective recipient of federal assistance funds further agrees by submitting this certification that it will include the clause titled "Certification Regarding Debarment, Suspension, Ineligibility and Voluntary Exclusion – Lower Tier Covered Transactions," without modification, in all lower tier covered transactions and in all solicitations for lower tier covered transactions.

7. A participant in a covered transaction may rely upon a certification of a prospective participant in a lower tier covered transaction that it is not debarred, suspended, ineligible, or voluntarily excluded from the covered transaction, unless it knows that the certification is erroneous. A participant may decide the method and frequency by which it determines the eligibility of its principals. Each participant may but is not required to check the List of Parties Excluded from Procurement or Nonprocurement Programs.

8. Nothing contained in the foregoing shall be construed to require establishment of a system of records in order to render in good faith the certification required by this clause. The knowledge and information of a participant is not required to exceed that which is normally possessed by a prudent person in the ordinary course of business dealings.

9. Except for transactions authorized under paragraph 5 of these instructions, if a participant in a covered transaction knowingly enters into a lower tier covered transaction with a person who is suspended, debarred, ineligible, or voluntarily excluded from participation in this transaction, in addition to other remedies available to the Federal Government, the DOL may pursue available remedies, including suspension and/or debarment.

Signature

Date

Name and Title of Authorized Representative

Telephone

Company Name

Street Address, City, State, Zip

APPENDIX B-17: CALIFORNIA CIVIL RIGHTS LAWS CERTIFICATION

Pursuant to Public Contract Code section 2010, if a Bidder or proposer executes or renews a contract over \$100,000 on or after January 1, 2017, the Bidder or proposer hereby certifies compliance with the following:

1. **CALIFORNIA CIVIL RIGHTS LAWS**: For contracts over \$100,000 executed or renewed after January 1, 2017, the contractor certifies compliance with the Unruh Civil Rights Act (Section 51 of the Civil Code) and the Fair Employment and Housing Act (Section 12960 of the Government Code); and

2. **EMPLOYER DISCRIMINATORY POLICIES**: For contracts over \$100,000 executed or renewed after January 1, 2017, if a Contractor has an internal policy against a sovereign nation or peoples recognized by the United States government, the Contractor certifies that such policies are not used in violation of the Unruh Civil Rights Act (Section 51 of the Civil Code) or the Fair Employment and Housing Act (Section 12960 of the Government Code).

CERTIFICATION

I, the official named below, certify under penalty of perjury under the laws of the State of California that the foregoing is true and correct. <i>Bidder Company Name (Printed)</i>		<i>Federal ID Number</i>
<i>By (Authorized Signature)</i>		
<i>Printed Name and Title of Person Signing</i>		
<i>Date Executed</i>	<i>Executed in the County and State of</i>	

**APPENDIX B-18: STATEMENT OF COMPLIANCE WITH SOW REQUIREMENTS
FORM**

STATEMENT OF WORK (SOW) by indicating "Yes" the Bidder confirms that it:

- Read the individual requirements within each section of the SOW identified below,
- Understands each individual requirement within each section of the SOW, and
- Agrees to comply with each individual requirement within each section of the SOW.

A blank or "No" answer in any row will be cause for the proposal to be deemed nonresponsive.

SOW Section	SOW Requirement Sections	Yes	No
1	Introduction & Organization		
2	Contractor Personnel Requirements		
3	Project Management Requirements		
4	System Change & Enhancements Requirements		
5	Program Support Requirements		
6	Operations Requirements		
7	Transition Requirements		
8	Deliverables Requirements		
Exhibit A	System Requirements Specification		

By signing this form, the Bidder also acknowledges that change requests will continue to be applied to CalHEERS during both the process of conducting this solicitation and the Transition Phase of the resultant Contract and agrees to take responsibility of, and comply with, all SOW & System requirements at the time the Incumbent Contractor rolls off the project or upon the request of the State Project Director or designee.

The Bidder shall complete and include this form in their response in accordance with RFP, Section 8, PROPOSAL FORMAT. Failure to sign this certification may result in the proposal being deemed nonresponsive.

Signature

Date

Name and Title of Authorized Representative

Telephone

Company Name

Street Address, City, State, Zip

APPENDIX B-19: BIDDER (COMPANY) QUALIFICATIONS INSTRUCTIONS & FORM

The following are instructions for the completion of Appendix B-19: BIDDER (COMPANY) QUALIFICATIONS INSTRUCTIONS & FORM.

The Bidder must list the mandatory experience needed for each requirement.

(1) Company Name:	Provide the name of the company submitting the proposal on RFP #73040873.
(2) MQ # & Company Mandatory Qualification (MQ)	The State has provided each Mandatory Qualification (MQ) # and requirement as identified in RFP, Section 6, BIDDER REQUIREMENTS.
(3) Project Details:	The Bidder must provide the details of the project being referenced to meet the mandatory qualification including, workplace, project name, project description, time period, and reference contact name. The reference contact must not be employed by this company, must have had supervisory or managerial responsibility for the Bidder's work on the project, and must be the individual identified in Appendix B-20: Bidder (Company) Reference Form.
(4) Experience:	The Bidder must describe their qualifying experience on the stated project.
(5) Total Duration:	The Bidder must provide the cumulative total duration of project experience, on a per MQ basis, as represented by the projects referenced.

Note: It is the Bidder's responsibility to ensure that each mandatory qualification is met in full and addressed in Appendix B-19: BIDDER (COMPANY) QUALIFICATIONS INSTRUCTIONS & FORM, so that the State can establish compliance. If the State cannot determine that the years of experience for each of the mandatory qualification has been met, the proposal may be deemed nonresponsive.

If the mandatory qualification indicates that the experience must be on a large and complex IT system, the Bidder and Reference must use the following attributes to qualify as a large and complex IT system:

- A solution that integrates at least two (2) applications, one of which is a COTS.
- A solution that interfaces with at least five (5) external systems, at least one (1) of which is real-time.
- A solution that is accessed by at least one thousand (1,000) users at multiple locations.
- A solution that has a dollar value of at least ten million (\$10,000,000) dollars.
- A solution that includes multi-tiered processing, including a consumer or user facing front-end optimized for multiple user interface platforms.

An example form has been provided:

Example Only

(1) Company Name:	Smith Company
(2) Bidder (Company) Mandatory Qualification # 1	
At least one (1) year of experience as the System Integrator (SI) on a health care eligibility or health care enrollment system that meets the definition of Large and Complex IT System, or at least one (1) year of experience as the prime contractor of Maintenance and Operations (M&O) on a health care eligibility or health care enrollment system that meets the definition of Large and Complex IT System.	
(3) Project #1	
Workplace:	State of XX
Project Name:	XYZ IT Project
Project Description:	Implementation of large IT Project
Applications:	2
COTS:	2
Interfaces:	3
Real-Time Interfaces:	1
Users:	10,000
Dollar Amount:	\$100,000,000
Multi-tiered processing (Y/N):	Y
Consumer or User Facing Front-end (Y/N):	Y
Start Date:	02/01/2012
Finish Date:	12/13/2014
Reference Contract Name:	John Smith
(4) Experience	
Experience as it relates to the MQ:	
(3) Project #2	
Workplace:	Company EDF
Project Name:	UVW IT Project
Project Description:	Implementation of large IT Project
Applications:	2
COTS:	2
Interfaces:	3
Real-Time Interfaces:	1

Users:	10,000
Dollar Amount:	\$100,000,000
Multi-tiered processing (Y/N):	Y
Consumer or User Facing Front-end (Y/N):	Y
Start Date:	02/01/2012
Finish Date:	12/13/2014
Reference Contact Name:	Rod Jones
(4) Experience	
Experience as it relates to the MQ:	
(3) Project #3	
Workplace:	Company EDF
Project Name:	UVW IT Project
Project Description:	Implementation of large IT Project
Applications:	2
COTS:	2
Interfaces:	3
Real-Time Interfaces:	1
Users:	10,000
Dollar Amount:	\$100,000,000
Multi-tiered processing (Y/N):	Y
Consumer or User Facing Front-end (Y/N):	Y
Start Date:	02/01/2012
Finish Date:	12/13/2014
Reference Contact Name:	Rod Jones
(4) Experience	
Experience as it relates to the MQ:	
Company EDF was the System Integrator (SI) for the implementation an ACA Health Benefit Exchange for Company EDF...	
(5) Total Duration:	8 years, 6 months

Appendix B-19: Bidder (Company) Qualifications Instructions & Form

Company Name:		
Bidder (Company) Mandatory Qualification # 1		
At least two (2) years of experience as the System Integrator (SI) on a health care eligibility or health care enrollment system that meets the definition of Large and Complex IT System, or at least two (2) years of experience as the prime contractor of Maintenance and Operations (M&O) on a health care eligibility or health care enrollment system that meets the definition of Large and Complex IT System.		
Project #1		
Workplace:		
Project Name:		
Project Description:		
Applications:		
COTS:		
Interfaces:		
Real-Time Interfaces:		
Users:		
Dollar Amount:		
Multi-tiered processing (Y/N):		
Consumer or User Facing Front-end (Y/N):		
Start Date:		
Finish Date:		
Reference Contact Name:		
Experience		
Experience as it relates to the MQ:		
Project #2		
Workplace:		
Project Name:		
Project Description:		
Applications:		
COTS:		
Interfaces:		
Real-Time Interfaces:		

Forms

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Users:	
Dollar Amount:	
Multi-tiered processing (Y/N):	
Consumer or User Facing Front-end (Y/N):	
Start Date:	
Finish Date:	
Reference Contact Name:	
Experience	
Experience as it relates to the MQ:	
Project #3	
Workplace:	
Project Name:	
Project Description:	
Applications:	
COTS:	
Interfaces:	
Real-Time Interfaces:	
Users:	
Dollar Amount:	
Multi-tiered processing (Y/N):	
Consumer or User Facing Front-end (Y/N):	
Start Date:	
Finish Date:	
Reference Contact Name:	
Experience	
Experience as it relates to the MQ:	
Total Duration:	

Company Name:		
Bidder (Company) Mandatory Qualification # 2		
Experience with the implementation of two (2) projects involving Large and Complex IT Systems, one (1) of the projects having been on a health care eligibility or health care enrollment system. Each of the two (2) projects must have occurred within the last ten (10) years.		
Project #1		
Workplace:		
Project Name:		
Project Description:		
Applications:		
COTS:		
Interfaces:		
Real-Time Interfaces:		
Users:		
Dollar Amount:		
Multi-tiered processing (Y/N):		
Consumer or User Facing Front-end (Y/N):		
Start Date:		
Finish Date:		
Reference Contact Name:		
Experience		
Experience as it relates to the MQ:		
Project #2		
Workplace:		
Project Name:		
Project Description:		
Applications:		
COTS:		
Interfaces:		
Real-Time Interfaces:		
Users:		
Dollar Amount:		

Forms

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Multi-tiered processing (Y/N):	
Consumer or User Facing Front-end (Y/N):	
Start Date:	
Finish Date:	
Reference Contact Name:	
Experience	
Experience as it relates to the MQ:	
Project #3	
Workplace:	
Project Name:	
Project Description:	
Applications:	
COTS:	
Interfaces:	
Real-Time Interfaces:	
Users:	
Dollar Amount:	
Multi-tiered processing (Y/N):	
Consumer or User Facing Front-end (Y/N):	
Start Date:	
Finish Date:	
Reference Contact Name:	
Experience	
Experience as it relates to the MQ:	
Total Duration:	

Company Name:	
Bidder (Company) Mandatory Qualification # 3	
Experience performing maintenance and system modifications on two (2) projects involving Large and Complex IT Systems, with one (1) of the projects having been on a health care eligibility or health care enrollment system. Each of the two (2) projects must have occurred within the last ten (10) years.	
Project #1	
Workplace:	
Project Name:	
Project Description:	
Applications:	
COTS:	
Interfaces:	
Real-Time Interfaces:	
Users:	
Dollar Amount:	
Multi-tiered processing (Y/N):	
Consumer or User Facing Front-end (Y/N):	
Start Date:	
Finish Date:	
Reference Contact Name:	
Experience	
Experience as it relates to the MQ:	
Project #2	
Workplace:	
Project Name:	
Project Description:	
Applications:	
COTS:	
Interfaces:	
Real-Time Interfaces:	
Users:	

Forms

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<i>Dollar Amount:</i>	
<i>Multi-tiered processing (Y/N):</i>	
<i>Consumer or User Facing Front-end (Y/N):</i>	
<i>Start Date:</i>	
<i>Finish Date:</i>	
<i>Reference Contact Name:</i>	
Experience	
<i>Experience as it relates to the MQ:</i>	
Project #3	
<i>Workplace:</i>	
<i>Project Name:</i>	
<i>Project Description:</i>	
<i>Applications:</i>	
<i>COTS:</i>	
<i>Interfaces:</i>	
<i>Real-Time Interfaces:</i>	
<i>Users:</i>	
<i>Dollar Amount:</i>	
<i>Multi-tiered processing (Y/N):</i>	
<i>Consumer or User Facing Front-end (Y/N):</i>	
<i>Start Date:</i>	
<i>Finish Date:</i>	
<i>Reference Contact Name:</i>	
Experience	
<i>Experience as it relates to the MQ:</i>	
<i>Total Duration:</i>	

Company Name:	
Bidder (Company) Mandatory Qualification # 4	
Experience performing operational activities including system engineering, capacity planning, performance testing, performance monitoring, batch processing, and system modifications on two (2) projects involving Large and Complex IT Systems hosted in the cloud. Each of the two (2) projects must have occurred within the last ten (10) years.	
Project #1	
Workplace:	
Project Name:	
Project Description:	
Applications:	
COTS:	
Interfaces:	
Real-Time Interfaces:	
Users:	
Dollar Amount:	
Multi-tiered processing (Y/N):	
Consumer or User Facing Front-end (Y/N):	
Start Date:	
Finish Date:	
Reference Contact Name:	
Experience	
Experience as it relates to the MQ:	
Project #2	
Workplace:	
Project Name:	
Project Description:	
Applications:	
COTS:	
Interfaces:	
Real-Time Interfaces:	
Users:	

Forms

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Dollar Amount:	
Multi-tiered processing (Y/N):	
Consumer or User Facing Front-end (Y/N):	
Start Date:	
Finish Date:	
Reference Contact Name:	
Experience	
Experience as it relates to the MQ:	
Project #3	
Workplace:	
Project Name:	
Project Description:	
Applications:	
COTS:	
Interfaces:	
Real-Time Interfaces:	
Users:	
Dollar Amount:	
Multi-tiered processing (Y/N):	
Consumer or User Facing Front-end (Y/N):	
Start Date:	
Finish Date:	
Reference Contact Name:	
Experience	
Experience as it relates to the MQ:	
Total Duration:	

Company Name:	
Bidder (Company) Mandatory Qualification # 5	
Experience providing service desk activities on two (2) projects involving Large and Complex IT Systems using Information Technology Infrastructure Library (ITIL) standards and framework, one (1) of the projects having been on a health care eligibility or health care enrollment system. Each of the two (2) projects must have occurred within the last ten (10) years.	
Project #1	
Workplace:	
Project Name:	
Project Description:	
Applications:	
COTS:	
Interfaces:	
Real-Time Interfaces:	
Users:	
Dollar Amount:	
Multi-tiered processing (Y/N):	
Consumer or User Facing Front-end (Y/N):	
Start Date:	
Finish Date:	
Reference Contact Name:	
Experience	
Experience as it relates to the MQ:	
Project #2	
Workplace:	
Project Name:	
Project Description:	
Applications:	
COTS:	
Interfaces:	
Real-Time Interfaces:	
Users:	

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<i>Dollar Amount:</i>	
<i>Multi-tiered processing (Y/N):</i>	
<i>Consumer or User Facing Front-end (Y/N):</i>	
<i>Start Date:</i>	
<i>Finish Date:</i>	
<i>Reference Contact Name:</i>	
Experience	
<i>Experience as it relates to the MQ:</i>	
Project #3	
<i>Workplace:</i>	
<i>Project Name:</i>	
<i>Project Description:</i>	
<i>Applications:</i>	
<i>COTS:</i>	
<i>Interfaces:</i>	
<i>Real-Time Interfaces:</i>	
<i>Users:</i>	
<i>Dollar Amount:</i>	
<i>Multi-tiered processing (Y/N):</i>	
<i>Consumer or User Facing Front-end (Y/N):</i>	
<i>Start Date:</i>	
<i>Finish Date:</i>	
<i>Reference Contact Name:</i>	
Experience	
<i>Experience as it relates to the MQ:</i>	
<i>Total Duration:</i>	

Company Name:		
Bidder (Company) Mandatory Qualification # 6		
Experience with the transition of one (1) project, involving a Large and Complex IT System, from one company to another. The project must have occurred within the last ten (10) years.		
Project #1		
Workplace:		
Project Name:		
Project Description:		
Applications:		
COTS:		
Interfaces:		
Real-Time Interfaces:		
Users:		
Dollar Amount:		
Multi-tiered processing (Y/N):		
Consumer or User Facing Front-end (Y/N):		
Start Date:		
Finish Date:		
Reference Contact Name:		
Experience		
Experience as it relates to the MQ:		
Project #2		
Workplace:		
Project Name:		
Project Description:		
Applications:		
COTS:		
Interfaces:		
Real-Time Interfaces:		
Users:		
Dollar Amount:		

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Multi-tiered processing (Y/N):	
Consumer or User Facing Front-end (Y/N):	
Start Date:	
Finish Date:	
Reference Contact Name:	
Experience	
Experience as it relates to the MQ:	
Project #3	
Workplace:	
Project Name:	
Project Description:	
Applications:	
COTS:	
Interfaces:	
Real-Time Interfaces:	
Users:	
Dollar Amount:	
Multi-tiered processing (Y/N):	
Consumer or User Facing Front-end (Y/N):	
Start Date:	
Finish Date:	
Reference Contact Name:	
Experience	
Experience as it relates to the MQ:	
Total Duration:	

Company Name:	
Bidder (Company) Mandatory Qualification # 7	
Experience with the implementation and utilization of both Artificial Intelligence (AI) and Generative Artificial Intelligence (GenAI) on two (2) projects involving Large and Complex IT Systems, with one (1) of the projects having been on a health and human services system. Each of the two (2) projects must have occurred within the last five (5) years.	
Project #1	
Workplace:	
Project Name:	
Project Description:	
Applications:	
COTS:	
Interfaces:	
Real-Time Interfaces:	
Users:	
Dollar Amount:	
Multi-tiered processing (Y/N):	
Consumer or User Facing Front-end (Y/N):	
Start Date:	
Finish Date:	
Reference Contact Name:	
Experience	
Experience as it relates to the MQ:	
Project #2	
Workplace:	
Project Name:	
Project Description:	
Applications:	
COTS:	
Interfaces:	
Real-Time Interfaces:	
Users:	

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<i>Dollar Amount:</i>	
<i>Multi-tiered processing (Y/N):</i>	
<i>Consumer or User Facing Front-end (Y/N):</i>	
<i>Start Date:</i>	
<i>Finish Date:</i>	
<i>Reference Contact Name:</i>	
Experience	
<i>Experience as it relates to the MQ:</i>	
Project #3	
<i>Workplace:</i>	
<i>Project Name:</i>	
<i>Project Description:</i>	
<i>Applications:</i>	
<i>COTS:</i>	
<i>Interfaces:</i>	
<i>Real-Time Interfaces:</i>	
<i>Users:</i>	
<i>Dollar Amount:</i>	
<i>Multi-tiered processing (Y/N):</i>	
<i>Consumer or User Facing Front-end (Y/N):</i>	
<i>Start Date:</i>	
<i>Finish Date:</i>	
<i>Reference Contact Name:</i>	
Experience	
<i>Experience as it relates to the MQ:</i>	
Total Duration:	

Company Name:	
Bidder (Company) Mandatory Qualification # 8	
Experience with execution of the complete implementation lifecycle for newly emerging technologies, including identification, ideation, strategizing, to implementation, on two (2) projects involving Large and Complex IT Systems using Information Technology Infrastructure Library (ITIL) standards and framework, one (1) of the projects having been on a health care eligibility or health care enrollment system.	
Project #1	
Workplace:	
Project Name:	
Project Description:	
Applications:	
COTS:	
Interfaces:	
Real-Time Interfaces:	
Users:	
Dollar Amount:	
Multi-tiered processing (Y/N):	
Consumer or User Facing Front-end (Y/N):	
Start Date:	
Finish Date:	
Reference Contact Name:	
Experience	
Experience as it relates to the MQ:	
Project #2	
Workplace:	
Project Name:	
Project Description:	
Applications:	
COTS:	
Interfaces:	
Real-Time Interfaces:	
Users:	

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<i>Dollar Amount:</i>	
<i>Multi-tiered processing (Y/N):</i>	
<i>Consumer or User Facing Front-end (Y/N):</i>	
<i>Start Date:</i>	
<i>Finish Date:</i>	
<i>Reference Contact Name:</i>	
Experience	
<i>Experience as it relates to the MQ:</i>	
Project #3	
<i>Workplace:</i>	
<i>Project Name:</i>	
<i>Project Description:</i>	
<i>Applications:</i>	
<i>COTS:</i>	
<i>Interfaces:</i>	
<i>Real-Time Interfaces:</i>	
<i>Users:</i>	
<i>Dollar Amount:</i>	
<i>Multi-tiered processing (Y/N):</i>	
<i>Consumer or User Facing Front-end (Y/N):</i>	
<i>Start Date:</i>	
<i>Finish Date:</i>	
<i>Reference Contact Name:</i>	
Experience	
<i>Experience as it relates to the MQ:</i>	
Total Duration:	

APPENDIX B-20: BIDDER (COMPANY) REFERENCE FORM, INSTRUCTIONS (PART 1 OF 2)**NAME OF COMPANY REQUESTING THE REFERENCE CHECK:****"Type Firm Name Here"**

The company above has listed you as a reference and is requesting that you complete this Bidder (Company) Reference Form.

INSTRUCTIONS FOR COMPLETING THE REFERENCE FORM:

Step 1: In Table 1, the Bidder (Company) has provided the Reference information, please verify that this is correct.

Step 2: In Table 2, complete Columns 1, 2, and 3 by marking "Yes" or "No" and providing an explanation if needed.

Step 3: In Table 3, complete Column 2 by utilizing the description of points provided in the table header.

Step 4: At the bottom of the page, print your name, your company's name, then sign and date.

Step 5: Return the completed Bidder (Company) Reference Form to the Bidder.

TABLE 1 – Reference's Information This information should match the information provided in Appendix B-19, Bidder (Company) Qualifications Instructions & Form	
Reference Contact Name:	
Reference Company Name:	
Reference Company Address:	
Reference Telephone Number:	
Reference Email Address:	

TABLE 2 – The Reference must complete Columns 1, 2, and 3.		
COLUMN 1	COLUMN 2	COLUMN 3
Did the Bidder/Company provide you with a copy of the completed Appendix B-19, Bidder (Company) Qualifications Instructions & Form, prior to your completion of this form?	Did the Bidder/Company named at the top of this page perform the services described in Appendix B-19, Bidder (Company) Qualifications Instructions & Form (including the functions as described and the time period provided)?	During this specific project, I was in a managerial or supervisory role that had oversight over this company?
☐ Yes ☐ No* *(Add explanation here, if needed)	☐ Yes ☐ No* *(Add explanation here, if needed)	☐ Yes ☐ No* *(Add explanation here, if needed)

**APPENDIX B-20: BIDDER (COMPANY) REFERENCE FORM, INSTRUCTIONS (PART
2 OF 2)**

TABLE 3 – The Reference must complete Column 2.	
The Reference shall rate the Bidder/Company's performance and abilities by entering a rating value (in Column 2) for each corresponding Performance and Ability Statement (listed in Column 1). 3 points = Excellent. The Bidder/Company's performance was above average during this engagement. 2 points = Good. The Bidder/Company's performance was average during this engagement. 1 point = Poor. The Bidder/Company's performance was below average during this engagement. 0 points = No Value. The Bidder/Company's performance was unsatisfactory during this engagement.	
COLUMN 1	COLUMN 2
Performance and Ability Statements	Points Value: 3 points = Excellent 2 points = Good 1 point = Poor 0 points = No Value
The Bidder/Company provided qualified individual(s).	
The Bidder/Company resolved issues in a timely manner.	
The Bidder/Company completed the Project on time.	
The Bidder/Company completed the Project within budget.	
What was your overall satisfaction with the Bidder/Company?	
TOTAL POINTS FOR ALL STATEMENTS:	

By signing this form, the Reference is certifying that all information provided on this form is correct.

Reference Signature: _____ Date: _____

Printed Name: _____

Reference Project Role: _____

Reference Email: _____ Reference Phone: _____

APPENDIX B-21: KEY STAFF QUALIFICATIONS INSTRUCTIONS

The following are instructions for the completion of Appendix B-22, KEY STAFF QUALIFICATIONS FORM. The Bidder must list the mandatory experience needed to meet each Mandatory Qualification requirement. Additionally, the Bidder must list the experience needed to meet any Desirable Qualification requirement the bidder chooses to respond to. The Bidder must complete Appendix B-22, KEY STAFF QUALIFICATIONS FORM, for each Key Staff outlined in RFP Section 6.3.1, BIDDER KEY STAFF QUALIFICATION REQUIREMENTS. A separate KEY STAFF QUALIFICATIONS FORM will be required for each Mandatory or Desirable Qualification requirement, for each Key Staff position.

(1) Key Staff Position = The Bidder must enter the Key Staff position.

(2) Bidder Name = The Bidder must enter their Company Name.

(3) Proposed Individual's Name = The Bidder must enter the name of the Key Staff being proposed.

(4) Mandatory Qualification (MQ) Requirement # = The Bidder must enter the Mandatory or Desirable Qualification Requirement #.

(5) Mandatory Qualification Requirement = The Bidder must enter the Mandatory or Desirable Qualification Requirement text, as identified in RFP Section 6.3.1, BIDDER KEY STAFF QUALIFICATION REQUIREMENTS, outlined in Table 6-8.

(6) Project Information = The Bidder must provide details of the project(s) being used to meet the experience required within the mandatory qualification requirement. The Bidder must also provide the Reference Contact Name for a reference that can validate the relevant experience. The reference must be external to the Bidder's organization and must have had a managerial or supervisory responsibility for over the Proposed Individual's work on the project.

(7) Role & Relevant Experience = The Bidder must provide the role they played on the related project and a description of experience being used to meet the mandatory qualification.

(8) Total Duration = The Bidder must provide the total, cumulative duration worked across all the projects referenced to meet the MQ Requirement, taking into consideration the identified Percentage of Time(s) information.

Note: If a mandatory qualification requirement calls for the bidder to submit a certification (e.g., PMP or CSSIP), the Bidder shall include that certification directly following the B-22 form in their proposal.

EXAMPLE ONLY

(1) Key Staff Position:	Enterprise Architecture Manager	
(2) Company Name:	Company ABC	
(3) Proposed Individual's Name:	John Smith	
(4) Mandatory/Desirable Qualification #:	6.3.1-1	
(5) Mandatory/Desirable Qualification:	The Project Manager shall have a minimum of five (5) years' experience within the past ten (10) years, supervising teams of fifty (50) people or greater on projects that involved Large and Complex IT Systems.	
(6) Project #1		
Company Name:	Company ABC	
Project Name:	XYZ IT Project	
# of System End Users:	10,000	
# of Integrated Applications:	3	

# of COTS Integrated:	2
# of External System interfaces:	8
# of Real-time Interfaces:	2
System Value (\$):	\$ 100,000,000
Multi-tiered processing (Y/N):	Y
Consumer or User Facing Front-end (Y/N):	Y
Start/Finish Dates:	01/01/2011 - 12/31/2016
Percentage of time:	100%
Reference Contact Name:	Rod Jones
(7) Relevant Experience	
Role:	Enterprise Architecture Manager
Description of relevant experience:	Mr. Smith worked on a project tasked that developed widgets. As an Enterprise Architecture manager, Mr. Smith established and used a coherent set of guidelines, architecture principles and governance regimes that provide direction in the design and development of an enterprise's architecture.
Project #2	
Company Name:	
Project Name:	
# of System End Users:	
# of Integrated Applications:	
# of COTS Integrated:	
# of External System interfaces:	
# of Real-time Interfaces:	
System Value (\$):	
Multi-tiered processing (Y/N):	
Consumer or User Facing Front-end (Y/N):	
Start/Finish Dates:	
Percentage of time:	
Reference Contact Name:	
Experience	
Role:	
Description of relevant experience:	

Project #3	
Company Name:	
Project Name:	
# of System End Users:	
# of Integrated Applications:	
# of COTS Integrated:	
# of External System interfaces:	
# of Real-time Interfaces:	
System Value (\$):	
Multi-tiered processing (Y/N):	
Consumer or User Facing Front-end (Y/N):	
Start/Finish Dates:	
Percentage of time:	
Reference Contact Name:	
Experience	
Role:	
Description of relevant experience:	
(8) Total Duration:	

APPENDIX B-22: KEY STAFF QUALIFICATIONS FORM

(1) Key Staff Position:		
(2) Company Name:		
(3) Proposed Individual's Name:		
(4) Mandatory/Desirable Qualification #:		
(5) Mandatory/Desirable Qualification:		
(6) Project #1		
Company Name:		
Project Name:		
# of System End Users:		
# of Integrated Applications:		
# of COTS Integrated:		
# of External System interfaces:		
# of Real-time Interfaces:		
System Value (\$):		
Multi-tiered processing (Y/N):		
Consumer or User Facing Front-end (Y/N):		
Start/Finish Dates:		
Percentage of time:		
Reference Contact Name:		
(7) Relevant Experience		
Role:		
Description of relevant experience:		
Project #2		
Company Name:		
Project Name:		
# of System End Users:		
# of Integrated Applications:		
# of COTS Integrated:		

# of External System interfaces:	
# of Real-time Interfaces:	
System Value (\$):	
Multi-tiered processing (Y/N):	
Consumer or User Facing Front-end (Y/N):	
Start/Finish Dates:	
Percentage of time:	
Reference Contact Name:	
Experience	
Role:	
Description of relevant experience:	
Project #3	
Company Name:	
Project Name:	
# of System End Users:	
# of Integrated Applications:	
# of COTS Integrated:	
# of External System interfaces:	
# of Real-time Interfaces:	
System Value (\$):	
Multi-tiered processing (Y/N):	
Consumer or User Facing Front-end (Y/N):	
Start/Finish Dates:	
Percentage of time:	
Reference Contact Name:	
Experience	
Role:	
Description of relevant experience:	
(8) Total Duration:	

APPENDIX B-23: STAFF REFERENCE FORM (PART 1 OF 2)**STAFF REFERENCE COMPANY'S NAME: "Type Firm Name Here"**

The company above has listed you as a reference and is requesting that you complete this Staff Reference Form for a competitive proposal. Returning this form is a crucial element to the proposal and failure to return the form could cause the Bidder company to be disqualified from the proposal.

REFERENCE INSTRUCTIONS:

Step 1: Complete Table 1, enter all the requested information.

Step 2: Complete Table 2, columns 1, 2, and 3 by marking "Yes" or "No" and providing an explanation if needed.

Step 3: Review Table 3, Description of Point Values, to be used for the completion of Table 4.

Step 4: Complete Table 4 by rating the Staff person.

Step 5: At the bottom of the page, print your name, your company's name, then sign and date.

Step 6: Return the completed Staff Reference Form to the Bidder Appendix B-23: Staff Reference Form

PROPOSED STAFF'S NAME: "Type Your Proposed Staff's Name Here"**PROPOSED KEY STAFF POSITION: _____**

Table 1 – Reference Information	
This information should match that provided in the Staff Qualifications Form.	
Reference Contact Name:	
Reference Company Name:	
Reference Telephone Number:	
Reference Email Address:	
Work Relation:	

Table 2 – The Reference must complete this table.		
COLUMN 1	COLUMN 2	COLUMN 3
Did the Bidder Company provide you with a copy of the completed Staff Qualifications Form for the proposed Staff named at the top of this page prior to your completion of this form?	Did the Bidder Company named at the top of this page perform the services described in Staff Qualifications Form (including the functions as described and the time period provided)?	During this specific project, I was in a managerial or supervisory role that had oversight over this individual.
☐ Yes ☐ No*	☐ Yes ☐ No*	☐ Yes ☐ No*
*(Add explanation here, if needed)	*(Add explanation here, if needed)	*(Add explanation here, if needed)

APPENDIX B-23: STAFF REFERENCE FORM (PART 2 OF 2)

TABLE 3 – Descriptions of Points Values	
Points Value	Description
Excellent = 2 points	The performance and abilities of the Staff was above average during this engagement.
Good = 1 point	The performance and abilities of the Staff was average during this engagement.
Poor , N/A or No Value = 0 points	The performance and abilities of the Staff was unsatisfactory during this engagement.

TABLE 4 – The Reference must complete this table. The Reference shall rate the Staff performance and abilities by entering a rating value (in Column 2) for each corresponding Performance and Ability Statement (listed in Column 1).	
COLUMN 1	COLUMN 2
Performance and Ability Statements	Points Value: Excellent = 2 points Good = 1 points Poor, N/A, = 0 points No Value
Rate the performance of the Staff during this engagement.	
Rate the ability of the Staff to perform the contractually, required work in a timely manner.	
Rate the verbal and written communication skills of the Staff.	
Rate the ability of the Staff to engage in positive working relationships with other coworkers.	
Rate the knowledge of the Staff in the required areas of expertise.	
TOTAL POINTS FOR ALL STATEMENTS:	

By signing this Form, the Reference is certifying that all information provided on this form is correct.

Name of Reference Contact (print): _____

Name of Company Reference (print): _____

Signature of Reference Contact: _____

Date: _____

APPENDIX B-24: CALHEERS ARTIFICIAL INTELLIGENCE RISK ASSESSMENT FORM

ATTACH A COPY OF THE BIDDER'S CALHEERS ARTIFICIAL INTELLIGENCE RISK
ASSESSMENT FORM.

Refer to the Bidders' Library to obtain a copy of the appropriate form.

Appendix C Glossary

APPENDIX C – GLOSSARY

The following terms and acronyms strictly pertain to the RFP and Contract and do not encompass the Project Glossary as a whole.

1 ACRONYMS

A/R	Applicant and/or Recipient
AB	Assembly Bill
ABE	Accenture Billing Engine
AC	Access Control
ACA	Affordable Care Act
ACD	Automatic Call Distribution
ACF	Administration for Children and Families
ACH	Automated Clearing House
ACL	Access Control List
ACN	Accenture, LLP
ACO	Accountable Care Organization
AD	Active Directory
ADA	Americans with Disabilities Act
ADDIE	Analysis, Design, Development, Implement and Evaluate
ADKAR	Awareness, Desire, Knowledge, Ability, Reinforcement Methodology
Admin	Administrator
AE	Administering Entity
AE	Administering Exchange
AES	Advanced Encryption Standard
AFDC	Aid to Families with Dependent Children Program
AHRQ	Agency for Healthcare Research and Quality
AHT	Average Handle Time
AI	Action Item
AIDS	Acquired Immunodeficiency Virus
AIIM	Association for Information and Image Management
AIM	Access for Infants and Mothers
AJAX	Asynchronous JavaScript and XML
ALJ	Administrative Law Judge.
ALM	Application Lifecycle Management
Alt	Alt
AMAG	AMAG Technology Group
AMS	Asset Management System
ANSI	American National Standards Institute
AO	Application Outsourcing
AOA	Annual Operational Assessment
APAS	Advance Premium Assistance Subsidy
APD	Advanced Planning Document
API	Application Programming Interface
AppDev	Application Development
A-PT	Action Phase Topic
APTC	Advanced Premium Tax Credit

AR	Architecture Review
AR	Authorized Representative (Individual)
ARB	Architectural Review Board
ARC-AMPE	Acceptable Risk Controls for ACA, Medicaid, and Partner Entities
ASB	Auditing Standards Board
ASC	Accredited Standards Committee
ASCII	American Standard Code for Information Interchange
ATIN	Adoption Taxpayer Identification Number
ATM	Automated Teller Machines
ATO	Authorization to Operate
AV	Actuarial Value
AW	Administration Workstation
AWS	Amazon Web Services
BA	Business Analyst
BABOK	Business Analyst's Body of Knowledge
BAC	Budget at Completion
BAFO	Best and Final Offer
BC	Business Continuity
BC/DR	Business Continuity/Disaster Recovery
BCM	Business Change Management
BCM	Business Continuity Management
BCMP	Business Continuity Management Program
BCP	Business Continuity Plan
BDC	Backup Data Center
BE	Business Engine
BHP	Basic Health Plan
BI	Business Information
BI	Business Intelligence
BIC	Benefits Identification Card
BIDS	Business Intelligence Development Studio
BMC	Boulette, Moores, Cloers
BO	Business Objects
BOB	Board Options Brief
BOE	Basis Of Estimate
BOM	Bill of Materials
BP	Basic Profile
BPC	Business and Professions Code
BPEL	Business Process Execution Language
BPI	Business Process Improvement
BPM	Business Process Management
BPM	Business Process Model
BPMN	Business Process Modeling Notation
BPMS	Business Process Management System
BPR	Business Process Reengineering
BR1	Business Rule #1

BR	Business Requirement
BRE	Business Rules Engine (resides within CalHEERS-HBX)
BREfS	Business Rules Exposure for SAWS
BRMS	Business Rules Management System
BSD	Business Service Definition/Description
BVI	Blind or Visually Impaired
BVT	Business Validation Template
C&A	Certification & Accreditation
CA	California
CA	Certificate Authority
CA	Computer Associates
CAB	Change Advisory Board
CAHPS	Consumer Assessment of Health Care Providers and Systems
Cal	California
CAL	Client Access Line
CALEXT	California Extensions
CalFresh	California EBT/food stamps
CalHEERS	California Healthcare Eligibility, Enrollment, and Retention System
CalNOD	CalHEERS Notice of Design
CalSTARS	California State Accounting and Reporting System
CalWIN	California Work Opportunity and Responsibility to Kids Information Network
CAIWORKs	California Work Opportunity and Responsibility to Kids
CA-MMIS	California Medicaid Management Information System
CAP	Consumer Assistance Programs
CAP	Corrective Action Plan
CAPS	California Advance Premium Subsidy
CBAP	Certified Business Analysis Professional
CBT	Computer-based Training
CC	Covered California
CCA	Covered California
CCB	Change Control Board
CCHCS	California Correctional Health Care Services
CCHIP	County Children's Health Initiative Program
CCIIO	Center for Consumer Information and Insurance Oversight
CCMP	Contract Change Management Process
CCN	Case Control Number
CCP	Common Checkout Page
CCP	Covered California Plan
CCP	Consumer Protection Programs
CCR	Change Control Request
CCS	California Children's Services
CCSAS	California Child Support Automation System

CCU	Covered California University
CD	Compact Disk
CD	Configuration Design
CDB	Capacity Database
CDCR	California Department of Corrections and Rehabilitation
CDI	California Department of Insurance
CDN	Content Delivery Network
CDTFA	California Department of Tax and Fee Administration
CDP	Client Data Protection
CDS:EWC	Cancer Detection Section – Every Woman Counts
CDSS	California Department of Social Services
CDTFA	California Department of Tax & Fee Administration
CE	Continuous Enrollment
CEC	Certified Enrollment Counselor
CEE	Certified Enrollment Entity
CEW	County Eligibility Worker
CFACS	Centers for Medicare and Medicaid (CMS) Federal Information Security Management Act (FISMA) Controls Tracking System
CFO	Chief Financial Officer
CFR	Code of Federal Regulations
CFS	Carry Forward Status
CG	Center of Gravity
CG	Companion Guides
CHDP	Child Health and Disability Prevention Program
Chg	Change
CalHHS	California Health and Human Services
CHIP	California Health Insurance Program
CHIP	Children’s Health Insurance Program
CHIPRA	Childrens Health Insurance Program Reauthorization Act
CI	Configuration Item
CIN	Client Index Number
CIN	Customer Index Number
CIO	Chief Information Office
CIS	Customer Information System
CISO	California Information Security Officer
CISSP	Certified Information Systems Security Professional
CIT	CalHEERS Information Transmittal
CIT	Carrier Integration Testing
CIT	Carrier Interface Testing
CIT	County Information Transmittal
CM	Change Management
CM	Configuration Management
CMCS	Center for Medicaid and CHIP Services
CMDB	Configuration Management Database

CMI	Current Monthly Income
CMIPS	Case Management Information and Payrolling System
CMMI	Capability Maturity Model Integration
CMP	Change Management Process
CMS	Center for Medicare and Medicaid Services
CMS ELC	Centers for Medicare and Medicaid Services Exchange Life Cycle Model
CMSFDSH	Centers for Medicare & Medicaid Services Federal Data Services Hub
CMSR	CMS Minimum Security Requirements
CMT	Crisis Management Team
COB	Coordination of Benefits
CobIT	Control Objectives for IT
COBRA	Consolidated Omnibus Budget Reconciliation Act
COLA	Cost of Living Adjustment
COM	Component Object Model
COMs	CalSTARS Operations Memos
COO	Chief Operations Officer
CORBA	Common Object Request Broker Architecture
COTS	Commercial Off the Shelf
COVID	Corona Virus Disease
CP	Certificate Policies
CP	Critical Path
CPI	Continuous Process Improvement
CPM	CalSTARS Procedures Manual
CPPACA	California Patient Protection and Affordable Care Act
CPRA	California Public Records Act
CPU	Central Processing Unit
CR	Change Request
CRFI	CalHEERS Request for Information
CRM	Customer Relationship Management
CRP	Change Readiness Plan
CRT	Customer Resolution Team
CRUD	Create-Read-Update-Delete
CSB	CalHEERS Service Bus
CSC	Customer Service Center
CSDD	COTS Software Design Description
CSR	Client Service Reporting
CSR	Cost Sharing Reductions
CSR	Customer Service Request
CSS	Cascading Style Sheets
CSV	Comma Separated Value (file)
CT	Cancel/Term
CTA	California Technology Agency
CTI	Computer Telephony Integration
CTIOS	Computer Telephony Integration Object Server

CTO	Chief Technology Officer
CUETA	California Uniform Electronic Transactions Act
CUF	Commercially Useful Function
CW	County Worker
CWDA	County Welfare Directors Association (of California)
CWS	Child Welfare Services
CWS/CMS	Child Welfare Services/Case Management Services
DAM	Database Activity Monitoring
DB/Db	Database
DBA	Database Administration/Administrator
DBL WDO	Double Window
DC	Data Center
DCOM	Distributed Component Object Model ()
DCR	Design Change Request
DCT	Data Conversion Tool (DCT)
DDD	Database Design Description
DDEL	Draft Deliverable
DDR	Detailed Design Review
DDS	Distributed Data Server
DED	Deliverable Expectations Document
DEL	Deliverable
DEPO	Dental Exclusive Provider Organization
DER	Determination Eligibility Response
DER-U	Determination of Eligibility Response - Unsolicited
DEX	Data Exchange File
DFD	Data Flow Diagram
DGS	Department of General Services
DHCS	Department of Health Care Services
DHHS	United States Department of Health and Human Services
DHS	Department of Homeland Security
DI	Decision Item
DI	Disability Insurance
DIV	Dividends
DIVS	Document Imaging Verification System
DLP	Data Loss Protection
DM	Document Management
DMHC	Department of Managed Health Care
DMS	Data Management Strategy
DNS	Domain Name Service
DOB	Date of Birth
DoD	Department of Defense
DOF	Department of Finance
DOL	Department of Labor
DOR	Department of Revenue
DP	Decision Point (DP)

DPPO	Dental Preferred Provider Organization
DR	Disaster Recovery
DRT	Disaster Recovery Tools
DRT	Dry Run Testing
DSD	Detailed System Design
DSS	Department of Social Services
DUA	Data User Agreement
DVBE	Disabled Veteran Business Enterprise
DVD	Digital Versatile Disc
DW	Data Warehouse/Data Warehousing
EA	Enterprise Architect
EAP	Enrollment Assistance Program
EAS	Enterprise Health Analytics Solution project. See Truven.
EBT	Electronic Benefits Transfer
ECAIR	Enterprise Customer, Asset, Income and Return
ECDM	CMS Enterprise Canonical Data Model
ECM	Enterprise Case Management
ECP	Eligibility Case Period
ED	Eligibility Determination
EDBC	Eligibility Determination and Benefits Calculation
EDD	Employment Development Department
EDER	Eligibility Data Eligibility Record
EDI	Electronic Data Interface
EDR	Eligibility Determination Request
EDR	Enterprise Data to Revenue
EDR-C	Eligibility Determination Request-Companion
EDW	Enterprise Data Warehouse
EF	Expedited Forwarding
EFT	Electronic Fund Transfer
EFT	Enterprise File Transfer
eHIT	Electronic Health Information Transfer
eICT	Electronic Inter-County Transfer
EKM	Encryption Key Manager
ELC	Exchange Life Cycle
EOB	Explanation of Benefits
EOC	Evidence of Coverage
EPAL	Enterprise Privacy Authorization Language
EPO	Exclusive Provider Organization
ERA	Eligibility Reference Architecture
ERA	Exchange Reference Architecture
ERD	Entity Relationship Diagram
ERISA	Employee Retirement Income Security Act (29 U.S.C. section 1001, et seq.)
ESC	Executive Steering Committee
ESI	Employee Sponsored Insurance
ETL	Extract, Transform, Load

EULA	End User License Agreement
EV	Earned Value
EW	Eligibility Workers
EWC	Every Woman Counts
EWM	Engineering Workflow Management
Exh	Exhibit
FAQ	Frequently Asked Questions
FAR	Federal Acquisition Regulation
FARS	Fraud Archive Reporting System
FDD	Functional Design Document or Functional Design Definitions
FDDR	Final Detailed Design Review
FDGS	First Data Government Solutions
FDH	Federal Data Hub
FDSH	Federal Data Service Hub
FF	Federal Function
FFE	Federally Facilitated Exchange
FFM	Federally Facilitated Marketplace
FFP	Federal Financial Participation
FFS	Fee-for Service
FF-SHOP	Federally Facilitated Small Business Health Options Program
FFY	Federal Fiscal Year
FFY	Former Foster Youth
FICAM	Federal Identity, Credentialing and Access Management
FIPS	Federal Information Processing Standards
FISMA	Federal Information Security Management Act
FK	Foreign Key
FM	Financial Management
FMD	Financial Management Department
FMFIA	The Federal Managers' Financial Integrity Act
FMS	Financial Management Service
FND	Functional Design Document
FOA	Funding Opportunity Announcement
FOAA	Foreign Operation, Export Financing, and Related Programs Appropriations Act
FOIA	Freedom of Information Act
FPACT	Family Planning Access, Care and Treatment
FPL	Federal Poverty Level
FSC	Functional Support Center
FSCU	Fiscal Systems and Consulting unit
FTB	Franchise Tax Board
FTE	Full-Time Employee
FTI	Federal Tax Information
FTP	File Transfer Protocol
FTRM	Federal Technical Reference Model

FX	Federal Health Insurance Exchange
FXS	Foreign Exchange Service
GA	General Agent
GB	Gigabyte
GC	Government Code
GHPP	Genetically Handicapped Persons Program
GLAN	General Ledger Account Number
Gov	Government
GPA	Government Procurement Agreement
GPS	Global Procurement Services
GSA	General Services Administration (Federal)
GSPD	General Services Procurement Division
HAP	Health Access Programs
HBEX	Health Benefit Exchange
HBX	Health Benefit Exchange (Federal)
HCC	Human Centered Change
HCD	Human Centered Design
HCO	Health Care Options
HDS	Historical Data Server
HEDIS	Healthcare Effectiveness Data and Information Set
HEMI	Health Exchange Medi-Cal Interface
HHS	Health and Human Services
HIOS	Health Insurance Oversight System
HIOS ID	Health Insurance Oversight System ID
HIPAA	Health Information Portability and Accountability Act
HIS	Health Information System
HIT	Health Information Technology
HITECH	Health Information Technology for Economic and Clinical Health
HIV	Human Immunodeficiency Virus
HIX	Health Insurance Exchange
HL7	Health Level 7
HM	HHS, Medicaid
HMO	Health Maintenance Organization
HMS	Health Management System
HP	Hewlett Packard
Hr	Hour
HTML	HyperText Markup Language
HTTP	HyperText Transfer Protocol
HTTPS	HyperText Transfer Protocol Secure
HW	Hardware
HW/SW	Hardware/Software (also, HWSW)
HWM	Hardware Maintenance
HX05	Update County Of Responsibility
HX12	Update Demographics

HX18	Application Transaction (Generated via the Create Application Web Service)
HX20	Create New Eligibility
HX34	Application Disposition
HX40	Discontinuance
IA	Identification & Authentication
IA	Interagency Agreement
IAA	Inter-Agency Agreement
IaaS	Infrastructure as a Service
IAM	Identity and Access Management
IAP	In person Assister Program
IAP	Insurance Affordability Programs
IAPD	Implementation Advance Planning Document
IAPDU	Implementation Advance Planning Document Update
IB	Infiniband
IBE	Identity Based Encryption
ICA	Interface Control Agreement
ICAM	Information Collection for Automated Mapping
ICD	Interface Control Document
ICT	Inter County Transfer
ID	Identification
ID	Identifier
ID Map	Instructional Design Map
IDD	Interface Definition Document
IDD	Interface Design Description
IEA	Information Exchange Agreement
IEC	International Engineering Council
IEEE	Institute of Electrical and Electronics Engineers
IEVS	Income Eligibility Verification System
IEX	IEX Workforce Management
IFP	Individual Family Plan
IHS	Indian Health Service
IIHI	Individually Identifiable Health Information
ILT	Instructor Led Training
ILT-I	Instructor Led Training- In Person
ILT-V	Instructor Led Training- Virtual
ILWD	Instructor Led Web Demonstration
IM	Incident Management
IMAP	Internet Message Access Protocol
INA	Immigration and Nationality Act
IP	Internet Protocol
IPA	Independent Practice Association (aka Certified Enrollment Counselor)
IPA	In-person Assister
IPL	Interim Process (or Production Load)
IPM	Integrated Project Management

IPMT	Integrated Program Management
IRA	Individual Retirement Account
IRC	Internal Revenue Code
IRM	Information Resource Management
IRS	Internal Revenue Service
IS	Information Security
ISA	Data Use/Data Exchange/Interconnection Security Agreement
ISA	Interconnection Security Agreement
ISC	International Information System Security Certification Consortium (Also, ISC2)
ISO	Information Security Office
ISO	International Standards Organization
ISO/IEC	International Standards Organization/International Electro-technical Commission
ISV	Immigration Status Verifier
IT	Information Technology
ITEC	Information Technology Executive Committee
ITIL	Information Technology Infrastructure Library
ITIN	Individual Taxpayer Identification Number
ITO	Information Technology Office
ITSD	Information Technology Solutions Division
ITSM	Information Technology Systems Management
IV&V	Independent Verification and Validation
IVR	Interactive Voice Response
J2EE	Java Platform, Enterprise Edition
JAD	Joint Application Design
JADS	Joint Application Design Session
JEE	Java® Enterprise Edition
JMS	Java® Message Service
JSON	JavaScript Object Notation
KP	Kaiser Permanente
KP	KP Corporation
KPC	Kaiser Permanente Connector
KPI	Key Performance Indicator
KT	Knowledge Transfer
LAN	Local Area Network
LAO	Legislative Analyst's Office
LDM	Logical Data Model
LEADER	Los Angeles Eligibility, Automated Determination, Evaluation and Reporting System
LLC	Limited Liability Company
LLM	Large Language Models
LLP	Limited Liability Partnership
LMS	Learning Management System
LOE	Level of Effort

M&A	Measurement and Analysis
M&O	Maintenance & Operations
M/C	Medi-Cal
MA	Medicare Advantage
MAGI	Modified Adjusted Gross Income
MAGI Medi-Cal	Modified Adjusted Gross Income (Medi-Cal Assistance Program)
MAPD	Medicare Advantage Prescription Drug
MAPI	Messaging Application Programming Interface
MARS-E	Minimum Acceptable Risk Standards for Exchanges
MBP	Megabyte
MBP	Monthly Benefit of Payment
MCAP	Medi-Cal Access Program
MCED	Medi-Cal Eligibility Division (DHCS)
MCID	Master Contact and Informational Database
MCIEP	Medi-Cal Inmate Eligibility Program
MDA	Model Driven Architecture
MEC	Minimum Essential Coverage
MEDS	Medi-Cal Eligibility Data System
MEWA	Multiple Employer Welfare Association
MFA	Multi-Factor Authentication
MIS/DSS	Management Information System/Decision Support System
MITA	Medicaid Information Technology Architecture
MMIS	Medicaid Management Information System
MMM	MITA 2.0 Maturity Model
MP	Mail Processing
MPA	Management and Program Analysis
MPF	Master Provider File
MPLS	Multi-protocol Label Switching
MPMP	Master Project Management Plan (CalHEERS)
MPOE	Minimum Point of Entry
MQ	Mandatory Qualification
MQ	Message Queue
MRMiB	Managed Risk Medical Insurance Board
MRMIP	Major Risk Medical Insurance Program
MS	Mandatory Scoreable
MS	Microsoft®
MSBI	Microsoft® Business Intelligence
MSR	Monthly Status Report
MTBF	Mean Time Between Failure
MTOM	Message Transmission Optimization Mechanism
MTTR	Mean Time to Repair
MVC	Model View Controller
MWP	Master Work Plan
NAIC	National Association of Insurance Commissioners

NAMD	National Association of Medicaid Directors
NCQA	National Committee of Quality Assurance
NDE	Network Data Encryption
NFR	Non-Functional Requirements
NHeLP	National Health Law Program
NIEM	National Information Exchange Model
NIST	National Institute of Standards and Technology
NLB	Network Load Balancer
NLS	Network Log Service
NOA	Notice of Action
NOD	Notice of Design
Non-MAGI	Non-Modified Adjusted Gross Income
Non-Prod	Non-Production
NQI	New Qualified Immigrant
NSA	National Security Agency
NTT	Nippon Telegraph Telephone
NTT Com	Nippon Telegraph and Telephone Corporation
Security	Communications Security
NTTA	Nippon Telegraph and Telephone America
NTTA CEC	NTTA Certified Engineering Center
NTTD	Nippon Telegraph and Telephone Corporation Data
NTTD SOC	NTTD Systems Operations Center
NUW	Not Under Warranty
NW	Non-Warranty
O&M	Operations & Maintenance (Phase)
O/S	Operating System
O365	Office 365
OAAM	Oracle® Adaptive Access Manager
OAG	Oracle® API Gateway
OAL	Office of Administrative Law
OAM	Oracle® Access Management
OBIEE	Oracle® Business Intelligence Enterprise Edition
OC	Official Correspondence
OCIO	Office of the Chief Information Officer
OCM	Organizational Change Management
OE	Open Enrollment
OEM	Oracle Enterprise Manager
OEM	Original Equipment Manufacturer
OEM / EM	Oracle Enterprise Manager Cloud Control 12c
OEP	Open Enrollment Period
OFI	Opportunities for Improvement
OIS	Office of Information Services
OLA	Office of Legal Affairs
OMB	Office of Management and Budget
OMR	Operations and Maintenance Requirements
OOTB	Out Of The Box

OPA	Oracle® Policy Automation
OPM	Office of Personnel Management (CMS)
OPM	Organizational Performance Management
OPM3®	Organizational Project Management Maturity Model
OPP	Organizational Process Performance
Ops	Operations
OS	Operating System
OSDS	Office of Small Business and DVBE Services
OTSI	Office of Technology & Solutions Integration (Formerly OSI)
OSS	Open Source Software (Freeware)
OT	Organizational Training
Otech	Office of Technology Services
PACS	Procurement Assistance Consultant Services
PAS	Premium Assistance Subsidy
PC	Personal Computers
PCAP	Plan Choice and Assister Portal
PCB	Pinnacle CalHEERS batch
PCC	Public Contract Code
PCES	Paid Claims and Encounter System (DHCS)
PCP	Primary Care Physician
PCR	Production Change Request
PCR	Project Change Request
PDC	Primary Data Center
PDC	Production Data Center
PDF	Portable Document Format
PDM	Physical Data Model
PHI	Personal Health Information
PHI	Protected Health Information
PHSA	Public Health Service Act
PI	Product Integration
PII	Personally Identifiable Information
PIM	Peripheral Interface Manager
PIN	Personal Identification Number
PKCS	Public Key Cryptography Standards
PKI	Public Key Infrastructure
PLR	Policy Level Reporting
PM	Problem Management
PM	Project Management
PM	Project Manager
PMBOK	Project Management Body of Knowledge
PMC	Project Monitoring and Control
PMI	Project Management Institute
PMM	Project Management Maturity
PMO	Project Management Office
PMP	Project Management Plan

PMPM	Per Member Per month
POAM	Plans of Action and Milestones
POC	Point of Contact
POP	Point of Presence
POP	Post office Protocol
POP3	Post Office Protocol 3
POS	Point of Service
PP	Project Planning
PPACA	Patient Protection and Affordable Care Act (Federal)
PPF	Print Processing Facility
PPG	Project Process Guides
PPO	Preferred Provider Organization
PPT	Power Point
PPQA	Product and Process Quality Assurance
PR	Problem Report
PRA	Paperwork Reduction Act of 1985
Pre-JADS	Pre-Joint Application Design Sessions
Prod	Production
PRTG	Paessler Router Traffic Grapher
PS	Personnel Security
PSCI	Personal, Sensitive, Confidential Information
PT	Program Technician
PTC	Premium Tax Credit
PV	Planned Value
PVLAN	Private Virtual Local Area Network
PWA	Project Web Access
PY	Plan Year
Q&A	Questions and Answers
QA	Quality Assurance
QC	Quarters of Coverage
QCP	Quality Coaching Program
QDP	Qualified Dental Plan
QDP	Quality Dental Plan
QDR	Quad Data Rate
QE	Qualified Entity
Q-EKM	Quantum Encryption Key Manager
QHP	Qualified Health Plan
QHP	Quality Health Plan
QLE	Qualified (or Qualifying) Life Event
QM	Quality Monitoring
QM	Quality Management
QMB	Qualified Medicare Beneficiary
QMP	Quality Management Plan
QW	Quarterly Wages
RA	Risk Assessment
RAC	Real Application Clusters

RAC	Report a Change
RACI	Responsible, Accountable, Consulted, Informed
RAID	Redundant Array of Inexpensive Disk
RAM	Responsibility Assignment Matrix
RBAC	Role-Based Access Control
RCA	Root Cause Analysis
RD	Requirements Development
RDBMS	Relational Database Management System
RDP	Registered Domestic Partners
REM	Reconciliation, Enrollment, and Membership
REQM	Requirements Management
REST	Representational State Transfer
RFC	Request for Change
RFI	Request for Information
RFO	Request for Offer
RFP	Request for Proposal
RFQ	Request for Quote
RHA	Richard Heath and Associates
RIDP	Remote ID Proofing
RIMG	Risk and Issue Management Group
RMI	Remote Method Invocation
RO	Read Only
ROI	Return on Investment
ROM	Rough Order of Magnitude Cost
ROP	Reasonable Opportunity Period
RRV	Renewal and Redetermination Verification
RSKM	Risk Management
RTC	Rational Team Concert
RTM	Requirements Traceability Matrix
RTO	Recovery Time Objective
RTR	Requirements Traceability Report
RTR	Response Time Report
RTS	Regional Technical Support
RTT	Round Trip Time
RTTS	Requirements Traceability Tracking System
RV	Requirements Volatility
RW	Read Write
RX20	Reconciliation
S&P	Security & Privacy
SA	Subject Area
SaaS	Software as a Service
SACWIS	Statewide Automated Child Welfare Information System
SAI	State Assess Impact
SAM	Software Asset Manager
SAM	State Administrative Manual (California)
SAM	Supplier Agreement Management

SAML	Security Assertion Mark-up Language
SAVE	Systematic Alien Verification for Entitlements
SAWS	Statewide Automated Welfare System (Consortium)
SB	Senate Bill
SB	Small Business
SBC	Summary of Benefits and Coverage
SBE	State Based Exchange
SBM	State-Based Marketplaces
SBTC	Small Business Tax Calculator
SBTC	Small Business Tax Credit (ends 2016)
SC	Service Center
SC	System & Communications Protection
SCAMPI	Standard CMMI Appraisal Method for Process Improvement
SCCP	Schedule Change Control Process
SCHIP	State Children's Health Insurance Program
SCI	Small Computer System Interface
SCI	State Coverage Initiatives - Academy Health System
SCI	Statewide Client Index
SCM	Software Configuration Management
SCO	State Controllers Office
SCR	Service Center Representative
SCR(s)	System Change Request
SCRB	System Change Request Board
SD	Secure Digital
SDLC	System/Software Development Life Cycle
SDM	Service Delivery Month
SDMO	System Development, Maintenance & Operations
SDOI	State Department of Insurance
Sec	Section (Also, Seq)
SEI	Software Engineering Institute
SEIN	State Employer Identification Number
SEP	Special Enrollment Period
SEP	Symantec Endpoint Protection
SEPM	Symantec Endpoint Protection Manager
SERFF	System for Electronic Rate and Form Filing
SES	Software Engineering Standards
SEVIS	Student and Exchange Visitor Information System
SFMP	Service and Function Migration Plan
SFTD	Secured File Transfer Protocol
SFTP	Secure File Transfer Protocol
SFY	State Fiscal Year
SHADAC	State Health Access Data Assistance Center
SHOP	Small Business Health Option Program
SHP	Subhealth Plan
SI	System Integrator

SIEM	Security Information and Event Management
SIF	Service Identification Framework
SIMM	Statewide Information Management Manual
SIR	Service Improvement Request
SIR	System Incident Report/System Investigation Request
SIRA	Site Implementation Readiness Assessment template
SIRR	Site Implementation Readiness Review template
SIT	System Integration Testing
SKU	Stock Keeping Unit
SLA	Service Level Agreement
SLCSP	Second Lowest Cost Silver Plan
SM	Service Management
SMART	Statistical Measurement Analysis & Reporting
SME	Subject Matter Expert
SMTP	Simple Mail Transfer Protocol
SNAP	Supplemental Nutrition Assistance Program
SNMP	Simple Network Management Protocol
SNOW	Service Now (ticket management system)
SOA	Service Oriented Architecture
SOAP	Simple Object Access Protocol
SOAPUI	Service Object Access Protocol User Interface
SOC	Share of Cost
SOL-Q	State On-Line Query Internet
SOMA	Service Oriented Modeling and Architecture
SOP	Standard Operation Procedure
SOS	Secretary of State
SOW	Statement of Work
SP	SharePoint
SP	Special Publication
SPA	State Plan Amendment
SPE	State Partnership Exchange
SPEAR	Strategic Prioritization with Executive Approval for Research
SPOC	Single Point of Contact
SPR	Safeguard Procedures Report
SPTC	State Level Advanced Premium Tax Credit
SQL	Structured Query Language
SR	SHOP Requirements
SR1	Security Requirements 1
SRM	Standards Reference Model
SRMT	System Requirements Management Tool
SRWP	Software Release Work Plans
SSA	Social Security Administration
SSAE	Statement of Standards for Attestation Engagements (SSAE) 16
SSApp	Single Streamlined Application

SSBA	Social Security Benefit Amount
SSI/SSP	Supplemental Security Income/State Supplementary Payment
SSIS	SQL Server Integration Services
SSL	Secure Socket Layer
SSMS	SQL Server Management Studio
SSN	Social Security Number
SSP	Self Service Portal
SSP	System Security Plan
ST	System Test
STAG	Status at a Glance
STARS	Service Technology that Achieves Results System
STD	Standard
STO	State Treasurers Office
STRIDE	Spoofing, Tampering, Repudiation, Information (Disclosure), Denial (of service), Elevation (of Privilege)
SVO	Status Verification Office
SW	Software
SWIFT	Secure Web Internet File Transfer System
SWM	Software Maintenance
SysTest	System Test
T&M	Time and Materials
T4T	Train-the-Trainer
TA	Technical Architecture
TA1	Technical Acknowledgment 1
TACPA	Target Area Contract Preference Act
TAF	Transparent Application Failover
TANF	Temporary Assistance for Needy Families
TB	Terabyte
TBD	To Be Determined
TCM	Technical Change Management
TCMP	Technical Change Management Process
TCP	Transmission Control Protocol
TCR	Technical Change Request
TCW	Transition Components Worksheet
TDD	Technical Design Document
TDD	Telecommunications Device for Deaf
TDE	Transparent Data Encryption
TDES	Triple Data Encryption Standard
Tech	Technical
Telecom	Telecommunication
TEMP	Test and Evaluation Master Plan
TFN	Toll Free Number
TIGTA	Treasury Inspector General for Tax Administration
TIMP	Transition-In Master Plan
TIN	Taxpayer Identification Number

TIP1	Transition-In Part 1
TIP2	Transition-In Part 2
TIWP	Transition-In Work Plan
TMC	Transition Medi-Cal
TOC	Table of Contents
TOMP	Transition-Out Master Plan
TOS	Terms of Service
TOP	Transition-Out Plan
TOWP	Transition-Out Work Plan
TPA	Technical Assistance Portal
TPA	Third Party Administrators
TPA	Training Partner Agreements
TR	Technical Requirement
TR	Testable Requirement
TRG	Training
TRP	Technology Recovery Plan
TRWP	Technology Refresh Work Plan
TS	Technical Solution
TSA	Target State Architecture
TSP	Total Score Possible
TTS	Text-to-Speech
TTT	Train the Trainer
TTVP	Transition Test and Validation Plan
TTY	Text Telephone
TURF	Text Update Request Form (TURF
UAT	User Acceptance Testing
UC	Use Case
UCD	Use Case Design
UDDI	Universal Description Discovery and Integration
UHC	United Health Care
UI	Unemployment Insurance
UI	User Interface
UICM	Unified Intelligent Contact Management
UML	Unified Modeling Language
UPI	Unique Project Identifier
UPW	Unmarried Pregnant Woman
URL	Uniform Resource Locator
USB	Universal Serial Bus
US-CERT	United States Computer Emergency Response Team
USPS	United States Postal Service
USTM	User Story Traceability Matrix
UTC	Universal Coordinated Time
UX	User Experience
V&V	Verification and Validation
VA	Veterans Administration
VAL	Validation

VCI	Verify Current Income
VER	Verification
VETRO	Validation, Enrichment, Transformation, Routing, and Service Operation
VHA	Veteran's Health Administration
VHP	Veterans Health Programs
VLAN	Virtual Local Area Network
VLE	Virtual Learning Environment
VLP	Very Lawful Presence (Services)
VM	Voicemail
VoIP	Voice over Internet Protocol
VPC	Virtual Port Channeling
VPN	Virtual Private Network
VR	Validated Requirement
VRU	Voice Recognition Unit
W3C	World Wide Web Consortium
WA	Writing Agent
WAT	Web Accessibility Toolbar
WBS	Work Breakdown Structure
WBT	Web Based Training
WCAG	Web Content Accessibility Guidelines
WCC	WebCenter Content Management
WFD	Workflow Design
WFM	Work Force Management
WKP	Work Product
WPC	Washington Publishing Company
WSDL	Web Services Definition Layer
WS-I	Web Services - Interoperability
WSR	Weekly Status Report
WTO	World Trade Organization
XACML	Extensible Access Control Markup Language
XAML	Extensible Application Markup Language
XML	Extensible Markup Language
XKMS	XML Key Management
XrML	Extensible rights Markup Language
XSD	XML Schema Definition
YTD	Year to Date

2 GLOSSARY

The following terms and definitions shall be given the meaning referenced below, unless context requires otherwise. For additional terms and definitions, refer to A-1 GENERAL PROVISIONS of this Contract.

#

3 Times Data Encryption Standard

A mode of the Data Encryption Standard that encrypts the data 3 times

508 Compliance

Section 508, an amendment to the United States Workforce Rehabilitation Act of 1973, is a federal law mandating that all electronic and information technology developed, procured, maintained, or used by the federal government be accessible to people with disabilities. Technology is deemed to be "accessible" if it can be used as effectively by people with disabilities as by those without.

820

The X12 820 transaction set provides the EDI format for transmitting information relating to payments. It is typically used in conjunction with an electronic transfer of funds for payment of goods, insurance premiums or other transactions. The actual funds transfer is often coordinated through the Automated Clearinghouse (ACH) system. As of Sep 2015, CalHEERS is requesting that Carriers provide 820 payment information to CalHEERS, but CalHEERS is not processing them.

834

An 834 is an enrollment transaction that transfers enrollment information from the exchange to the carrier in either an initial enrollment or a maintenance 834 due to a reported change (i.e., name change). Sometimes referred to as Feed.

9.5 Plan

First benefit design offered by Covered CA in 2014. The design offers all medical benefits and vision (for children) but pediatric dental was sold as a separate product.

999

An EDI (Electronic Data Interchange) 999 serves as a receipt to acknowledge that an EDI transaction was received, and whether the received transaction had errors. The 999 may acknowledge receipt of a transaction but it does not necessarily mean the transaction will be processed.

A

Accenture Billing Engine

Also known as Open CIS. A Third-Party software product from Accenture that provides the capabilities of the Exchange for the Financial Management business area of the CalHEERS system. This includes plan premium aggregation, billing, collections, and reconciliation.

Acceptance

A State confirmation to the Contractor that a Deliverable or Service has conformed to its applicable Acceptance Criteria in accordance with the processes described in the SOW.

Acceptance Criteria

The subset of Specifications against which each Deliverable or Service shall be evaluated in accordance with State of Work (SOW) Section 8, and which shall be described in Deliverable Expectation Documents (DEDs), executed Change Requests (CRs) and other Deliverables.

Access for Infants and Mothers

A State program in which the State provides prenatal care to pregnant women who do not have health insurance. The AIM program targets middle income families who are without insurance coverage, or those with coverage but have deductible greater than \$500. The AIM Program ended and has been replaced with the Medi-Cal Access Program (MCAP). The logic for the two programs overlaps and references to both are found in CalHEERS design documentation.

Accountable Care Organization

Accountable Care Organizations (ACOs) were established under the Medicare Shared Savings Program, a portion of the ACA, and were originally designed to support Medicare participants but have grown to include private payer networks as well. ACOs are networks of healthcare providers who collaborate to provide improved and more cost-effective treatment to patients in part by sharing information and eliminating redundancies for patients. ACO providers are graded against a series of quantitative benchmarks that are adjusted to account for regional cost differences. These benchmarks are spread across four categories: Patient/Caregiver Experience, Care Coordination/Patient Safety, Preventative Health, and At-Risk Population.

Action Item

Requires the completion of a task or activity.

Active Directory

Microsoft's proprietary directory service. It runs on Windows Server and allows administrators to manage permissions and access to network resources. Active Directory stores data as objects. An object is a single element, such as a user, group, application or device, e.g., a printer.

ADKAR

Prosci's model for handling change. ADKAR stands for Awareness, Desire, Knowledge, Ability and Reinforcement.

Admin Portal

The Admin Portal is a CalHEERS web portal which allow Service Center, County Eligibility Workers and role driven administrative staff access to portal pages to manage consumer cases.

Administration for Children and Families

The Administration for Children & Families (ACF) is a division of the U.S. Department of Health & Human Services. ACF promotes the economic and social well-being of families, children, individuals and communities.

Administrator

SCR and CEW user Roles

Advance Payments Prohibited

No advance payment shall be made for Deliverables or Services furnished by Contractor pursuant to this Agreement, provided, however, that advance payments are permitted under this Agreement and maintenance and support agreements, consistent with the terms of those agreements.

Advanced Planning Document

Advanced Planning Documents are used to request federal funding for the acquisition and management of information systems.

Advanced Premium Tax Credit

Beginning in tax year 2014, the Affordable Care Act (ACA) created a refundable tax credit (the “premium assistance credit”) for eligible individuals and families who purchase health insurance through an exchange. Individuals eligible for the premium tax credit must have annual incomes between 100 and 400 percent of the Federal Poverty Level (FPL); tax credits are also available for legal immigrants with incomes below 100 percent of the FPL and not eligible for Medicaid. The refundable premium tax credits are available for the purchase of health insurance coverage offered through health insurance exchanges. The payment of this tax credit is made on an advance basis to an eligible individual of a Qualified Health Plan (QHP) through a health insurance exchange.

Affiliate(s)

Affiliates are business concerns, organizations, or individuals that control each other or that are controlled by a third party. Control may consist of shared management or ownership; common use of facilities, equipment, and employees; or family interest. The employees or receipts of all affiliates are included when stating the corporation or business size.

Affordable Care Act

The comprehensive health care reform law was signed into law on March 23, 2010, and was amended by the Health Care and Education Reconciliation Act on March 30, 2010. The name “Affordable Care Act” is used to refer to the final, amended version of the law.

The Affordable Care Act (ACA) is a comprehensive federal health care reform law enacted in March 2010. The law was enacted in two parts: The Patient Protection and Affordable Care Act (PPACA) and the Health Care and Education Reconciliation Act. The name Affordable Care Act is used to refer to the combined version of the law. Under the ACA, states were authorized to expand Medicaid, effective January 1, 2014, to many low-income individuals under age 65 who were previously ineligible for coverage.

Affordable Coverage

Employer coverage is considered affordable — as it relates to premium assistance from the federal government (also known as the Advanced Premium Tax Credit [APTC]) — if the employee's share of the annual premium for self-only coverage is no greater than a certain percentage of annual household income. Individuals offered employer-sponsored coverage that's affordable and provides minimum value are not eligible for premium assistance.

Agency for Healthcare Research and Quality

The Agency for Healthcare Research and Quality (AHRQ) is the lead Federal agency charged with improving the safety and quality of America's health care system. AHRQ develops the knowledge, tools, and data needed to improve the health care system and help Americans, health care professionals, and policymakers make informed health decisions.

Agent

Licensed salespersons that represent one or more health insurance companies and presents their products to consumers (CalHEERS system role).

Agent Manager

A Covered California employee (or designee) who is responsible for reviewing Agent and General Agent applications for acceptance as a certified agent, monitoring agent activities and compliance, and managing agent complaints and decertification.

Agent/Agency Portal

The Agent/Agency Portal is a CalHEERS web portal that allows for Certified Insurance Agencies and Agents to register and provide management of insurance coverage on behalf of their CalHEERS customers (book-of-business).

Agreement Term

The term for the Agreement shall begin on the Execution Date and shall continue for five years unless terminated earlier as provided in the Agreement.

Alert Report

One of the Medi-Cal Eligibility Data System (MEDS), Capacity Database (CDB) or Income Eligibility Verification System (IEVS) reports used to inform users of situations that may require action on their part.

Allowed Amount

The amount a health insurance plan and health care provider have agreed on as reimbursement for a service by contract.

Alt

Baseline Alternative

Amazon Web Services

AWS (Amazon Web Services) is a comprehensive, evolving cloud computing platform provided by Amazon that includes a mixture of infrastructure as a service (IaaS), platform as a service (PaaS) and packaged software as a service (SaaS) offerings. CalHEERS leverages AWS to support cloud computing and data storage.

American National Standards Institute

Founded in 1918, ANSI is a voluntary organization composed of over 1,300 members that creates standards for the computer industry and for a wide range of technical areas, from electrical specifications to communications protocols.

American Public Human Services Association

Provides networking opportunities and other resources for health and human service professionals to influence policies and practices to support the health and well-being of

all children and families. The American Public Human Services Association is a membership organization representing state and local health and human service agencies through their top-level leadership.

Americans with Disabilities Act
State and Local Government Activities

Title II covers all activities of State and local governments regardless of the government entity's size or receipt of Federal funding. Title II requires that State and local governments give people with disabilities an equal opportunity to benefit from all of their programs, services and activities (e.g., public educations, employment, transportation, recreation, health care, social services, courts, voting, and town meetings).

State and local governments are required to follow specific architectural standards in the new construction and alteration of their buildings. They also must relocate programs or otherwise provide access in inaccessible older buildings, and communicate effectively with people who have hearing, vision, or speech disabilities. Public entities are not required to take actions that would result in undue financial and administrative burdens. They are required to make reasonable modifications to policies, practices, and procedures where necessary to avoid discrimination, unless they can demonstrate that doing so would fundamentally alter the nature of the service, program, or activity being provided.

Annual Household Income

The total amount of income for a family in a calendar year. The modified adjusted gross income of the household used for tax purposes.

Annual Limit

A cap on the benefits your insurance company will pay in a year while you're enrolled in a particular health insurance plan. These caps are sometimes placed on particular services, such as prescriptions or hospitalizations. Annual limits may be placed on the dollar amount of covered services or on the number of visits that will be covered for a particular service. After an annual limit is reached, you must pay all associated health care costs for the rest of the year.

ANSI 270

EDI Health Care Eligibility/Benefit Inquiry (270) is used to inquire about the health care benefits and eligibility associated with a subscriber or dependent.

ANSI 271

EDI Health Care Eligibility/Benefit Response (271) is used to respond to a request inquire about the health care benefits and eligibility associated with a subscriber or dependent.

ANSI 276

EDI Health Care Claim Status Request (276) can be used by a provider, recipient of health care products or services or their authorized agent to request the status of a health care claim.

ANSI 277

EDI Health Care Claim Status Notification (277) This transaction set can be used by a health care payer or authorized agent to notify a provider, recipient or authorized agent regarding the status of a health care claim or encounter, or to request additional information from the provider regarding a health care claim or encounter. This transaction set is not intended to replace the Health Care Claim Payment/Advice Transaction Set (835) and therefore, is not used for account payment posting. The notification is at a summary or service line detail level. The notification may be solicited or unsolicited.

ANSI 834

Benefit Enrollment and Maintenance Set (834) can be used by employers, unions, government agencies, associations or insurance agencies to enroll members to a payer. The payer is a healthcare organization that pays claims, administers insurance or benefit or product. Examples of payers include an insurance company, health maintenance organization (HMO), preferred provider organization (PPO), government agency (Medicaid, Medicare etc.) or any organization that may be contracted by one of these former groups.

ANSI 835

Health Care Claim Payment/Advice Transaction Set (835) can be used to make a payment, send an Explanation of Benefits (EOB), send an Explanation of Payments (EOP) remittance advice, or make a payment and send an EOP remittance advice only from a health insurer to a health care provider either directly or via a financial institution.

ANSI ASC X12/ASC X12

The official designation of the U.S. national standards body for the development and maintenance of Electronic Data Interchange (EDI) standards.

Appeal

The right for an individual to request a petition for a case review related to eligibility determination decisions. The appeal may begin with a request for redetermination, which could lead to a formal appeal fair hearing, or a customer may enter the appeal process via a direct request for a fair hearing. Appeals can be initiated online, in-person, or on the phone, but all verbal requests will need to be followed up by a request in writing.

Applicable State Health Subsidy

State-funded premium assistance

Applicant

An individual who is seeking an eligibility determination to enroll in a QHP in the Exchange, to receive advance payments of the premium tax credit or cost-sharing reductions, or to receive benefits through other State health programs. In the context of a Small Business Health Plan Option (SHOP), the term applicant indicates an employer or employee.

Application Disposition

The HX34 is used to update information on a pending application which has been previously reported to MEDS via an HX18. The HX34 is used to report denials or changes in application status and to report corrections to application information such as income or family size.

Application ID

Found in CalHEERS. Is assigned to a consumer filling out an application.

Application Lifecycle Management

Tool used to store and run test scripts and log defects.

Application Programing Interface

A source code-based specification intended to be used as an interface by software components to communicate with each other.

Application Transaction (Generated via the Create Application Web Service)

The HX18 is used to report new applicants to MEDS or to report a new application for a client already known to MEDS. The AP18 establishes the client as an active client for the reporting county, which then allows the county to update client information on MEDS during application processing prior to completing the eligibility determination.

Application Withdraw (Withdraw)

An activity performed by a consumer who withdraw his or her application prior to submission of the application and therefore eligibility determination is not calculated.

Application-to-Application

Connectivity used to solve the problem of putting together a diverse set of application subsystems.

Architecture Review Board

CalHEERs committee supporting infrastructure enhancements, fixes, and short-term patches, typically via DBCR or PCR. Services performed under Operations and Maintenance allocation, and typically not requiring a Production outage.

As-Is

The current business environment/process used at Covered California, Department of Healthcare Services (DHCS), and California counties.

As-Is Business Process Model

A business process model that portrays how a business process is currently structured.

Assembly Bill

A bill is a proposed law under consideration by a legislature. If the author is an Assembly Member, the bill is introduced in the Assembly and is an Assembly Bill. If the author is a Senator, the bill is introduced in the Senate and is a Senate Bill. A bill does not become law until it is passed by the legislature and, in most cases, approved by the executive. Once a bill has been enacted into law, it is called an act or a statute.

Asset Management System

The platform used to track the acquisition, maintenance, and upkeep of assets.

Assistant Project Director

The Assistant Project Director, working under the direction of the State Project Director (CalHEERS), is responsible for managing and overseeing all aspects of the Project, applying the Office of Technology & Solutions Integration's (OTSI) Best Practices,

industry standards, principles, methods and techniques to deliver the solution. The Assistant Project Director plans, guides, and oversees the day-to-day internal activities that support the Project.

Assister

An individual who assists a consumer with a Medi-Cal or Covered California application, examples include call center representatives, community health navigators, community non-profit organizations, authorized representatives, licensed insurance agents.

Assister Entities

Covered California Certified Enrollment Entities. Changed by Covered CA 6/21/13.

Association for Information and Image Management

ALLM, the Association for Information and Image Management, is a nonprofit organization that develops and publishes standards that detail enterprise content management.

Attribute

One characteristic about a configuration item (CI), e.g., model number, or folder location.

Audit

The Exchange reserves the right to monitor, audit or investigate Contractor's use of the Exchange Confidential Information collected, used, or acquired by Contractor under this Agreement.

Authentication

The process of verification that an individual or an entity is who it claims to be. Ensures that the authenticated user has the appropriate privileges to access resources.

Authorized Representative (Individual) (Also referenced as Auth Rep)

A person authorized by a Consumer (Individual) to perform the functions available to the Consumer (Individual), such as completing an application and selecting a health plan. This person is not certified as an Enrollment Counselor.

Auto Plan Selection

Consumer who transitioned from MAGI Medi-Cal/MCAP/CCHIP to APTC (Eligible/Conditionally Eligible) will be auto selected into a health plan (systematically enrolled). This can be an existing or new plan based on a defined hierarchy.

Automatic Call Distribution

The ACD system is the brain of the Service Center environment; it is responsible for distributing the calls intelligently to SCRs based on caller need identified by the IVR system. It will route calls based on variables or rules defined as part of the business process.

Availability

The property that data or information is accessible and useable upon demand by an authorized person.

B

Balanced Scorecard

Beginning with month four of the CalHEERS Project schedule, i.e., four months after the Execution Date, and every quarter thereafter for eight consecutive quarters, the Exchange shall measure Contractor Management Performance for the previous quarter

to determine the extent to which Management Performance Compensation is payable. The Exchange will document these measures using a Balanced Scorecard approach, and will adhere to the guiding principles, assumptions, and scoring mechanics outlined herein to complete the Balanced Scorecard.

Baseline

A baseline is a snapshot (at specific point in time) of the attributes and relationships for every CI in the CMS. A CI can be compared to a baseline to see what attributes and relationships have changed since that baseline.

Benchmark Plan

The Benchmark Plan is the lowest cost plan associated with each of the four tiers presented to the Employer during Employer Plan Selection. This plan is used to provide a total estimated annual premium cost for the Employer based on the selected tier, employee roster data, and rating region. Also known as the Reference Plan.

Beneficiary

An individual enrolled in a health insurance plan who receives benefits through those policies.

Benefit Plans

Health Insurance Plans.

Benefit Summary

An overview of the services provided by health insurance plans. Does not include all requirements or qualifications of each benefit. It shows current rates for all benefit programs including health, dental and life insurance. This document provided for informational purposes and does not constitute an agreement. HHS will provide a standard template for benefit summary display on the Self-Service Portal and on printed materials.

Benefit Year

A Calendar year for which a health plan provides coverage for health benefits.

Benefits

Medical services for which an insurance plan will pay, in full or in part.

Benefits Identification Card

An identification card that is issued to Medi-Cal beneficiaries as proof of their eligibility for the program. At the time of service, a provider verifies eligibility using the number and issue date on the BIC. It is generated by a DHCS vendor using a batch file from MEDS, this identification card is mailed to the customers address within a few days of determining presumptive or actual eligibility for services.

Best and Final Offer

Best and final offer or BAFO is a term used in bids to indicate that there will be no further negotiation on the amount or terms. It encompasses bids containing final pricing and deliverables submitted by bidding contractors based on the negotiations conducted during the initial bid stage.

Binder Payment

This is the first payment made in the individual market. It binds the customer (new member) to the plan they have selected and ensures they will be covered from the 1st of the month when the coverage begins.

BOT

A software program that performs automated, repetitive, pre-defined tasks. Bots typically imitate or replace human behavior. Because they are automated, they operate much faster than human users.

Breach

Shall mean either a confirmed “breach of the security of the system” as such term is specifically defined under the California Information Practices Act (California Civil Code §1798.29(f)) or the acquisition, access, use or disclosure of [either Personally Identifiable Information \(PII\) or](#) protected health information in a manner not permitted under the Federal HIPAA Privacy Rule which compromises the security or privacy of the protected health information (45 Code of Federal Regulations (CFR) §164.402).

Broker

Licensed insurance salesperson who obtains quotes and plan from multiple sources information for clients.

Bundled

Multiple deliverables of different medium types that will be delivered on the same timeline. The DED will be combined (see definition for combined) into one document to set the expectations and address all the requirements of all the bundled deliverables. Each deliverable will be delivered as a stand-alone deliverable because they are different medium types (i.e., Word, Excel, PowerPoint, RTC, PDF). The DEL # and names would remain the same and each DEL would be associated to its name and DEL #. For example, the SOW Requirements Management Plan, Traceability Tool, and Report are bundled. There is one DED for all three deliverables and three distinct Deliverables: 1- SOW requirements Management Plan in Word, 2- SOW Traceability Tool in SharePoint/Excel, 3-SOW Report in Excel/PDF.

Business Analyst

A Business Analyst serves as a liaison between Sponsors and the System Integrator to identify and document requirements, process improvements, and provide support through the project life cycle.

Business Day(s)

All days that all state agencies are open for business, excluding weekends, State holidays or other days mutually agreed upon by the parties in writing. Unless otherwise indicated, a business day commences at 8:00 a.m. and concludes at 5:00 p.m., Pacific Time (PT).

Business Impact Analysis

The process of determining the criticality of business activities and associated resource requirements to ensure continuity of operations through system issues.

Business Intelligence Development Studio

Business Intelligence Development Studio (BIDS) is a Microsoft Visual Studio component that interacts with SQL Server Integration Services to perform customizable extract, translate load tasks.

Business Legal Name

The Legal Name registered with the Secretary of State's Office.

Business Process

A sequence of user activities which, when complete, results in the accomplishment of a business objective.

Business Process Analysis

A systematic, disciplined approach that critically examines business processes in order to reduce impact from the implementation of the CalHEERS solution.

Business Intelligence Development Studio

Business Intelligence Development Studio (BIDS) is a Microsoft Visual Studio component that interacts with SQL Server Integration Services to perform customizable extract, translate load tasks.

Business Process Execution Language

Business Process Execution Language

Business Process Improvement

A systematic, disciplined approach that critically examines business processes in order to identify process efficiencies in order to achieve more efficient results.

Business Process Management

A holistic management approach focused on aligning all aspects of an organization with the wants and needs of clients. It promotes business effectiveness and efficiency while striving for innovation, flexibility, and integration with technology.

Business Process Management System

A suite of BPM components. Four critical components of a BPMS include Process Engine, Business Analytics, Content Management, and Collaboration Tools.

Business Process Model

A graphical depiction of the activities in a business process, which illustrates the responsibilities of system users and user interactions with a system and each other.

Business Process Modeling Notation

A standard notation for use in creating graphical models of business process operations as defined by the Business Process Management Initiative and documented in the CMS Blueprinting How-To Guide.

Business Process Reengineering

A systematic, disciplined approach that critically examines business processes within and between enterprises in order to identify significant process improvements.

Business Requirement

As defined in the BABOK 2.0 (Business Analyst's Body of Knowledge), business requirements are "higher-level statements of the goals, objectives, or needs of the enterprise. They describe the reasons why a project has been initiated, the objectives that the project will achieve, and the metrics that will be used to measure its success."

Business Rules Engine (resides within CalHEERS-HBX)

A software system that executes one or more business rules in a runtime production environment.

Business Rules Exposure for SAWS

BREfS is the Business Rules Exposure for SAWS, which is the ability for the County Eligibility Systems to leverage the business rules in CalHEERS to determine eligibility for consumers, which further enables the "no wrong door" policy.

Business Rules Management System

A software system used to define, deploy, execute, monitor and maintain the variety and complexity of decision logic that is used by operational systems within an organization or enterprise. This logic, also referred to as business rules, includes policies, requirements, and conditional statements that are used to determine the tactical actions that take place in applications and systems.

Business Validation Template

This is a Kaiser term. It's a flat file format that Kaiser and the Exchange use to pass, for example, the membership reconciliation information or any other member transactions that may require manual intervention when trying to enroll them into Kaiser's systems.

C

CalCOBRA

"Cal-COBRA is a California law that is like Federal COBRA.

1. Cal-COBRA applies to employers and group health plans that cover from 2 to 19 employees. It lets you keep your plan for up to 36 months.
2. Cal-COBRA is also for people who use up their Federal COBRA. When your 18 months of Federal COBRA ends, you can keep your health plan up to 18 more months under Cal-COBRA."

CalHEERS Concept of Operations v1.5 November 2012

A document describing the key operational concepts of the CalHEERS application.

CalHEERS Information Transmittal

CalHEERS Information Transmittal is the process used to formally communicate to the CalHEERS stakeholders.

CalHEERS Integration Lead

The CalHEERS Integration Lead project manager responsible for integration of Exchange programs, including CalHEERS, Assister Program, Exchange Service Center, Small Business Health Options Program (SHOP).

CalHEERS Request for Information

CalHEERS Request for Information is the process used to formally request information from CalHEERS stakeholders.

CalHEERS System Administrator

A CalHEERS, Covered California, DHCS or OTSI employee who has been authorized to perform "super user" functions in the system.

CalHEERS Training

The discipline responsible for the design, development, and delivery of CalHEERS training. Training is designed to prepare users to do their jobs using the system and help consumers to understand how to navigate the CalHEERS application to select and obtain health coverage.

California Correctional Health Care Services

California Correctional Health Care Services

California Department of Corrections and Rehabilitation

California Department of Corrections and Rehabilitation

California Department of Insurance

An agency charged with overseeing the regulation of insurance regulations, enforcing statutes mandating consumer protections, educating consumers, and fostering the stability of insurance markets in the state of California.

California Department of Tax & Fee Administration

The California Department of Tax & Fee Administration (CDTFA) is the public agency charged with assessing and collecting sales and use taxes, as well as a variety of excise fees and taxes, for the U.S. State of California.

California Health Benefit Exchange

Covered California, also known as the California Health Benefit Exchange or Exchange, was created by the California State Legislature to implement key elements of the Affordable Care Act (ACA). CalHEERS is the key implementation of that law.

California Healthcare Eligibility, Enrollment, and Retention System

The CalHEERS is a cloud-based system that supports a combination of public-facing and State administrator portals, backend validation, and transfer of information enabling the eligibility, enrollment, and retention for consumers for healthcare affordability programs in the State of California. It is jointly sponsored by the California Health Benefit Exchange (Covered California) and the Department of Health Care Services (DHCS).

California Medicaid Management Information System

The system used to manage the Medicaid program and process Medi-Cal claims in California.

California Public Records Act

Governmental records shall be disclosed to the public, upon request, unless there is a specific reason not to do so. Most of the reasons for withholding disclosure of a record are set forth in specific exemptions contained in the CPRA. However, some confidentiality provisions are incorporated by reference to other laws. In addition, the CPRA provides for a general balancing test by which an agency may withhold records from disclosure if it can establish that the public interest in nondisclosure clearly outweighs the public interest in disclosure. For additional information, please see the Department of Justice's [Summary of the California Public Records Act](#).

The **California Relay Service (CRS)** is a statewide 24-hour dual-party relay system that bridges the communication gap between people who are deaf, hard of hearing, or speech-disabled, and those they wish to communicate with by telephone. Specially trained operators relay conversations between Telecommunication Devices for the Deaf (TDDs) users and those without TDD.

California Technology Agency

California Technology Agency The recognized central IT organization for the State of California, the Technology Agency is responsible for the approval and oversight of all state information technology projects (works hand in hand with OTSI).

California Work Opportunity and Responsibility to Kids

A welfare program that gives cash aid and services to eligible needy California families.

California Work Opportunity and Responsibility to Kids Information Network

CalWIN is one of the three State Automated Welfare Systems (SAWS) in California. CalWIN provides service to 18 Counties Statewide.

California's Health Care Safety Net

California's health care safety net is a complex web of programs and providers that serve low-income, uninsured residents. It includes Medi-Cal.

CalSTARS Operations Memos

CALSTARS Operations Memos (COMs) are one way of communicating information to agencies about CALSTARS. Information on the COM may later be added to the CALSTARS Procedures Manual through Transmittal Letters.

CalSTARS Procedures Manual

The manual reflects the financial reporting principles and standards required by the State of California and its control agencies.

CalWORKS

California Work Opportunity and Responsibility to Kids, a welfare program that gives cash aid and services to eligible needy California families.

Cancellation

Occurs before effectuation & effective date.

Carrier

Carriers are CalHEERS Interface partners. Carriers are insurance companies providing medical, dental and/or vision plans for Covered California or California Health Benefit Exchange (also called Issuers). Carriers receive aggregated premium payments from all SHOP employers. Plan assessment fees and agent commissions are deducted from the aggregated amount and retained by Covered California. Carrier's payments are sent on the 8th of the month. If the 8th of the month is a weekend or holiday, the payments are sent on the next business day.

Carrier Integration Testing

An activity performed to test the exchange and processing of 834 EDI files with existing and new (if any) Health and Dental Carriers to ensure production readiness for

enrollment in the next benefit year. Carrier Integration Testing is also carried out on an ad-hoc basis when a Carrier makes changes to their SFTP interface or related systems. This may also be seen referenced as 'Carrier IT' and 'Carrier Interface Testing'.

Carrier Interface Testing

An activity performed to test the exchange and processing of 834 EDI files with existing and new (if any) Health and Dental Carriers to ensure production readiness for enrollment in the next benefit year. Carrier Interface Testing is also carried out on an ad-hoc basis when a Carrier makes changes to their SFTP interface or related systems. This may also be seen referenced as 'Carrier IT' and 'Carrier Integration Testing'.

Carry Forward Status

Carry Forward Status

Cascading Style Sheets

CSS is a style sheet language used for describing the look and formatting of a document written in a markup language.

Case Control Number

Physically links Multiple Member's Eligibility to a Single Case; Case Id is static even if applicant leaves the IFP.

Case ID

When a family applies for Health Benefits, then each member of the household is assigned a Member ID. The person applying is called the primary member or primary contact. The household is identified by a Case ID. The household case id for someone does not change unless the make-up of the household changes i.e., Husband and wife divorce. Then one of the two will keep the existing case ID but the other will not be setup in their own household and will now have a new case id. Note: the member id will not change for the individual. The group then gets an Application ID for each Application submitted. If the members get covered by different plans, then I'm not sure if that means there are 2 different Application IDs or if it is 1. See also Subscriber ID.

Case Notes

The function of adding written or system generated notes to a case.

Catastrophic Plan

Minimum Coverage Plan. Changed by Covered CA 6/21/13.

Center for Consumer Information and Insurance Oversight

Oversees the implementation of the provisions related to private health insurance and assists in implementing many provisions of the Affordable Care Act. State-based Exchanges must meet detailed federal requirements in order to obtain approval (or conditional approval) from the U.S. Department of Health and Human Services (DHHS). The application process established by the Centers for Medicare and Medicaid Services (CMS), Center for Consumer Information and Insurance Oversight (CCIIO) for documenting compliance with federal Exchange requirements and seeking federal approval is the Blueprint for Approval of State-based and State Partnership Insurance Exchanges.

Center for Medicare and Medicaid Services

US federal agency which administers Medicare, Medicaid, and the Children's Health Insurance Program.

Certified Educator

A Covered California Certified Educator is an individual who works for an organization supported through Covered California's Outreach and Education Program. Certified Educators disseminate clear, accurate and consistent messages about Covered California that eliminate barriers, increase interest in Covered California programs and Medi-Cal and motivate consumers to enroll in coverage. Certified Educators must attend a two-and-a-half-day initial training through Covered California and pass an exam to become certified through Covered California. Certified Educators cannot provide enrollment assistance (i.e., they cannot help consumers fill out their application for insurance) and thereby are prohibited from handling payment information on behalf of a consumer. Certified Educators have already been selected for 2013 and 2014. More information is available at <http://hbex.coveredca.com/outreach-n-edu>.

Certified Enrollment Counselor

A person who has completed Certified Enrollment Counselors certification activities, belongs to a compensated Certified Enrollment Entity (IPA or Navigator) or non-compensated Certified Enrollment Entity, and assists Consumers (Individuals) with application, plan selection, and enrollment functions in the CalHEERS solution. Does not include Agents.

Certified Enrollment Entity

- a. *Certified Enrollment Entity (Compensated)*: An organization or entity that registers with Covered California to provide the services required of CECs that may be compensated by Covered California or through federal funds. The CEE contracts with or employs CECs. There are two types of compensated CEEs: (1) In-Person Assistance (IPA) and (2) Navigator entities.

The main difference between the two types of CEEs is funding source. IPA entities are funded through federal funds and Navigator entities are funded through Covered California's operating funds. Application assistance payments are made to the CEEs as a result of the assistance provided to consumers by their CECs. The individual CEC does not receive the application assistance payment.

- b. *Certified Enrollment Entity (Non-compensated)*: An organization or entity that registers with Covered California to provide the services required of CECs but is not compensated by Covered California. In order to carry out these services, the CEE contracts with or employs CECs. These non-compensated CEEs include hospitals and providers and may be compensated by other sources. They cannot be funded by Covered California's federal funds or operating funds.

Certified Enrollment Entity Contact

A person appointed by the Certified Enrollment Entity to update account information and associate, approve, and disassociate Certified Enrollment Counselors associated to the Certified Enrollment Entity (CalHEERS system role).

Certified Insurance Agent

A person or entity who has completed agent certification activities and holds an active life and health agent license in California, and assists employers and employees with

application, plan selection, and enrollment processes into health insurance coverage in or out of Covered California. Individual market agents are compensated by Issuers. Certified Insurance Agents are compensated by Covered California. They also assist individuals in the individual exchange. Certified Insurance Agents cannot be Navigators.

Certified Representative

- (A) Service Center Representative: an Exchange employee operating in a call center
- (B) Certified Enrollment Counselor
- (C) Certified Application Counselor
- (D) Certified Insurance Agent
- (E) Certified Plan-Based Enroller

Change Advisory Board

The Change Advisory Board (CAB) is an Advisory Board and is an Information Technology Service Management (ITSM) supported concept for determining the risks and benefits of a change, align resources and assess scheduling.

The CAB consists of IT and business representative with technical expertise that review and approve the requested changes and contribute to the assessment and prioritization of changes. They review changes for impact to/from their respective areas and focus on what, why, and how aspects of the change. The CAB also reviews resource availability for deployment, timing of deployment and environment impacts.

All changes to Designated Configuration Items shall be entered into the change management system (ServiceNow) and should pass through the CAB.

Change Agent Team

A workgroup comprising of State or county representatives from one site who work collaboratively with System Integrator OCM team on OCM activities and take ownership for implementing the Change Readiness Plan in their site.

Change Hours

Change hours will be estimated by the System Integrator at the request of the Exchange and included in a System Change Request. System Change Requests will be mutually agreed upon prior to work beginning. SCRs will be considered time and materials estimates that may be adjusted depending on the actual effort required to complete the work for the SCR. The parties will address further processes regarding SCRs in the Project Management Plan Deliverable.

Change Management

An approach to transitioning individuals, teams, and organizations from a current state to a desired future state.

Change Readiness Plan

A document that details the implementation steps to address significant differences between the current and future roles and business processes. The Change Readiness Plan will include steps to transition to the new way of working, as well as resolutions for potential barriers related to implementing the Change Readiness Plan.

Change Request

A written form that when mutually agreed to and executed, in writing, modifies, deletes or adds to the Deliverables or Services, in whole or in part, and that is made in accordance with the terms of the Statement of Work (SOW).

Change Request Design Acceptance

Occurs when the applicable executed Change Request is moved, by the CalHEERS Project, to a status of "Design Accepted" in a Change Request tracking tool.

Change Request Implementation Acceptance

Occurs when the applicable executed Change Request is moved, by the State, to a status of "Build Accepted" in the CR tracking tool.

Charges

The amount(s) to be paid for Services and Deliverables, in whole or in part, as described in the Contract.

Child Health and Disability Prevention Program

A preventive program that delivers periodic health assessments and services to low-income children and youth in California.

Children's Health Insurance Program

A joint State/federal program to provide health insurance to children in families who earn too much money to qualify for Medicaid yet cannot afford to buy private insurance.

Cisco Voice Portal

The Cisco Voice Portal will provide receipt of information on the SCR's workstation.

Claim

A notice to the insurance company that a person received care covered by the plan. A claim also may be a request for payment and will state so.

Class of Admission (USCIS Code)

USCIS code that describes the category that was used to admit an immigrant to the U.S. as a permanent resident or conditional permanent resident.

Clear Case

The IBM Rationale tool that is a repository and version controller under UCM procedures.

Client Index Number

The CIN is the primary identifier for individuals who have applied for public benefits (CalWORKs, Food Stamps, Medi-Cal, etc.) and uniquely identifies a recipient across multiple programs. It is generated and controlled by the California Department of Health Services' Statewide Client Index.

Closeout

The closeout process is a process when a contract has met all of the terms of a contract and to finish or resolve all contractual requirements for a physically complete contract. Closeout is completed when all administrative actions have been completed, all disputes settled, and final payment has been made.

CMS Blueprint How-to Guide v1 January 27, 2012

A CMS document that provides guidance on how to document business processes.

Coinsurance

Consumers' share of the costs of a covered health care service. It is calculated as a percentage of the allowed amount for the service. The consumer pays coinsurance plus any owed deductible.

Collaborative Application Lifecycle Tool

A collaborative tool that creates a centralized repository for storing, collaborating on and sharing deliverables and artifacts from IT projects in support of Medicaid administration and establishment of Exchanges.

Comma Separated Value

A comma-separated values (CSV) file is a delimited text file that uses a comma to separate values. Each line of the file is a data record. Each record consists of one or more fields, separated by commas. The use of the comma as a field separator is the source of the name for this file format. A CSV file typically stores tabular data (numbers and text) in plain text, in which case each line will have the same number of fields.

Commercial Off the Shelf

Commercial Off-The-Shelf (COTS) is a Federal Acquisition Regulation (FAR) term defining a non-developmental item (NDI) of supply that is both commercial and sold in substantial quantities in the commercial marketplace, and that can be procured or utilized under government contract in the same precise form as available to the general public.

Common Checkout Page

This is a web service provided by NIC for the payment interface to CalHEERS.

Communication Item

An identified difference that does not require the development of resolutions and may be addressed in the site training or communication materials.

Community Based Organization

A third party that assists customers in applying for services and/or benefits in and out of the Exchange.

Community Outreach Network

Uncompensated community partners providing outreach and education about Covered California in local communities.

Companion Guides

Instructions for health care issuers, clearinghouses, and software vendors.

Company Offering

An instance of an offering that combines the carrier (e.g., Aetna), the plan type (e.g., medical, dental, vision), the market type (e.g., market, SHOP), the charges and the formulas used to calculate them, and the general ledger account applied for billing or payment transaction for the service.

Compatibility

Contractor warrants that, if the Software, in whole or in part, is replaced or upgraded by Contractor with replacement or upgraded Software components provided by Contractor, or Contractor provides Custom Software Deliverables or Enhancements, the Software as upgraded, replaced, and modified shall operate with the rest of the Software, Equipment and Data in the System, including without limitation, Custom Software and Third-Party Software and Enhancements, without loss of any Functions, as provided in the Specifications and without any Deficiencies. If the Exchange decides to produce Enhancements or to upgrade any of Third-Party Software which is used as part of the System with new versions or releases, Contractor shall, at no cost to the Exchange install and maintain the Software to operate in accordance with its Specifications and to be compatible with the Enhancements and new versions or releases of the Third-Party Software.

Computer-Based Training

A self-paced training delivery method in which the trainees learn by executing training programs on a computer.

Conditional Eligibility

Eligibility has been determined but is for a limited period due to a need for more information.

Confidential Information

Various trade secrets and information that the State desires to protect against unrestricted disclosure and that may be exempt from disclosure to the public or other unauthorized persons under State and federal laws, including without limitation (i) any nonpublic information or documentation concerning the State's business or future products or plans; and (ii) information that is designated as confidential by the State. The following are also hereby designated the State's Confidential Information: assister, assister employee, customer, customer employee, client, client employee, and CalHEERS employee personal information, including but not limited to names, addresses, Social Security numbers, e-mail addresses, telephone numbers, financial profiles, credit card information, driver's license numbers, medical data and health information, and law enforcement records, and such other Confidential Information as is described in this definition.

Confidentiality

The property that data or information is not made available or disclosed to unauthorized persons or processes.

Configuration(s)

The setting up of the business rules and workflow of business decisions to be used to implement the specific business rules and workflow of CalHEERS, without utilizing program language or database queries and the entering of data into tables that a software "rules engine" will process to determine workflow sequences, value limitation, and other variables, all without altering the Software source code.

Configuration Management Database

A CMDB is a database that houses CIs and provides functionality for reporting and managing those CIs. CMDBs may cover a large number of CI classes or be specialized

for a certain CI Class. SharePoint is an example of a CMDB that is optimized to house and manage document Configuration Items.

Confirmation

The State's receipt of Notice and detailed supporting information that will be based on the Acceptance Criteria described in each applicable DED from the Contractor that the Contractor has, as applicable, completed a Deliverable or Service in accordance with its Acceptance Criteria or pretested a Deliverable or Service for compliance with the Specifications, and confirmed the Deliverable or Service is ready for applicable Acceptance Tests.

Conflicts of Interest

Contractor, by entering into the Agreement with the Exchange to perform or provide work, Services or materials, has thereby covenanted that it has no direct or indirect pecuniary or proprietary interest, and that it shall not acquire any interest, which conflicts in any manner or degree with the work, services or materials required to be performed and/or provided under the Agreement and that it shall not employ any person or agent having any such interests.

Consumer (Individual)

An individual seeking information, eligibility, or enrollment in a health subsidy program (such as MAGI Medi-Cal and CHIP) or nonsubsidized health insurance program.

Consumer Assessment of Health Care Providers and Systems

The Consumer Assessment of Healthcare Providers and Systems (CAHPS) program is a multi-year initiative of the Agency for Healthcare Research and Quality (AHRQ) to support and promote the assessment of consumers' experiences with health care. First launched in October 1995, the program has expanded beyond its original focus on health plans to address a range of health care services and meet the information needs of health care consumers, purchasers, health plans, providers, and policymakers.

Consumer Assistance

One of the five (5) Organizational Change Management (OCM) Business Process Areas included in the business process models, which includes Process Consumer Inquiry/Complaint, Perform Member Management, Create Consumer Surveys/Notices, Generate Exchange Reporting, Register Assister Enrollment Entity, Monitor Assister Enrollment Entity, Register Assistors, and Monitor Assister Activity.

Consumer Assistance Programs

Programs or services that provide assistance and advisory services to individuals or other potential exchange customers.

Consumer Operated and Oriented Plan (CO-OP)

A program which will foster the creation of qualified nonprofit health insurance issuers to offer competitive health plans in the individual and small group markets.

Consumer Portal

The Consumer Portal is a CalHEERS consumer facing web portal providing the ability to apply, shop, enroll, renew, and report life events associated with initial and ongoing health care services and associated affordability benefit programs.

Continuing Coverage

Eligibility for State health care programs is re-determined on an annual basis. The year-long period of enrollment is considered continuing coverage as opposed to the two-month period of coverage granted through the presumptive eligibility.

Contractor Expenses

Contractor shall submit detailed, correct invoices in triplicate and in accordance with Exchange's standard invoicing requirements or other procedures agreed to in writing by the parties to the State Project Director or designee for all Charges and other amounts to be paid by Exchange hereunder.

Contractor Liaison

Contractor shall designate an individual or individuals as liaison on all Facility related matters.

Contractor Technology

Intellectual property owned by Contractor and its Subcontractors prior to the Execution Date (as well as certain modifications, enhancements or improvements to such intellectual property developed hereunder without payment of federal funding or Federal Financial Participation by the Exchange or developed or owned by Contractor or its Subcontractors outside the scope of this Agreement), including Contractor's or its Subcontractors' proprietary methodologies, project management and other tools, deliverable examples, procedures, processes, techniques, data models, templates, general purpose consulting and software tools, utilities, and routines; the Pre-existing Software; and Contractor's Confidential Information.

Controlling Health Plan

A CHP means a health plan that— (1) controls its own business activities, actions, or policies; or (2)(i) is controlled by an entity that is not a health plan; and (ii) if it has a subhealth plan(s), exercises sufficient control over the subhealth plan(s) to direct its/their business activities, actions, or policies.

Conversion Software

Data conversion programs are written to transform data from the source system into a format and/or code values that are acceptable as input to the target system.

Converted Data

The Data which has been successfully converted for Processing by the System as described in the conversion plan Deliverable.

Coordination of Benefits

A provision used to establish the order in which health insurance plans pay claims when and individual has more than one health insurance plan.

Correspondence

Written or rendered information presented, mailed, emailed, Faxed or texted to a customer, consumer, or client that is not a Notice of Action (NOA).

Cosmetic Deficiency

A cosmetic and inconsequential Deficiency in the Exchange's reasonable judgment.

Cost Allocation

The process of identifying, aggregating, and assigning costs to cost objects.

Cost Sharing

Any expenditure required by or on behalf of an enrollee with respect to essential health benefits; such term includes deductibles, coinsurance, copayments, or similar charges, but excludes premiums, balance billing amounts for non-network providers, and spending for non-covered services.

Cost Sharing Reductions

A decrease in cost sharing for an eligible individual enrolled in a silver level plan in the Exchange.

Cost-Plus

~~The Contractor will mark-up their Cost-Plus Actual Cost for an item by a fixed bid percentage set for the term of the Contract.~~

Cost-Plus Actual Cost

~~The true and final (after all volume or other discounts, kickbacks, etc.) cost to the Contractor from the manufacturer or vendor for obtaining a Cost-Plus item. The Cost-Plus Actual Cost is intended to represent the best possible price available to the Contractor, allowing best possible price for the State while also allowing a fair profit for the Contractor based on their bid percentage.~~

County Children's Health Initiative Program

County Children's Health Initiative Program (CCHIP) is an existing health insurance program that offers affordable and comprehensive medical, dental, and vision insurance for children aged 0-19 who qualify. CCHIP is only available in three counties: San Mateo, San Francisco, and Santa Clara.

County Eligibility Worker

A County Welfare Department employee who assists Individuals in-person with plan selection and enrollment in Covered California after assisting the Individuals with their health subsidy program application.

County of Responsibility County of Responsibility (COR) is the County designated to manage the Case person's eligibility for a period of time. COR is established by the CalHEERS System and communicated to SAWS and MEDS via the Interfaces.

County Welfare Directors Association (of California)

A non-profit association representing the Human Services directors from each of California's 58 counties.

Course

The set of training modules representing training for a set of closely related business processes.

Coverage

What the health plan does and does not pay for. Coverage includes almost everything mentioned in this booklet: benefits, deductibles, premiums, limitations, etc.

Covered California

The customer-facing name of the California Health Benefit Exchange.

Covered California Certified Enrollment Counselors

Previously Assister, Covered CA Certified Enrollment Counselor is the broad category of non-Customer system users in California. They are Navigators, Non-Compensated Assistants, and Administrative Staff (which may be any of CalHEERS, MRMIB, or SAWS Staff). A person who has completed assister certification activities, belongs to a compensated Assister Enrollment Entity (IPA or Navigator) or non-compensated Assister Enrollment Entity, and assists Consumers (Individuals) with application, plan selection, and enrollment functions in the CalHEERS solution. Does not include Agents.

Covered California Certified Insurance Agents

A person or entity licensed by the state, which acts on behalf of a customer and supports the application, eligibility and enrollment processes into health insurance coverage in or out of the Exchange. (also "Broker"). An Agent is someone who has completed agent certification activities and holds an active life and health agent license in California, and assists employers and employees with application, plan selection, and enrollment processes into health insurance coverage in or out of Covered California. Individual market agents are compensated by Issuers. SHOP Agents are compensated by Covered California.

Covered California Plan

Similar to QHP, all health plans that are certified by Covered CA to participation. Plans that receive this certification will provide essential health benefits, follow established limits on cost-sharing (like deductibles, copayments, and out-of-pocket maximum amounts), and meet other requirements defined by the Exchange. (See related item Qualified Health Plan Certification)

Create New Eligibility

The HX20 is used to add new eligibility to MEDS or to report a change in eligibility information for a client who is already active on MEDS.

Credits

Any credits due the Exchange under this Agreement may be applied by the Exchange against Contractor's invoices with appropriate information attached, upon giving of Notice required herein, if any, by the Exchange to Contractor.

Critical Path

The Critical Path, the longest necessary path through a network of activities when respecting their interdependencies, which may be identified with the Program Evaluation and Review Technique and the Critical path method.

Cross-Site Scripting

A type of computer security vulnerability typically found in Web applications, such as web browsers through breaches of browser security, that enables attackers to inject client-side script into Web pages viewed by other users.

Current Monthly Income

Current Monthly Income

Curriculum

The set of courses comprising the CalHEERS training solution.

Custom Grouping

This is where you have household members in Different plans, E.g., Husband is with Anthem and the wife, and 2 kids are with Blue Shield. Note: As of Feb 2016, this is only allowed on Unsubsidized plans. Even having different metal levels within 1 Carrier is 2 separate plans, so it would still be custom grouping. Plan selection by custom grouping allows users to categorize members into separate groups in order to set preferences, compare plans, and enroll by group (as opposed to choosing one plan for all members or selecting separate plans for each person). See WPS06.07 – Indiv Application – Enrollment v40.1 for visuals.

Customer

An individual, employer, or an employee, or qualified entity seeking information, eligibility or enrollment into a health insurance or health related product available on the Health Benefit Exchange.

Customer Index Number

An identification number that will be used by the Exchange to uniquely identify each customer.

Customer Relationship Management

A system to be used at Covered California Service Center to manage interactions between customers and Covered California Service Center staff.

Customer Resolution Team

It is comprised of CC's PT IIIs at the Fresno and Rancho centers. They handle escalated calls transferred to them from the SCRs and have permission to perform terminations and re-enrollments. PT = Program Technician. Our SCRs (the call center agents) are PT IIs. The CRT is comprised of PT IIIs. (In a perfect world, these would be our "stars" that have been promoted, however, currently; these folks have been hired as PT IIIs into State service and have received the same training as the PT IIs).

Cutover

Multiple events whereby responsibility of Contract System Development Maintenance and Operations (SDMO) service(s), functions(s) or component(s) is transferred from the incumbent Contractor to the successor Contractor (or State).

Cutover Activities

Cutover activities are timed and scheduled activities that occur during a predetermined cutover window once a "go" decision is made.

Cutover Schedule

A tool used to monitor each of the cutover activities that need to occur on the CalHEERS Project during the cutover window.

D

Damage to Property

Contractor shall protect and be responsible for any loss, destruction, or damage to Property (except Work Products other than Deliverables) which results from or is caused

by Contractor's acts or omissions or from the failure on the part of Contractor to maintain and administer that Property in accordance with the terms of the Agreement.

Dashboard/Wallboard

Wall display that shows service center real time performance reports.

Data

The State's records, files, forms, data, converted Data, and other information and documents in electronic or hard copy form. In addition, Data is any information, formulae, algorithms, or other content that the State, the State's employees, agents and end users upload, create or modify. Data also includes user identification information and metadata which may contain Data or from which the State's Data may be ascertainable.

Data Center

A facility, either directly maintained or obtained through Cloud Services, used to house computer systems and associated components, such as telecommunications and storage systems. It generally includes redundant or backup power supplies, redundant data communications connections, environmental controls (e.g., air conditioning, fire suppression) and various security devices.

Data Conversion Tool (DCT)

The Data Conversion Tool provides both data conversion and the client team with a single repository for the creation and maintenance of conversion requirements and information, including data maps and data validation log.

Data Exchange File

The DEX file contains warrant (check) numbers and/or print control numbers for EFT transactions.

Data Governance

Data Governance is how an enterprise manages its data assets.

Data Integrity

Data integrity is concerned with three aspects of the data in a database: accuracy, correctness, and validity. Data integrity has the following meanings: (1) The condition that exists when data is unchanged from its source and has not been accidentally or maliciously modified, altered, or destroyed; (2) The condition in which data is identically maintained during any operation, such as transfer, storage, and retrieval; and (3) The preservation of data for its intended use.

Data Lake

A data lake is a storage repository that holds data in its native format, i.e., structured data, un-structured data, etc.

Data Services Hub

Data Services Hub

Data Use/Data Exchange/Interconnection Security Agreement

A system interconnection is defined as the direct connection of two or more IT systems for the purpose of sharing data and other information resources.

Data Verification Matrix

A document identifying which partners CalHEERS will interface for all electronic verification of eligibility data elements.

Data Warehouse/Data Warehousing

Data Warehouse also known as an enterprise data warehouse (EDW or DW), is a system used for reporting and data analysis, and is considered a core component of business intelligence. DWs are central repositories of integrated data from one or more disparate sources.

Day In The Life Of

An Organizational Change Management work product containing a description of a typical day in the current and future business environment.

Day(s)

Calendar day(s), unless otherwise indicated.

Decision Log

Log containing requests for decisions by the project management group (or other stakeholders) as well as documents the final decision determinations.

Decision Point (DP)

An issue encountered when data mapping is being performed that must be tracked until a resolution is found, or until the issue is further escalated through the project formal issue tracking process.

Decline (Opt Out)

An activity performed by a consumer who declines to continue with program enrollment after their program eligibility for that program has been determined. When a consumer opts Out or Declines, a discontinuance of APTC/CSR or MAGI Medi-Cal will be initiated by the system.

DED and DEL Comments Log

The comments log contains consolidated review comments provided by the CalHEERS Project Review Team. The deliverable owner provides responses to each review comment.

Deductible

A portion of the covered expenses (typically \$100, \$250 or \$500) that an insured individual must pay before benefits are paid by the insurance plan. Deductibles are standard in many indemnity policies and are usually based on a calendar year.

Deficiency

A failure of a Deliverable or Service, or an omission, defect or deficiency in a Deliverable or Service, which causes it not to conform to its Specifications.

Deliverable Expectations Document

Deliverable expectation documents that include the Acceptance Criteria for each Deliverable. The DED describes the proposed approach to preparing a Deliverable, including the methodology, format, content and level of detail. The approval of the

document represents a common understanding between CalHEERS and the Contractor on aforementioned deliverable details.

Demonstration video

A type of CalHEERS training, in the form of brief, 3-5 minute segments of recorded system interaction and text instructions with a voiceover narration intended for consumers visiting the portal.

Denial of Service

Threat aimed to deny access to valid users, such as by making a web server temporarily unavailable or unusable.

Dental Coverage

Benefits that help pay for the cost of visits to a dentist for basic or preventive services, like teeth cleaning, X-rays and fillings.

Dental Health Maintenance Organization

A type of dental plan product that delivers dental services by requiring assignment to a primary dental care provider who is paid a per-patient fee for providing all required dental services to the enrollee unless specialty care is needed. Dental health maintenance organizations (DMHOs) require referral to specialty dental providers. These products do not include coverage of services provided by dental care providers outside the dental plan.

Dental Preferred Provider Organization

A type of dental plan product that delivers dental services to members through a network of contracted dental care providers and includes limited coverage of out-of-network services.

Department of Finance

A state cabinet-level agency within the government of California. The Department of Finance is responsible for preparing, explaining, and administering the state's annual financial plan.

Department of Health Care Services

A department within the California Health and Human Services Agency that finances and administers a number of individual health care service delivery programs, including Medi-Cal, which provides health care services to low-income people.

Department of Labor

The Department of Labor (DOL) administers and enforces more than 180 federal laws. These mandates and the regulations that implement them cover many workplace activities for about 10 million employers and 125 million workers.

Department of Managed Health Care

Department of Managed Health Care. A regulatory body governing managed health care plans, sometimes referred to as Health Maintenance Organizations (HMO) in California.

Department of Social Services

CDSS strives to carry out its mission of providing aid, services and protection to needy children and adults. At the same time, the Department strives to strengthen and encourage individual responsibility and independence for families.

Dependent

A child or other individual for whom a parent, relative or other person may claim a personal exemption tax deduction. Under the Patient Protection and Affordable Care Act, individuals may be able to get premium assistance to help cover the cost of coverage for themselves and their dependents.

Dependent Coverage

Insurance coverage for family members of the policyholder, such as spouses, children or partners.

Desk Reference Guide

State owned and created document to support state tasks. Could be in support of a Project Process but is not a Contractor product.

Design Artifact

A Design Artifact is a demonstration tool used in Joint Application Design (JAD) Sessions.

Detailed Design Review

Federal Enterprise Lifecycle Reviews of Exchange of design deliverables.

Determination

Eligibility Determination

Determination Eligibility Response

A dataset sent from CalHEERS to SAWS through eMerging Health Information Technology (eHIT). It is an electronic transmittal containing case member eligibility as determined in the CalHEERS system back to SAWS.

Determination of Eligibility Response - Unsolicited

Determination of Eligibility Response – Unsolicited

Difference

An instance in which the CalHEERS application business processes or roles are different to the current environment.

Digital Subscriber Line

Digital Subscriber Line, a method for transmitting data over phone lines without interfering with voice service.

Disbursements

An outgoing payment created by the Exchange and disbursed through the State Controller's Office (SCO) to a Certified Insurance Agent, a Certified Enrollment Entity, an Employer, or an Issuer (Carrier).

Disclosure

The release, transfer, provision of access to, or divulging in any other manner of PII outside the entity holding the information. Disclosure includes if a person or entity outside of the entity holding the information takes possession or control of PII, such as if PII is encrypted by an unauthorized person as the result of a ransomware attack.

Discontinuance

The HX40 is used to discontinue eligibility for a client who is active in MEDS.

Discovery

Prior to Pre-JADs, CalHEERS and Sponsors may conduct discovery sessions to clarify the context, the business need, and intent of Change Requests (CRs). Sponsors may also request these sessions to clarify the scope of a CR and to develop/refine the requirements to have effective conversations during Pre-JADs.

Discrepancy

A Discrepancy is a failure to match when comparing consumer data entry with verification rules and may result in a non-reasonably compatible outcome.

Domain Controller(s)

Server that responds to security authentication requests (logging in, checking permissions, etc.)

Domain Name Service

Provides a name to IP address resolution.

Domains

An Active Directory are centralized directory databases identified by their domain name structure (DNS), the namespace.

Dry Run Testing

The purpose of the DRT is to simulate the cutover and validate converted data within the target application.

E**Education & Outreach**

The process and activities associated with targeting and increasing awareness of potential exchange customers regarding the Health Benefits Exchange and health care insurance options and programs that may be available to them.

Effectuation

Once an individual has enrolled in a plan and made their first month's payment they are effectuated and will receive health insurance coverage from the Carrier they have paid. The initial (binder) payment must be made for an individual to be considered effectuated. An enrollment group is considered effectuated if they have made their first monthly premium payment.

Electronic Benefits Transfer

Electronic Benefit Transfer is an electronic system that automates the delivery, redemption, and reconciliation of issued public assistance benefits by providing the consumer with the equivalent of a Debit Card. (From www.ebt.ca.gov - This website is a resource for California EBT cardholders to check individual account balances, view

transaction history detail, check claim status, and locate retailers and automated teller machines (ATMs) that accept the EBT card. The Golden State Advantage card is California's EBT card. It is similar to a bank debit card that provides a way for you to spend your food and/or cash benefits when your monthly benefits are deposited into your EBT account. You can use your EBT card at any store or ATM that displays the Quest® mark in California and throughout the United States.)

Electronic Fund Transfer

Electronic Fund Transfer as it applies to money being paid, e.g., via a file to the SCO.

Electronic Health Information Transfer

The eHIT interface is comprised of both real-time WEB Services and scheduled batch processes. Together, these technologies implement the data transfer between Statewide Automated Welfare Systems (SAWS) and California Healthcare Eligibility, Enrollment and Retention System (CalHEERS).

Elevation of Privilege

Threat aimed to gain privileged access to resources for gaining unauthorized access to information or to compromise a system.

Eligibility

Eligibility is the process of applying a complex set of rules to specific data associated with a consumer, to identify eligibility for one or more established health insurance and affordability programs available within the CalHEERS Application.

Eligibility Administrator

A Covered California employee (or designee) who is responsible for determining health insurance affordability program eligibility for individuals, processing exceptions, inquiries, and appeals related to the eligibility determination. This was a CalHEERS system role; it was replaced with SCR roles.

Eligibility and Enrollment

One of the five OCM Business Process Areas included in the business process models, which includes Apply for Health Insurance, Determine Eligibility and Enroll, Evaluate Exemption Request, Process Administrative Renewal Exceptions, Process Exchange Program Appeals, and Reconcile Enrollment with Issuers

Eligibility Case Period

The Eligibility Case Period table holds eligibility period dates, such as: The date used for determining same day eligibility remediation, and the begin date and end date of eligibility remediation. It is also used to check whether the period has been cloned (a record or eligibility segment that has been copied from a previous run) and stores the ECP ID of the previous run from which the record has been copied over.

Eligibility Determination

Performed by authorized program staff or automated systems according to the rules of the program for which the applicant is applying, utilizing documentation presented by the applicant.

ED is a transaction through the CalHEERS Business Rules Engine (BRE) ED (A call to the BRE) and is performed at:

- Application – Eligibility Determination
- Administrative Renewal – (Annual) Every 12 month (Medi-Cal and APTC)
- Periodic Re-Verification
- Change of Circumstances
- Mass Updates
- Federal Poverty Level (FPL) Cost of Living Adjustment (COLA)
- Social Security Administration (SSA) COLA
- Rules Changes

Eligibility Determination Request

Eligibility Determination Request is a dataset sent from SAWS to CalHEERS through eHIT. It is an electronic transmittal containing eligibility determination information from the SAWS applicant/case.

Eligibility Evaluation Reason Code

Eligibility Evaluation Reason Code

Eligibility Status Action Code

HX20 ESAC 1 (Initial Eligibility)
HX20 ESAC 2 (Update Eligibility)
HX20 ESAC 6 (initial closed period prior)
HX20 ESAC 7 (Update closed period prior)

Eligibility Verification

A provider is able to verify a Medi-Cal beneficiary's eligibility through the Point of Service network. The provider uses the beneficiary's Benefits Identification Card (BIC) to validate coverage to ensure payment for covered care.

Eligible Employer-Sponsored Plan

The term "eligible employer-sponsored plan" means, with respect to any employee, a group health plan or group health insurance coverage offered by an employer to the employee which is:

- A governmental plan (within the meaning of section 2791(d)(8) of the Public Health Service Act), or
- Any other plan or coverage offered in the small or large group market within a State. (State of WA EEI-16).

Eligible Immigration Status

An immigration status that's considered eligible for getting health coverage through Covered California. View a list of individuals with "lawfully present" status for eligibility and enrollment purposes in the individual market.

Emergency Services

Evaluation of an emergency medical condition and treatment to keep the condition from getting worse.

Employee

An individual who is eligible for health insurance coverage because he/she meets minimum employment qualifications of a small business employer participating on the SHOP Exchange.

Employee Retirement Income Security Act (29 U.S.C. section 1001, et seq.)

The Employee Retirement Income Security Act of 1974 (ERISA) provides a comprehensive federal scheme for the regulation of employee pension and welfare benefit plans offered by private-sector employers.

Employee Self Service Tool

A tool for Covered CA staff to log tickets regarding CalHEERS and other systems.

Employer

A business that qualifies and elects to purchase health insurance via the Small Business Health Options Program (SHOP). This is limited to employers with less than 50 (but not 0) employees in the initial enrollment period.

Employer Contribution

Any financial contributions towards an employer sponsored health plan, or other eligible employer-sponsored benefit made by the employer including those made by salary reduction agreement that is excluded from gross income.

Employer Identification Number

An Employer Identification Number (EIN) is also known as a Federal Tax Identification Number and is used to identify a business entity.

Employer Tax Credit

A tax credit of up to 35 percent of small business premium costs in 2010 for employers with fewer than 25 full-time workers and average annual wages less than \$50,000. The rate increase to 50 percent in 2014.

Employment Development Department

Employment Development Department (EDD) is a CalHEERS Interface partner. EDD is a California Department that provides quarterly wage, unemployment insurance income (UI) and disability insurance income (DI) for CalHEERS to verify individual self-attested income during the CalHEERS eligibility determination processes.

End User License Agreement

A legal contract entered into between a software developer or vendor and the user of a software detailing the rights and restrictions which apply to the use of the software. Often shortened to "EULA."

Engineering Workflow Management

IBM® Engineering Workflow Management is a collaborative software development tool that teams use to manage all aspects of their work, such as iteration and release planning, process definition, change management, defect tracking, source control, build automation, and reporting.

Enhancement(s)

Updates, additions and modifications to, and new releases for the Software and Third-Party Software, and all associated changes to the Documentation as a result of Enhancements, including but not limited to Enhancements produced by executed Change Requests (CR).

Enrollee

A Qualified individual or qualified employee enrolled in a QHP.

Enrollment

Enrollment is registration of individuals into health care services. Actual enrollment is done by the consumer selected Insurance Carrier or County Social Services Agency.

Enrollment Assistance Program

Enrollment Assistance Program carried out by assisters, Certified Enrollment Counselors, Certified Enrollment Entities, and agents.

Enrollment Counselor Manager

A Covered California employee (or designee) who is responsible for reviewing Enrollment Counselor applications for acceptance as a Certified Enrollment Counselor, monitoring Enrollment Counselor activities and compliance, and managing Enrollment Counselor complaints and decertification (CalHEERS system role).

Enterprise CalHEERS Security Framework

The CalHEERS Enterprise Security Framework integrates the guidance contained in the CMS harmonized security and privacy framework that has been created to assist health insurance exchanges structure their security and privacy program.

Enterprise Service Bus

A method of allowing integration of enterprise applications services and services built on newer technologies (e.g., J2EE, .NET). The ESB acts as a middle layer communicating between the two architectures.

Essential Health Benefits

Individuals enrolling in QHPs must receive coverage that meets or exceeds the “Essential Health Benefits” standard. The Department of Health and Human Services will launch an effort this fall to collect public input on the Essential Health Benefits standard. Based on expectations in the ACA, that standard will offer robust coverage, including mental health and substance abuse services that are often excluded from commercial plans. It may also include some Medicaid-optional benefits that states have selected not to cover in order to make plans more affordable for certain populations.

Exception

Data elements that are not included or do not fit into the general rules of eligibility determination.

Exchange

Covered California, identified interchangeably in California Government Code Section 100500 as the Exchange and the California Health Benefit Exchange, was created by the California State Legislature to implement key elements of the Affordable Care Act (ACA). CalHEERS is the key implementation of that law.

Exchange Life Cycle

Stages through which process/products are developed over a period of time.

Exchange Project Director

The person designated by the Exchange to be responsible for financial and contractual matters regarding the Agreement, including but not limited to, the person to whom the Exchange's signature authority has been delegated in writing and the person designated by the Exchange to be responsible for day to day management of the Exchange's resources for the Project and monitoring the status of Contractor's performance under the Agreement. The term includes, except as otherwise provided herein, an authorized representative of the Exchange Project Director acting within the limits of his/her authority.

Exchange Reference Architecture

CMS specified key architectural principles and guidelines that support the business of providing Medicaid and Exchange services. Included are IT principles, technology standards, IT governance, and identified areas where collaborative discussions are necessary to ensure the most effective and efficient environment for Medicaid and CalHEERS IT services.

Exchange Service Area

The area in which the Exchange is certified to operate.

Exchange Worker

An employee of the Exchange or an employee of an entity with responsibility for the operation of the Exchange. Exchange workers will have specific roles and responsibilities within the Exchange for the operation of each functional area. The term "Exchange Worker" is used describes users who will have access to internal functionality for the operation of the Exchange, such as eligibility specialists, local office workers, call center representatives, business analysts, supervisors, executive management report consumers and more.

Exclusive Provider Organization

An exclusive provider organization (EPO) is a type of health care doctor and hospital network that offers a full array of covered benefits from a single network. Covered benefits are not paid for services rendered by a doctor or hospital that is not part of the network, except in the case of emergency or plan-approved care outside the network.

Exemption

Permission or entitlement not to participate in the Individual Mandate to carry Health Care Insurance as defined by the Affordable Care Act (ACA)

Expanded System

The Baseline System combined with Core Enhancement Functionality which the Exchange has chosen in writing within one year of the Execution Date to be designed, developed, and implemented by Contractor.

Explanation of Benefits

A statement sent by an insurer to explain how the covered benefits and associated costs were paid to the provider.

Extensible Application Markup Language

A simple and declarative language based on XML. In XAML, it is very easy to create, initialize, and set properties of objects with hierarchical relations.

Extensible Markup Language

A markup language created by the World Wide Web Consortium (W3C) to define a syntax for encoding documents that both humans and machines could read. It does this through the use of tags that define the structure of the document, as well as how the document should be stored and transported. Often shortened to “XML.”

External Coordination

A group within the Back Office that handles more difficult issues for the Carriers.

F**Facilities Costs**

Contractor shall be responsible for all costs related to the operation of each Facility, including, but not limited to, leasehold improvements, utilities, security, telephone, office equipment, supplies, janitorial services, storage, transportation, insurance, fax and copy machine equipment and supplies, and the telephone system required to support help desk call routing and tracking.

Facility(s)

The buildings and land to house certain Equipment, Software, Data, and Project related activities hereunder.

Family

A group of people generally living in the same residence with a familial relationship.

Federal Data Service Hub

The Federal Data Services Hub (FedHub) is a CalHEERS Interface partner. The Federal Data Service Hub is a gateway used to facilitate access to data required to support the Patient Protection and Affordable Care Act health coverage program. The service was built and is maintained by the Internal Revenue Service (IRS) and federal Health and Human Services (HHS). It combines data on income and employment from IRS records, health and entitlements from HHS records, identity from Social Security, citizenship from Department of Homeland Security records, criminality from Department of Justice records, and residency from state records. Also involved are the Department of Defense, the Department of Veterans Affairs, the Office of Personnel Management, the Peace Corps, and state Medicaid administrations. The hub accesses and passes data that is used to verify the information provided by the consumer or on their behalf by an enrollment entity or agent that enables a decision about an applicant's eligibility for health care assistance programs.

Federal Employee Health Benefit Plan

A system of managed competition through which employee health benefits are provided to civilian government employees and annuitants of the United States government. Workers pay one-third of the cost of insurance, and the government pays the other two-thirds.

Federal Financial Participation

The federal government's share of an expenditure made by CalHEERS/DHCS under this Contract.

Federal Poverty Level

The poverty guidelines used for determining financial eligibility for certain federal programs including SAWS.

Federal Tax Information

Any return or return information received from the IRS or secondary source, such as the Social Security Administration or the Center for Medicaid Services (Internal Revenue Code (IRC) §6103(b)(1)&(2)), as well as any information which is derived from return or return information (Internal Revenue Service Publication 1075, Section 1.4.1).

Federally Facilitated Exchange

Consumers in FFE states will access both Qualified Health Plans and Insurance Affordability Programs (Medicaid, CHIP and Premium Tax Credits) through the FFE, requiring the FFE to coordinate closely with state Medicaid, CHIP and insurance agencies. Consumers in FFE states will access both Qualified Health Plans and Insurance Affordability Programs (Medicaid, CHIP and Premium Tax Credits) through the FFE, requiring the FFE to coordinate closely with state Medicaid, CHIP and insurance agencies.

Federally Facilitated Marketplace

The Federally-Facilitated Marketplace (FFM) is an online option to buy health insurance for individuals and small businesses that provide insurance for their employees. Through the FFM, individuals and small businesses can compare health plans, get answers to questions, determine eligibility for lower out-of-pocket costs and enroll in health plans.

Visit [HealthCare.gov](https://www.healthcare.gov) for more information.

File Clearance

The process used to determine whether an applicant is known to any of the health or social services programs whose eligibility data is maintained in MEDS.

Final Acceptance

Final Acceptance occurs when the Contractor repairs all Deficiencies, identified during the applicable Warranty Period, related to the Baseline system requirements. The Contractor will receive a Final Acceptance Notice from the State when this event has occurred.

Final Detailed Design Review

Federal Enterprise Lifecycle Reviews of Exchange of final design deliverables.

Financial Administrator

A Covered California employee (or designee) who is responsible all or any of the following financial functions in the system: billing, accounts receivable, inquiries, exception processing, delinquency, and accounts payable (CalHEERS system role).

Financial Help

Federal program to help to reduce the cost of an individual's or family's monthly health insurance payments and co-pays.

Financial Management

Financial Management is the ability to aggregate and produce monthly invoices for participation fees based on effectuated enrollments for health and dental coverage with contracted Carriers.

First Data Government Solutions

First Data Government Solutions has been contracted by the CalHEERS Project to provide Project Management and Technical Support Consulting Services to support State Project staff during.

Fiscal Systems and Consulting Unit

A division of the California Department of Finance.

Five-Year Bar

The “5-year bar” is a 5-year period that qualified immigrants must wait until they are able to receive subsidized health coverage, among other things. They are barred from receiving subsidized health coverage during that 5-year time period. See also NQI.

Fixed Budget Amount

The Fixed Budget is the amount represented for HW, SW, Cloud Hosting Services by the total dollar baseline amount by Fiscal Year. Refer to the Cost Workbook tabs D-2, D-3, and D-4 for an example of the use of a Fixed Budget amount.

Fixed Price Amount

The fixed price amount payable and paid by the State to the Contractor under this Contract.

Franchise Tax Board

Franchise Tax Board (FTB) is a CalHEERS Interface partner. FTB is a California Agency responsible for timely and accurate reporting and payment individual and business tax information specific to CA income. The information from the validated returns is used to assist in the income assessment during eligibility determination for healthcare assistance programs.

Function(s)

A discrete capability of Software on CalHEERS.

Function Area

A grouping of activities or processes on the basis of their need in accomplishing one or more tasks

Functional Design Document or Functional Design Definitions

Functional Design Document or Functional Design Definitions

Funding

The parties acknowledge and agree that this Agreement is dependent upon the availability of State and/or federal funding. The Exchange’s obligation to pay interest consistent with Government Code Section 927 and as described in this Agreement is subject to such interest specifically being permitted under law and being available from the Exchange’s funds for such interest.

Funding Opportunity Announcement

A funding opportunity announcement (FOA) is a notice in Grants.gov of a federal grant funding opportunity. Funding opportunity announcements can be found at Grants.gov/FIND that lets organizations apply for grants for over 1,000 grant programs from 26 federal agencies. Each FOA includes instructions -- a Grant Application Guide, and forms -- a Grant Application Package.

G

General Agent

General Agents are contracted with Covered California to act only in the SHOP (Group Market). The Agent/General Agent associated with a Group Enrollment is maintained at the Group Level, not the member level.

General Ledger Account Number

Used by CalSTARS. Each GLAN has a list of Transaction Codes that post to that GLAN.

Go-Live

As described in the Work Plan, the event that occurs after the CalHEERS Project gives Acceptance for a Release and puts a Release into Production. The Go-Live event for the last Release shall be the Go-Live event for the System.

Grantees

Covered California Certified Educations. Changed by Covered CA 6/21/13.

Group Products

Insurance products pre-selected by employers that are offered to their employees to enroll in.

Guided Practice

In Instructor-led Training courses, Guided Practices are training exercises conducted by the instructor that take trainees through a system interaction step by step.

H

Headless Dashboard

Headless is a mode that provides the very necessary service/components status of the application. Splunk Dashboard in CalHEERS provides the metrics based on the raw data from the backend of the CalHEERS application (Users, Transactions, Virtual Servers, Database, Application Performance).

Health and Human Services

The United States government's principal agency for protecting the health of all Americans and providing essential human services.

Health Benefit Exchange

The California Health Benefit Exchange was created by the California State Legislature to implement key elements of the Affordable Care Act (ACA). CalHEERS is the key implementation of that law.

Health Care Options

Health Care Options is a program within the Department of Health Care Services (DHCS). The California Health Care Options (HCO) Program provides Medi-Cal beneficiaries with resources to make informed decisions about their Medi-Cal benefits.

The main functions of the HCO Program are designed to assist Medi-Cal beneficiaries in understanding, selecting, and using managed care plans. The services provided by HCO to Medi-Cal beneficiaries include but are not limited to customer service, mailing of informing materials, education and outreach services in managed care counties, and enrollment/disenrollment processing. The HCO Program is currently responsible for 15 service areas(counties).

Health Coverage

Legal entitlement to payment or reimbursement for your health care costs, generally under a contract with a health insurance company; a group health plan offered in connection with employment; or a government program like Medicare, Medicaid (Medi-Cal in California) or the Children's Health Insurance Program (CHIP).

Health Coverage Verification

Health Coverage Verification.

Health Information Portability and Accountability Act

Allows persons to qualify immediately for comparable health insurance coverage when they change their employment or relationships. It also creates the authority to mandate the use of standards for the electronic exchange of health care data; to specify what medical and administrative code sets should be used within those standards; to require the use of national identification systems for health care patients, providers, payers (or plans), and employers (or sponsors); and to specify the types of measures required to protect the security and privacy of personally identifiable health care.

Health Information System

HIS stores information relating to the name and type of plan, start date and stop date. It is loosely coupled to the MEDS system in that the only requirement for acceptance of a plan transaction is the existence of eligibility in a program during the same period. The purpose of this system is to provide a centralized source of all plan information.

Health Information Technology for Economic and Clinical Health Act

The Health Information Technology for Economic and Clinical Health (HITECH) Act, enacted as part of the American Recovery and Reinvestment Act of 2009, was signed into law on February 17, 2009, to promote the adoption and meaningful use of health information technology.

Health Insurance

A contract that requires your health insurer to pay some or all of your health care costs in exchange for a premium.

Health Insurance Marketplaces

Under the Patient Protection and Affordable Care Act, these are resources where individuals, families and small businesses can learn about their health coverage options; compare health insurance plans based on costs, benefits and other important features; choose a plan; and enroll in coverage. Marketplaces also provide information on programs that help people with low to moderate income and resources pay for coverage. This includes ways to save on the monthly premiums and out-of-pocket costs of coverage available through the marketplaces, and information about other programs, including Medicaid (Medi-Cal in California) and the Children's Health Insurance Program (CHIP). Marketplaces encourage competition among private health plans and are

accessible through websites, call centers and in-person assistance. In some states, such as California, the marketplace is run by the state. In others, it is run by the federal government.

Health Insurance Oversight System

In order to be registered to sell Health Insurance, a Carrier must register with HIOS. Carrier's get assigned a unique 5 digit HIOS number. The Health Insurance and Oversight System (HIOS) is a web-based application that allows CMS Center for Consumer Information and Insurance Oversight (CCIIO) to collect insurance statistical data from state entities, Individual and Small Group Health Insurance Carriers (SHOP). The Health Insurance Oversight System (HIOS) will allow the government to collect data from states and individual and small group market issuers, which will be aggregated with other data sources and made public on a consumer facing website. One initial mechanism for the states to submit their data is through the use of the HIOS Excel template.

Health Insurance Oversight System ID

Health Insurance Oversight System number that uniquely identifies each new Qualified Health Plan (QHP) and new Qualified Dental Plan (QDP) approved by CMS.

Health Insurance Plan

Health insurance plans sold through Covered California, the state's marketplace for the federal Patient Protection and Affordable Care Act, provide essential health benefits, follow established limits on cost-sharing (such as for deductibles, copayments and out-of-pocket maximum amounts) and meet other requirements of the federal health care law.

Health Level 7

HL7 and its members provide a framework (and related standards) for the exchange, integration, sharing, and retrieval of electronic health information; v2.x of the standards, which support clinical practice and the management, delivery, and evaluation of health services are the most commonly used in the world.

Health Maintenance Organization

A type of health insurance plan that usually limits coverage to care from doctors who work for or contract with the health maintenance organization (HMO). It generally won't cover out-of-network care except in an emergency. An HMO may require you to live or work in its service area to be eligible for coverage. HMOs often provide integrated care and focus on prevention and wellness.

Health Plan Identification Number

A Federal Rule that establishes the standard for a unique health identifier for health care providers for use in the health care system and announces the adoption of the National Provider Identifier (NPI) as that standard.

Health Subsidy Programs

Medi-Cal, CHIP, and Exchange.

Healthcare Effectiveness Data and Information Set

HEDIS is a tool used by more than 90 percent of America's health plans to measure performance on important dimensions of care and service.

Healthy Families Program

The Healthy Families Program is low-cost health, dental, and vision coverage for children and teens up to age 19. It provides comprehensive coverage for children who do not have employer-sponsored insurance and do not qualify for no-cost Medi-Cal.

High Dated

The record/data end date is set far off into the future with a pseudo date, such as the year 2500.

Historical Data Server

The Administration and Data Server contains The Administration Workstation, Real-time Database, Historical Database (HDS) and Detail Database (DDS) Server components.

Hospitalization

Care in a hospital that requires admission as an inpatient and usually requires an overnight stay. An overnight stay for observation could be outpatient care.

Household

Individuals who comprise a family unit and who live together under the same roof; individuals who dwell in the same place and comprise a family; all those who are under the control of one domestic head. For the purposes of insurance, the terms family and household are frequently used interchangeably.

HP LoadRunner

The HP LoadRunner tool used for creating and executing automated performance test cases.

HP Quality Center

The HP Quality Center tool used as a single repository for test management. It will manage, maintain, and establish traceability for the project test cases, test results, and test reporting.

HP Quick Test Professional

The HP Quick Test Professional tool used for creating, automating, and executing project test cases. It will be integrated with the HP Quality Center tool. This tool will be used for storing, maintaining, and executing automated regression test scripts.

Human Centered Change

Change Management framework which delivers a more tailored and responsive training and change experience for all stakeholders.

I**Identity Based Encryption**

Identity Based Encryption. IBE enables a simple identity, such as an email address, to be used as public key to facilitate secure communication with any recipient. IBE does not require end-user certificates and thereby eliminates the usability and management problems inherent in traditional PKI based communication solutions. Related to DHCS Secure Email. A secure email is encrypted allowing PII and any other sensitive or confidential data to be sent. Provided by Voltage Security.

Image

A generic term for a document uploaded to the document management system through a scanning process. The term is used independently of file format and can represent multiple format types such as documents, pdfs, jpegs, tifs etc. The term is used synonymously with “document image” and “scanned image.”

Implementation

The process for making the System and Hosting Services Operational for the Exchange for Processing the Data in Production.

Implementation Services

The term for the Implementation Services shall begin on the Execution Date and continue until completed as described in the Work Plan

Implementation Site Support

The onsite structure of support that serves as the first point of contact for user questions during the one-month period after cutover.

Income Eligibility Verification System

Federally mandated system under Social Security Act Title IV-A for TANF/CalWORKs, and Title XIX for the Medi-Cal only programs for the purpose of verifying eligibility and benefit amounts available under these programs. The databases used in the ongoing IEVS include, but are not limited to:

- Wage information from the State Wage Information Collection Agency
- Unemployment/disability compensation benefits from the agencies administering those programs
- Benefits/pensions/wage information from the Social Security Administration (SSA)
- Internal Revenue Service (IRS)/Franchise Tax Board (FTB) unearned income data
- Inter/intra-county duplicate benefit matches
- Social Security number (SSN) verification information from SSA

Independent Practice Association (aka Certified Enrollment Counselor)

An independent practice association (IPA) is a legal entity organized and directed by physicians in private practice to negotiate contracts with health insurance issuers on their behalf.

Indian Health Service

The Indian Health Service (IHS), an agency within the Department of Health and Human Services, is responsible for providing federal health services to American Indians and Alaska Natives.

Individual

A customer seeking information, eligibility determination, and potential enrollment into an insurance product supported by the Health Benefit Exchange. Individuals may include the head of household, a spouse, other member of a household, or qualified entity.

Individual Case Eligibility

The Individual Case Eligibility table holds eligibility determination details for an individual, such as: Eligibility Source code, Type code, Type Reason code, Run date, Household MAGI CHIP premium amount, Run reason code, Household composition code, and SAWS Referral Flag indicator. (The ICE table has been deprecated and no longer in use.)

Individual Commissions

Are paid by the Carrier. Covered California has no responsibility for this.

Individual Consumer

A customer seeking information, eligibility determination, and potential enrollment into an insurance product supported by the Health Benefit Exchange. Individuals may include the head of household, a spouse, other member of a household, or qualified entity.

Individual Mandate

A government requirement stating that effective in 2014 individuals will be required to have insurance coverage meeting the minimum essential benefits as defined by the ACA. This is also commonly referred to as “individual responsibility.” As per Covered CA, 6/21/13, do not use this phrase when discussing the tax penalty.

Individual Products

Various insurance products available to individuals through the Health Benefit exchange differentiated by affordability, type of coverage (bronze, silver, gold), amount of deductibles or co-pays.

Individually Identifiable Health Information

Medical patient information that allows others to trace the information back to an individual. IIHI includes part or all of the following demographic information: name or partial name, address, Social Security number, Zip code, birth date, phone number, diagnosis or mental health status, employer, relatives, billing information or any other combination of information used to identify a patient.

Ineligibility

Not eligible to receive benefits for Medi-Cal and/or an extended Medicaid program.

Information Disclosure

Threat action to read a file that one was not granted access to, or to read data in transit.

Information Exchange Agreement

CMS uses an Information Exchange Agreement (IEA) to disclose personally identifiable information (PII), and/or protected health information (PHI), to an HHS Operating Division (OpDiv), Federal or State agency. The IEA states the terms and conditions for the data exchange between CMS and the other party, including the privacy and security safeguards to ensure we protect PII/PHI.

Initial Enrollment Period

The period during which a qualified individual may enroll in coverage through the Exchange for coverage during the 2014 benefit year.

Initiating Change Request

The form that the business fills out to initiate a Change proposal that they need implemented in the system. This Includes: Problem statement, Business Objectives, Policy Drivers, Impacts, Workarounds, Approval for Pre-JAD.

In-Person Assister

In-person Assister (now referred to as Certified Enrollment Counselor)

Installation

The process of putting a new system or piece of Equipment in its place and making it ready for use.

Instructor Led Training

The traditional training delivery method, with a trainer leading instruction either in a classroom or over the internet in a web demonstration format.

Instructor Led Training- In Person

An in-person Webinar session facilitated by a subject matter expert or certified trainer in a classroom setting.

Instructor Led Training- Virtual

Webinar session facilitated by a subject matter expert or trainer using virtual technology (e.g., MS Team)

Insurance Affordability Programs

Advance payments of the premium tax credit, cost-sharing reductions, Medicaid, CHIP, and the Basic Health Program.

Insurer

A company that provides health insurance plans (see “carrier”).

Integration Lead

The CalHEERS Project Integration Lead project manager responsible for integration of Exchange programs, including CalHEERS, Assister Program, Exchange Service Center, Small Business Health Options Program (SHOP).

Integrity

The property that data or information have not been altered or destroyed in an unauthorized manner.

Interactive Voice Response

An automated telephone system that interacts with callers, gathers information and routes calls to the appropriate recipient.

Interagency Agreement

An interagency agreement (I/A) is a contract between two (2) or more California State agencies. (GC § 11256).

Interested Party

A person who has appropriate permissions to apply for health care on behalf of another individual.

Interface Control Document

Interface Control Document (International Classification of Diseases)

Interface Test Description

Interface Test Description. Outlines the testing details of the interface between CalHEERS and an External Entity, e.g., SCO.

Interfaces

Custom Software that is developed for transmitting Data between the System and other systems.

Interim Process (or Production Load)

Interim Process (or Production) Load. A Kaiser term. It is an internal tool that KPC uses. KPC receive either an 834 or BVT from CalHEERS and then they use IPL to load the data into KPC's system. IPL was initially developed to assist with testing 834's. It then morphed into being used in Production, so it does not have full functionality.

Internal Revenue Service

The federal agency responsible for administering and enforcing the Treasury Department's revenue laws, through the assessment and collection of taxes, determination of pension plan qualification, and related activities.

International Standards Organization

Founded in 1947, the ISO promotes worldwide proprietary, industrial and commercial standards.

Interoperability

Being able to accomplish end-user applications using different types of computer systems, operating systems, and application software, interconnected by different types of local and wide area networks. (James A. O'Brien and George M. Marakas)

Investment Income

The income you get from an investment, like interest you get from a bank or dividends you get from a stock you own.

Issue Management Tool

A responsive tool set the project uses to log project level issues, streamline the issue tracking process, effectively manage workload, and increase productivity.

Issuer

A health insurance issuer, qualified health plan issuer, etc. that offers health plans.

Issuer Data Manager

A Health Plan employee (or designee) who is responsible for uploading, verifying and maintaining Issuer and QHP level data for the Health Plan (CalHEERS system role).

J**Jenkins**

Application build and deployment tool used to create new CIs and to execute deployments of Baselines to all environments. Not the tool of record for build and deployment but can serve as a backup to Rational Team Concert.

Job Access with Speech

Job Access with Speech

Job Aids

Written training materials distributed to CalHEERS users to assist them in training or on the job.

Job Function

Activity of responsibility associated with a job role.

Job Role

Logical grouping of job functions (responsibilities) needed to produce specific service offering and/or work. There may be one or more roles for each job category.

Job-Based Health Plan

Coverage that is offered to an employee (and often his or her family) by an employer.

Joint Application Design

JAD Sessions are meetings where all stakeholders review and refine requirements, and update and review all impacted functional and technical designs. Participants discuss the future state of the system post CR (Change Request) implementation to ensure all perspectives are considered, and Sponsors are able to validate and approve that the new functionality fully meets the requirements.

Joint Planning Team

The combined team of site and System Integrator staff responsible for all implementation activities required to bring a site to a state of cutover readiness.

K**Key Action Dates and Times**

Important actions, dates and times associated with this solicitation by which the actions must be taken or complete.

Key Staff

The Contractor's required key personnel for this Contract, as listed in Statement of Work Section 2.

L**Large and Complex IT System**

An IT system that meets all of the following criteria:

- A solution that integrates at least two applications, one of which is a COTS.
- A solution that interfaces with at least five external systems, at least one (1) of which is real-time.
- A solution that is accessed by at least one thousand (1,000) users at multiple locations.
- A solution that has a dollar value of at least ten million (\$10,000,000) dollars.
- A solution that includes multi-tiered processing, including a consumer or user facing front-end optimized for multiple user interface platforms.

Large Employer

An employer who employed an average of at least 101 employees on business days during the preceding calendar year and who employs at least 1 employee on the first day of the plan year.

Launchpad

Application build and deployment (plus other functions for other teams listed elsewhere) tool governing the build of new application CIs and the deployment of Baselines. Acts as the tool of record for build and deployment.

Lawful Presence

Interchangeable with Lawfully Present, below.

Lawfully Present

An alien resident of the state meeting certain criteria making them eligible to various services.

Learning Management System

A software application for the administration, enrollment, documentation, tracking, and reporting of CalHEERS training programs. It also stores training materials, training schedules, CBTs, and evaluations.

Learning Objective

An expected concept or ability that trainees will understand or have upon completion of a CalHEERS training module.

Legal Business Name (or Business Legal Name)

This is the legal name of the Business.

Legal Resident of California

A person who is lawfully present is determined to be a legal resident of California in accordance with federal law.

Legislative Analyst's Office

The Legislative Analyst's Office (LAO) has provided fiscal and policy advice to the Legislature for more than 70 years. It is known for its fiscal and programmatic expertise and nonpartisan analyses of the state budget. The office serves as the "eyes and ears" for the Legislature to ensure that the executive branch is implementing legislative policy in a cost efficient and effective manner. www.lao.ca.gov

Lessons Learned

The knowledge gained through experience that is documented, analyzed and used to improve future efforts or activities of a similar nature.

Life Event Needing Verification

Life event needing verification.

Liquidated Damages

The Exchange and Contractor agree that failed, delayed, and/or other performance not in compliance with the terms of this Agreement by Contractor may cause damages to the Exchange which may be uncertain and impractical or difficult to ascertain; and the Exchange shall assess, and Contractor promises to pay the Exchange in the event of

such failed, delayed, and/or other performance not in accordance with the terms of Exhibit C, the amounts described in Exhibit C as liquidated damages and not as penalties.

Logical Data Model

Defines logical data structures and objects. This data model includes: 1) data volumes (if available) 2) logical data model definitions 3) logical data model diagram.

Long-Term Care

Services that include medical and non-medical care provided to individuals who are unable to perform basic activities of daily living such as dressing or bathing regardless of their age. They can be provided at home, in the community, in assisted living or nursing homes.

Los Angeles Eligibility, Automated Determination, Evaluation and Reporting System

The automated welfare system previously used by Los Angeles County.

Low Income Health Plan

The waiver involves expanding coverage today for those who will become “newly eligible” in 2014 health care reform, implementing models for more comprehensive and coordinated care for some of California’s most vulnerable residents, and testing various strategies to strengthen and transform the state’s public hospital health care delivery system to prepare for the additional numbers of people who will have access to health care once health care reform is fully implemented.

M

MAGI Medi-Cal

Modified Adjusted Gross Income Medi-Cal

MAGI-Based Medicaid

Medicaid based services determined via the new Modified Adjusted Gross Income (MAGI) process beginning 1/1/2014.

Major Risk Medical Insurance Program

Major Risk Medical Insurance Program (MRMIP) is a program within DHCS that provides health insurance for Californians unable to obtain coverage in the individual health insurance market because of their pre-existing conditions. Californians qualifying for the program participate in the cost of their coverage by paying premiums.

Manage Open & Special Enrollment Periods

The Exchange and SHOP are required to manage that allowed window of health care elections (an open enrollment period). This includes notification of upcoming election periods and corresponding open eligibility rules. Life events, QHP decertification, or employer SHOP participation, could lead to special enrollment period which would permit health care elections outside of normal open enrollments.

Managed Care Organization

A health insurance company that provides healthcare networks and health plans.

Managed Care Plan

A term that typically refers to a Health Maintenance Organization (HMO), Point of Service, Exclusive Provider Organization (EPO), or Preferred Provider Organization (PPO); any health plan with specific requirements, such as pre-authorization or second opinions, which enable the primary care physician to coordinate or manage all aspects of the patient's medical care.

Managed Medi-Cal

This is a Kaiser term (other Carriers also do it). A person signs up for Medi-Cal and then they get outsourced to Kaiser for the services. Kaiser is managing the Medi-Cal services for the County.

Managed Risk Medical Insurance Board

The Managed Risk Medical Insurance Board was created in 1990 with the charge of advising the Governor and the Legislature on strategies for reducing the number of uninsured persons in the state. The Board is dedicated to improving the health of California by increasing access to affordable, comprehensive and quality health care coverage. MRMIB operates the Healthy Families Program, Access for Infants and Mothers (AIM), Pre-Existing Condition Insurance Plan (PCIP), and the Major Risk Medical Insurance Plan (MRMIP).

Management Information System/Decision Support System

A subsystem of the California Medicaid Management Information System (CA-MMIS) and serves as the Medi-Cal Program's centralized and integrated data warehouse. The MIS/DSS contains both Medi-Cal Fee-for-Service claim and Managed Care encounter data, along with related beneficiary eligibility and provider information, within a highly sophisticated relational database coupled with leading-edge business intelligence data mining and reporting tools. The MIS/DSS is used primarily by DHCS staff and management in their efforts to more effectively and efficiently manage the Medi-Cal Program.

Manual 834

A manual 834 is a template that Plan Management has provided and given to certain groups (Appeals, EC, hotline, etc.) to "communicate" information that we have in CalHEERS (or intend to have in CalHEERS after helpdesk ticket resolution) to the carrier when the information cannot be sent in electronic format. Mostly Mercedes Ignacio of EC (External Coordination) uses it after a data fix is done or appeals may use it to communicate a judge's order.

Manual Eligibility

Manual Eligibility

Manufacturers' Warranties

Contractor assigns to the Exchange all of the licensors' and manufacturers' warranties and indemnities relating to the Third-Party Software and Equipment to the extent Contractor is permitted by the licensors and manufacturers to make such assignments to the Exchange. Such assignment is subject to all of the terms and conditions imposed by the licensors and manufacturers with respect thereto.

MAXe2

A proprietary system used as the system of record for the Healthy Families Program (HFP), Access to Infants and Mothers Program (AIM) and the Single Point of Entry (SPE).

Medicaid

Medicaid is a federal health care program available to individuals and families that meet certain categorical, income, resources, citizenship and residency, and other requirements established under Title XIX of the Social Security Act. Medicaid funding is available to states that meet the applicable requirements of Title XIX and file a State Plan describing their program with the federal Department of Health and Human Services. The federal government and State governments each pay a portion of the cost of the program, with the proportion varying based on the per capita income of the residents of the State.

Medicaid Information Technology Architecture

With MITA, CMS is establishing a national framework of enabling technologies and processes that support improved administration for the Medicaid program and foster integrated business and IT transformation across the Medicaid enterprise.

Medicaid Management Information System

The mechanized claims processing and information retrieval system which states are required to have for Medicaid processes.

Medi-Cal

California's Medicaid health care program.

Medi-Cal Access Program

State program that provides pregnant women with comprehensive health coverage for a low cost with no copayments or deductibles for its covered services.

Medi-Cal Bridge Program

A Bridge program is a program designed to help a Medi-Cal beneficiary transfer to another health care program when that individual no longer meets the eligibility requirements for Medi-Cal. For example, if a child is no longer eligible for Medi-Cal at annual re-determination due to excess income, the county will 'bridge' that application to the Healthy Families program for eligibility determination purposes.

Medi-Cal Dental Managed Care

Medi-Cal's dental managed care program provides a comprehensive approach to dental health care. This program combines clinical services and administrative procedures to provide timely access to primary care and other necessary services in a cost-effective manner. It is only available in Sacramento and Los Angeles counties. In Sacramento, a beneficiary must choose between one of three plans, and in Los Angeles, a beneficiary may choose one of three plans, or may elect to remain in fee-for-service Denti-Cal. See <http://www.denti-cal.ca.gov> for more information.

Medi-Cal disposition

A worker "dispositions" a case (sends a disposition) by authorizing the eligibility determination in their respective SAWS system. The receipt of the disposition is the technical term used to describe this action and a worker may not be familiar with that term but instead with authorizing the eligibility result sent from CalHEERS. Specific to

this situation in a worker's world, they would have to be complete the renewal and authorize eligibility in order to close the renewal out.

Medi-Cal Eligibility Data System

MEDS is a database managed by DHCS that collects and retains eligibility data on individuals who apply for and/or become eligible for Medi-Cal. MEDS is a system of applications, networks, databases, people and procedures working together to support delivery of certain health and human services program benefits to Californians who qualify for those programs. The data maintained within the MEDS database originates from counties, State agencies, federal agencies, and nongovernmental organizations such as health plans.

Medi-Cal Eligibility Division (DHCS)

The Medi-Cal Eligibility Division of the California Department of Health Care Services is responsible for the development, coordination, clarification, and implementation of Medi-Cal regulations, policy, and procedures to assure Medi-Cal eligibility is determined accurately and timely by the 58 county human services agencies.

Medi-Cal Inmate Eligibility Program

Medi-Cal Inmate Eligibility Program

Medical Loss Ratio

The percentage of your premium dollars that an insurance company spends on providing you with health care and improving the quality of your care.

Medical Record Number

Medical Record Number. It's the member identifier that is assigned by Kaiser to each member upon enrollment. It is assigned after KPC passes the member info over to KP.

Medically Necessary

Health care services or supplies needed to prevent, diagnose, or treat an illness, injury, condition, disease, or its symptoms and that meet accepted standards of medicine.

Medically Needy-Aged-Disabled

The Medically Needy Aged program provides medical assistance to persons aged 65 and over who have insufficient funds to pay their medical bills, but whose income and resources are too high for them to qualify as Categorically Needy.

Medicare

A social insurance program administered by the United States government, providing health insurance coverage to people who are aged 65 and over; to those who are under 65 and are permanently physically disabled or who have a congenital physical disability; or to those who meet other special criteria.

Medicare Advantage Prescription Drug

A Medicare Advantage MAPD includes Medicare Part D prescription drug coverage.

Member

An individual who has effectuated coverage in a Covered California health plan.

Member ID

A unique identifier assigned by the Exchange that uniquely identifies every member of a household, including the Subscriber.

Membership Administration Command Center

This is a Kaiser term. Membership Administration Command Center. It's just a term/meeting used to identify prod issues.

Membership Information Unit

This is an LA Care term. Member Payment System and Services.

Membership Issue Resolution team

KP term: Membership Issue Resolution Team. The Team that issues like data fixes are sent to from Covered California and CalHEERS. MIRT logs and prioritizes the requests so that they get worked.

Microsoft SQL Database Server

A Microsoft database management system that can respond to queries from the client machines formatted in the SQL language.

Minimum Acceptable Risk Standards for Exchanges

The suite consists of the ACA System Security Plan Procedures, Version 1.0; ACA System Security Plan Template, Version 1.0; ACA System Security Plan, Workbook; and ACA Internal Revenue Service Safeguard Procedures Report Template.

Minimum Coverage Plan

Covered California health insurance plans — and all health plans in the individual and small-group markets — are sold in four levels of coverage: Bronze, Silver, Gold and Platinum. In addition to these categories, Covered California offers a "minimum coverage plan," also known as a "catastrophic plan," which helps protect a person from financial disaster in the event of a serious and expensive medical emergency. Minimum coverage plans are designed to cover excessive medical bills that occur above the limit that you would be able to manage financially. Covered California offers minimum coverage to those up to age 30 or those individuals who prove they are without affordable coverage options or are experiencing financial hardship.

Minimum Essential Coverage

Minimum Essential Coverage means any of the following:

- Government sponsored programs include those covered under:
 - o The Medicare program under part A of title XVIII of the Social Security Act
 - o The Medicaid program under title XIX of the Social Security Act
 - o The CHIP program under title XXI of the Social Security Act
 - o The TRICARE for Life program
 - o The veteran's health care program under chapter 17 of title 38, United States Code
 - o A health plan under section 2504(e) of title 22, United States Code (relating to Peace Corps volunteers)
- Employer-sponsored plan
 - o Coverage under an eligible employer-sponsored plan
- Plans in the individual market
 - o Coverage under a health plan offered in the individual market within a State

- Grand-fathered health plan
 - Coverage under a grandfathered health plan.
- Other coverage
 - Other health benefits coverage, such as a State health benefits risk pool, as the Secretary of Health and Human Services, in coordination with the Secretary, recognizes for purposes of this subsection. (State of WA EEI-16)

Minimum Essential Health Benefits

Benefits that must be covered by a Qualified Health Plan. offered through the Health Benefits Exchange as defined by HHS and health care reform legislation.

Minor Deficiencies

A minor failure to perform or conform to Specifications in the Exchange's judgment as described in the Contract.

Mixed Case or Mixed Household

A Case that has a mix of a Covered California QHP and Medi-Cal. Example, the parents are enrolled with Kaiser and the kids are in Medi-Cal.

Modified Adjusted Gross Income

Adjusted gross income (AGI), modified by adding back in any deductions for passive activity losses, tuition, fees, student loan interest paid, IRAs, half of self-employment tax, employer-paid adoption expenses, and domestic production activities.

Modified Adjusted Gross Income (Medi-Cal Assistance Program)

MAGI (Modified Adjusted Gross Income) is a methodology created under the Affordable Care Act (ACA) to determine financial eligibility for Medi-Cal as well as for premium tax credits and cost-sharing assistance through Covered California, the state's health insurance marketplace.

Multiple Employer Welfare Association

Multiple Employer Welfare Arrangements (MEWAs) provide health and welfare benefits to employees of two or more unrelated employers who are not parties to bona fide collective bargaining agreements. In concept, MEWAs are designed to give small employers access to low-cost health coverage on terms similar to those available to large employers. For certain employers they represent the only available option for providing employees with health care because insurance companies often will not insure small employers that do not fall within their desirable risk category.

Multipurpose Internet Mail Extensions

Multipurpose Internet Mail Extensions (MIME) is an Internet standard that extends the format of email to support: Text in character sets other than ASCII, Non-Text attachments, message bodies with multiple parts, header information in non-ASCII character sets. MIME's use, however, has grown beyond describing the content of email and now is often used to describe content type in general including for the web (see Internet media type) and as a storage for rich content in some commercial products.

Multi-State Plan

Office of Personnel Management will contract with insurers to offer at least two multi-state plans in each Exchange. At least one plan must be offered by a non-profit entity

and at least one plan must not provide coverage for abortions beyond those permitted by federal law. Each multi-state plan must be licensed in each state and must meet the qualifications of a qualified health plan. If a state has lower age rating requirements than 3:1, the state may require multi-state plans to meet the more protective age rating rules. These multi-state plans will be offered separately from the Federal Employees Health Benefit Program and will have a separate risk pool.

N

Nano Video Training

Animated video that is typically 30 seconds to 2 minutes in length, that provides a targeted overview of a specific topic.

National Association of Insurance Commissioners

The National Association of Insurance Commissioners (NAIC) is the U.S. standard-setting and regulatory support organization created and governed by the chief insurance regulators from the 50 states, the District of Columbia and five U.S. territories. Through the NAIC, state insurance regulators establish standards and best practices, conduct peer review, and coordinate their regulatory oversight.

National Automated Clearing House Association

National Automated Clearing House Association (the Electronic Payments Association—ACH)

National Committee of Quality Assurance

The National Committee for Quality Assurance is a private, 501(c)(3) not-for-profit organization dedicated to improving health care quality.

National Health Law Program

National Health Law Program

National Health Law Program

National Health Law Program

National Information Exchange Model

National Information Exchange Model (Organization for standards for information exchange) As of May 2013, development uses NIEM 2.1 standards.

National Provider Identification

A unique ten-digit identification number required by HIPAA for all health care providers in the United States.

Navigator

A service provider who helps people who get insurance through Covered California, such as, self-employed or people who do not have access to insurance through their employers. They provide individuals and families with the information necessary to determine which health insurance option best fits their needs and then help them enroll in their plan of choice.

Navigator grantee

A Covered California Certified Enrollment Entity that was awarded grants to participate in the Navigator Program.

Navigator Program

A program established by federal law to provide fair and impartial information to consumers about enrollment into insurance plans through health benefit exchanges. Grant funds are awarded to Certified Enrollment Entities to perform outreach, education and enrollment assistance to consumers. The Covered California Navigator Program begins in 2014 and will be funded through Covered California operating funds.

Necessary Resources

Contractor shall provide the Staff and all other materials and resources necessary for the performance of the Services.

Negative Action

This is a Medi-Cal term. It refers to doing things like Cancelling or Terminating a person from MC. The state will go thru specific actions with dates specified to achieve the result.

Negotiation Process

A process parties go through to reach an agreement and achieve the goal of agreeing on contract terms that are fair, reasonable and beneficial to both parties.

Network

The telecommunications lines, Equipment, Software, and Services for transmitting Data and other information for the CalHEERS and its Users.

Never Married

This is a SAW status; it means that the person has never been married before. This is different from Single (but it is not clear why and how).

No Increases

Contractor shall not increase the Charges or Maximum Amount due from the Exchange under this Agreement for all Services, Deliverables, or Facilities during the term of this Agreement, except as otherwise specifically permitted in the Agreement. In addition, no cost of living adjustments shall be permitted in the Agreement.

No Wrong Door

Ensures that a customer who approaches the State for health assistance programs is correctly directed to the program for which they are eligible.

Non-Paid Entity

This is an Entity that does not get paid. E.g., a CEE that chooses to not get paid for the work their CEC's do. PBE's are also Non-Paid Entities.

Non-MAGI based Medicaid

Medicaid based services whose eligibility requirements remain the same following the implementation of the new MAGI process beginning 1/1/2014. Process and consumers include:

- No income determination made by Medicaid agency
- SSI, Title IV-E recipients
- Individuals deemed to be receiving SSI
- Express Lane Agency income finding

- Eligibility on the basis of being blind or disabled or need for long-term care services
- Eligibility for Medicare cost sharing assistance
- Medically needy
- Individuals aged 65+

Non-Production

Non-Production

Non-Repudiation

Implies that one party of a transaction cannot deny having received a transaction nor can the other party deny having sent a transaction.

Non-Warranty

Non-Warranty

Notice

A written document given by one party to the other. Except as the parties may otherwise agree, any notice or demand or other communication required or permitted to be given under this Contract or applicable law shall be effective if and only if it is in writing, properly addressed, and either delivered in person, or by a recognized courier service, or deposited with the United States Postal Service as first-class certified mail, postage prepaid, return receipt requested. Notices shall be effective upon receipt or four (4) business days after mailing, whichever is earlier.

Notice Design Document

A document that captures the detailed design components of a Notice. This document is used as input by the application designers and developers to create or update notices. It captures the business needs and purpose as well as the functional, technical details for the notice.

Notice of Action

A written form of documentation to inform customers and/or third parties (i.e., insurers) of the outcome of an enrollment or any life or policy changes.

Notice of Damage

Upon the loss of, destruction of, or damage to any of the Property (except Work Products other than Deliverables), Contractor shall give Notice to the Exchange Project Director thereof and shall take all reasonable steps to protect that Property from further damage.

Notice of Proposed Rule Making

A public notice that is issued by law when an independent agency of the US government wishes to add, remove, or change a rule or regulation as part of the rulemaking process.

Notice Transfer Object

An object which contains parameters to fill notice variables in a notice template.

O**Object Code**

The binary code version of a Software program loaded into a computer's memory to enable it to perform a program function.

OCM Communications Liaison

A State or county representative from one site who works collaboratively with System Integrator OCM team on OCM communication coordination activities and takes ownership for coordinating communication activities across the Medi-Cal changes.

OCM Lead

A staff member of the System Integrator OCM team with responsibility for liaising directly with one or more OCM Change Agent teams and/or OCM Communications Liaisons teams and facilitating the OCM activities with the designated teams.

Offering

An item configured for sale or other financial purposes in ABE, in this case, health insurance.

Office of Administrative Law

A State Department.

Office of Management and Budget

The core mission of OMB is to serve the President of the United States in implementing his vision across the Executive Branch. OMB is the largest component of the Executive Office of the President. It reports directly to the President and helps a wide range of executive departments and agencies across the Federal Government to implement the commitments and priorities of the President.

Office of Personnel Management (CMS)

The U.S. Office of Personnel Management (OPM) serves as the chief human resources agency and personnel policy manager for the Federal Government. OPM provides human resources leadership and support to Federal agencies and helps the Federal workforce achieve their aspirations as they serve the American people. OPM directs human resources and employee management services, administers retirement benefits, manages healthcare and insurance programs, oversees merit-based and inclusive hiring into the civil service, and provides a secure employment process.

Office of Technology & Solutions Integration

The OTSI provides project management, oversight, procurement and support services for a multi-billion-dollar portfolio of high criticality projects. In this capacity, OTSI coordinates communication, collaboration and decision making among project stakeholders and program-side sponsors of the projects. OTSI currently has oversight of the CalHEERS Project for the State of CA.

Official Correspondence

Official correspondence (OC) is used to memorialize CalHEERS State leadership approval of our agreement with a change or clarification being made regarding the System Integrator contract, or other official communication needs between the State and its SI.

On-the-Job Training

Comprises informal training that occurs at various points during the project lifecycle, most likely prior to the technical implementation and prior to the start of the Maintenance Phase. This approach is deployed to teach project-specific tools and methods that are used to operate CalHEERS.

Open Enrollment

A specified period of time in which individuals may change insurance plans and insurance carriers. Open enrollment occurs once a year.

Open Office Sessions

Open Office Sessions are Instructor-led Training delivered to participants over the web. These sessions are provided by the CalHEERS training instructors during the immediate post-implementation period for each CalHEERS release. Instructors provide SCRs and other state employees with a forum for questions and answers.

OpenShift Container Platform

Hybrid cloud foundation for building and scaling containerized applications.\

Operational

The condition when a Software Deliverable, a Service, or the System and Hosting Services are functional in accordance with applicable Specifications and used for their purposes in Production.

Operational Readiness Review

Federal Enterprise Lifecycle Reviews of Exchange of Operational Readiness deliverables.

Operations

Operations covers all things related to supporting the day-to-day needs of CalHEERS and infrastructure supporting the System for things such as: planning, problem management, processes, reporting, interfaces, site/facilities, capacity, backup and recovery, data retention, environments, performance, and hardware/software.

Opt Out (Decline)

An activity performed by a consumer who declines to continue with program enrollment after their program eligibility for that program has been determined. When a consumer opts Out or Declines, a discontinuance of APTC/CSR or MAGI Medi-Cal will be initiated.

Oracle Access Manager

The foundation of the new Oracle Access Management platform. Access Manager provides the core functionality of Web Single Sign On (SSO), authentication, authorization; centralized policy administration and agent management, real-time session management and auditing.

Oracle API

Service Provisional Mark-Up Language

Oracle SQL Developer

An integrated development environment for development and management of Oracle Database.

Oracle® Adaptive Access Manager

Improves the security of sensitive online operations—such as data access, financial transactions, and business processes—by providing real-time risk analytics, risk-based authentication, anti-phishing and anti-malware capabilities.

Oracle® Data Integrator

A Data Warehouse ETL (Extract, Transfer, Load) Tool that processes the moving of data from production to the Data Warehouse.

Oracle® Identity Manager

Used for security. System that maintains URLs and access. If OIM is down the default is to allow no URLs to be mapped to individuals and therefore access is blocked for everyone.

Organizational Change Management

One of the three CalHEERS implementation disciplines, which includes communication with entities through the Change Agents and OCM Communications Liaisons and business process analysis activities.

Organizational Project Management Maturity Model

The Project Management Institute (PMI) methodology for improving organizational project management by using identified project, program and portfolio best practices.

Other Health Products

Non-insurance-based health products that maybe offered on the Exchange, to support customers' health needs. These products include, but are not limited to, Wellness Programs, durable medical equipment and Health Savings Accounts.

Other State Programs

Programs that may be incorporated at a later date such as SNAP and TANF.

Out of Pocket

Direct outlays of cash that may or may not be reimbursed.

Out-of-Pocket Costs

A nonreimbursable expense paid by a patient. This could include any medical benefits that a plan doesn't consider covered services.

Out-of-Pocket Limit

The most one pays during a policy period (usually a calendar year) before your health insurance or plan begins to pay 100 percent of the allowed amount. This limit never includes the customer premium, balance billed charges or health care the customer's health insurance plan doesn't cover. Some health insurance plans can't count all copayments, deductibles, coinsurance payments, out-of-network payments or other expenses toward this limit. In Medicaid, the limit includes premiums.

Outreach and Education

Outreach and Education (sometime this also means Operations Equipment).

Overpayments to Contractor

Contractor shall promptly, but in all cases within 30 Days, pay to the Exchange the full amount of any erroneous payment or overpayment upon Notice of an erroneous payment or overpayment to which Contractor is not entitled or when otherwise discovered by Contractor, provided, however, that such Notice sets forth sufficient detail to substantiate the overpayment.

P

Paperwork Reduction Act of 1985

Small Business Paperwork Reduction Act of 1985 - Amends the Paperwork Reduction Act of 1980 to direct the Director of the Office of Management and Budget to set a goal to reduce the burden on small businesses of Federal collections of information by at least five percent by October 1, 1986, and for each of the next two years by not less than an additional five percent.

Participant Guides

Materials developed for both ILT and CBT that guide trainees throughout the course, including hands-on activities, scenarios, and step-by-step instructions.

Patient Centered Outcomes Research Institute

The Affordable Care Act imposes a fee on issuers of specified health insurance policies and plan sponsors of applicable self-insured health plans to help fund the Patient-Centered Outcomes Research Institute. The fee, required to be reported annually on the second quarter Form 720 and paid by its due date, July 31, is based on the average number of lives covered under the policy or plan.

Patient Protection and Affordable Care Act (Federal)

The comprehensive health care reform law was signed into law on March 23, 2010, and was amended by the Health Care and Education Reconciliation Act on March 30, 2010. The name "Affordable Care Act" is used to refer to the final, amended version of the law.

Payment Error Rate Measurement

The PERM program measures improper payments in Medicaid and CHIP and produces error rates for each program.

Payment Events

The events after which Contractor can issue invoices for the Charges.

Payment Month

Related to CMS, the payment month is defined as the month in which the payment is made.

Per Member Per Month

This is the fee that the Carrier (also known as Issuer) pays Covered California (CC) for participating in the SHOP Medical, Individual Medical, SHOP Dental or Individual Dental markets. Is also referred to as a Participation fee.

Performance

Contractor shall begin to perform the Services on the Execution Date. Contractor shall perform the Services as described in this Agreement.

Performance Standard(s)

A process parties go through to reach an agreement and achieving the goal of concluding a contract that is fair, reasonable and beneficial to both parties.

Periodic Verification

Automated periodic check against the Federal HUB. Occurs six months from eligibility date.

Permanently Residing in the U.S. Under Color of Law

An immigration category that was created by the courts for public benefits eligibility. It is not recognized by the U.S. Citizenship and Immigration Services (USCIS).

~~Personal Health Information~~

~~PHI is, as defined by 45 CFR 160.103, information transmitted or maintained by a covered entity or its business associates in any form or medium. It includes an individual's past, present, or future physical or mental health or condition, the provision of health care to the individual, or the past, present, or future payment for the provision of health care to the individual, and that identifies the individual or for which there is a reasonable basis to believe can be used to identify the individual.~~

Personally Identifiable Information

PII is information that can be used alone or with other information to identify, contact, or locate a single person, or to identify them in context. It includes: (1) A first and last name; (2) A home or other physical address, including street name and name of a city or town; (3) An e-mail address; (4) A telephone number; (5) A social security number; and (6) any other identifier that permits the physical or online contacting of a specific individual. PII also includes information defined as Personal Information in California Civil Code section 1798.3 and section 1798.29(g)-(h)

Physical Data Model

Transforms the Logical Data Model into a design that can be physically implemented on a relational database management system (RDBMS) software and hardware platform. The detailed specifications are used to generate the database.

Physical Media Warranty

If applicable, Contractor warrants that each copy of the Custom Software provided by Contractor is and will be free from physical defects in the media that tangibly embodies the copy. Contractor shall replace, at Contractor's expense including shipping and handling costs, any Custom Software provided by Contractor that does not comply with this warranty.

Physical Safeguards

Physical measures, policies, and procedures to protect a covered entity's electronic information systems and related buildings and equipment, from natural and environmental hazards, and unauthorized intrusion.

Plain Language

Language that the intended audience, including individuals with limited English proficiency, can readily understand and use because that language is concise, well organized, and follows other best practices of plain language writing.

Plan

A set of Health Care coverage rules that a person enrolls in which provides certain benefits. See also Product and Metal.

Plan and Carrier Management

Plan and Carrier Management (retired) – Now using Enrollment as project terminology.

Plan Assessment Fee

The Plan Assessment Fee will be withheld from SHOP Premiums that will consist of two parts, the sustainability % and the Agent commission %. This fee is also known as the Plan Participation Fee.

Plan Based Enroller

A Health Plan employee (or designee) who has completed Covered California approved training and belongs to a Health Plan and is non-compensated with application, plan selection, and enrollment functions in the CalHEERS solution (CalHEERS system role).

Plan Choice and Assister Portal

PCAP is the project name for the CalHEERS enrollment solution and is tracked as Change Request 189474. The PCAP Project scope includes the replacement of the existing Commercial Off-The-Shelf (COTS) product(s) with a custom solution that is integrated with the Health Benefit Exchange (HBEX) to produce a combination of a custom/Salesforce solution for the CalHEERS Eligibility and Enrollment functionality. It also defines the future state of the CalHEERS Enrollment solution that will be in production post Release 23.4.

Plan Dependent

An individual who, according to state law, is allowed to join the family policy.

Plan Management

Plan Management is the maintenance and coordination of health and dental plan related activities between Covered California and Carriers.

Plan Manager

A Covered California employee (or designee) who is responsible for approving QHP submissions and rates, processing appeals, reviewing complaints, and monitoring and decertifying QHPs. Also responsible for reviewing and approving carrier applications for Covered California (CalHEERS system role).

Plan Participation Fee

The Plan Participation Fee will be withheld from SHOP Premiums that will consist of two parts, the sustainability % and the Agent commission %. This fee is also known as the Plan Assessment Fee.

Plan Participation Rate

Can be given as a %.

Plan Year

A 12-month period of benefits coverage under a group health plan. This 12-month period may not be the same as the calendar year.

Please Find Attached

Used to reference email attachments.

Point of Contact

A person or department that can be approached for information or assistance on a specific topic.

Point of Service

A type of managed care group health insurance with characteristics of both an HMO and a PPO. As with an HMO plan there is a designated primary physician and some services are provided through an HMO network, however there is some flexibility as with PPO plans.

Policy

The agreement between the person buying health insurance and the company providing it, describing specific health care services that will be covered, any coverage limitations and any out-of-pocket costs (co-pays) that might be required.

Policy Level Reporting

Reporting at the Policy level.

Portable Document Format

A file format that captures all the elements of a printed document as an electronic image that you can view, navigate, print or forward to others. PDF files are created using Adobe Acrobat or similar products. CalHEERS notices are loaded to the CalHEERS portal as PDF files.

Portal

A web site that collects and displays information from diverse sources in a unified way.

Post Implementation

The period of time immediately following implementation of a release of CalHEERS functionality.

Post-Cutover

Activities that occur following the cutover. Synonymous with the term post-implementation.

Potential Eligibility

The results of the self-assessment screening process which tells a customer what benefits they are potentially eligible for.

Pre-Existing Condition Insurance Plan

A program administered by MRMIB.

Pre-Existing Medical Condition

Any illness or condition a patient has prior to obtaining insurance.

Pre-Existing Software

All computer programs which were developed and owned by Contractor and its Subcontractors prior to the Execution Date or outside the scope of this Agreement, and any modifications thereof and derivative works based therein; Third-Party Software

provided by Contractor to the Exchange under this Agreement; and the Documentation used to describe, maintain and use such Pre-existing Software, including such Third-Party Software.

Pre-JADS

Pre-JAD Sessions are meetings conducted to identify and clarify requirements ensuring a well-defined scope ahead of the Joint Application Design (JAD) sessions. These sessions aim to gather initial input from key participants, align expectations, and set the foundation for a productive and focused JAD phase. The Business Requirements sheet for a Change Request is finalized during Pre-JADs and approved at the end of Pre-JADs to begin Impact Assessment.

Preferred Provider

A provider who has a contract with your health insurer or plan to provide services to you at a discount. Check your policy to see if you can see all preferred providers or if your health insurance or plan has a "tiered" network and you must pay extra to see some providers. Your health insurance or plan may have preferred providers who are also "participating" providers. Participating providers also contract with your health insurer or plan, but the discount may not be as great, and you may have to pay more.

Preferred Provider Organization

A health care delivery system where providers contract with the PPO at various reimbursement levels in return for patient steerage into their practices and/or timely payment. They differ from other health care delivery systems in the way they are financed, providing more choice, benefit flexibility and enrollee access to providers and medical services both in and out-of-network.

Pre-Implementation

The period of time immediately before implementation of a release of CalHEERS functionality.

Preliminary Joint Application Development

Pre-JAD Sessions are an opportunity to introduce system functionality to key project stakeholders, gain a common understanding of requirements and how they support business, validate and approve functionality that fully meets the requirements, and define the scope of work for the detailed design sessions for product configuration and/or extension changes. Pre-JADs take place prior to the formal JAD sessions.

Preliminary Design Review

Federal Enterprise Lifecycle Reviews of Exchange of design deliverables.

Premium

The money paid to an insurance company for coverage. Premiums are usually paid monthly and may be paid in part or in full by your employer.

Premium Assistance

As per Covered CA 6/21/13, use for the individual market only.

Premium Billing, Collections, and Reconciliation

The process where the SHOP and/or Individual Exchange produces and sends QHP enrollment reports by plan and coverage level to employers to enable the employer to pay the appropriate premiums for their employees.

Premium Tax Credit

The subsidized portion or federal contribution, of health insurance premium payments that a customer may qualify for based upon income and family size. Receipt of premium tax credits may come in the advanced form (direct from IRS to a qualified health plan) or via a tax credit filing.

Pre-Note

This is the transaction used to make a dummy \$0.00 payment into a bank account prior to making regular deposits. This was missed in the initial design and A refused to add it. It adds risk that the first payment made will result in errors.

Pre-Operational Readiness Review

Federal Enterprise Lifecycle Reviews of Exchange of Operational Readiness deliverables.

Preventive Services/Preventive Care

Routine health care that includes screenings, checkups and patient counseling to prevent illnesses, disease or other health problems.

Pricing Region

There are 19 pricing regions in California. For health plans that consumers can get through Covered California, either with or without premium assistance, the plans available and their prices vary by region. The easiest way to find the pricing region you live in is to use our Shop and Compare Tool online at <https://www.coveredca.com/shopandcompare/#calculator>. After entering your home ZIP code, the Shop and Compare Tool will show you your pricing region. You may also call our Service Center for assistance.

Primary Care Provider

A physician (medical doctor [M.D.] or doctor of osteopathic medicine [D.O.]), nurse practitioner, clinical nurse specialist or physician assistant, as allowed under state law, who provides, coordinates or helps a patient access a range of health care services.

Priority Support Unit

A part of CCA Service Center. Abbreviation is PSU.

Print-Mail Services

The Services that are provided by the Contractor with respect to the Print Mail Service Center and consisting generally of providing mail processing and printing services for the Project and providing the Print-Mail Service Center, and the hardware, software, communications devices, and other equipment, assets, and infrastructure required for performance of Print-Mail Services, as further described in the Contract.

Privacy Incident

Shall mean either: i) the loss of control, compromise, unauthorized disclosure, unauthorized acquisition, unauthorized access, or any similar term referring to situations where persons other than authorized users and for an other than authorized purpose

have access or potential access to PII, whether physical, or electronic; or ii) a reasonable belief that unauthorized acquisition of PII that compromises the security, confidentiality or integrity of the PII has occurred.

Private Cloud

The utilization of scalable and virtualized computing, storage, and network capabilities for the CalHEERS expanding user and member populations. The CalHEERS private cloud solution will not be shared with any other clients.

Processing

The performance by the Software residing on the Equipment of logical operations and calculations on the Data.

Producer

The service provider of the SOAP Web Service.

Product

A Level Of Coverage Such As HMO Or PPO. A Product Change Is Like From HMO To PPO, A Metal Change Is Not A Product Change. See Also Plan and Metal.

Production

The use of Function(s) in CalHEERS' production environment(s) to perform its regular business operations. The environment(s) where the features associated with eligibility and enrollment for health care affordability plans for CA clients are accessed and the complete set of the CalHEERS online user activities occur. Production includes, but is not limited to, interfaces for data exchange, data input, storage, and output, and infrastructure (cloud-based, on-premises, Software as a Service (SAAS), Infrastructure as a Service (IAAS), etc.).

Production Change Request

Production Change Request

Program Integrity

The planning, prevention, detection, and investigation/recovery activities undertaken to minimize or prevent fraud, waste, and abuse.

Program Integrity Division

Covered California Program Integrity Division. It is a meeting with the Sponsors to discuss Production Tickets. They tell CalHEERS their "must-haves" and CalHEERS Project staff provide responses to any questions about a particular defect.

Project

CalHEERS' design, development, implementation, operations and hosting of the System, as described in the Solicitation, the Response, applicable Deliverables, the Work Plan, and the other parts of the Contract.

Project Cutover Coordinator

The primary contact for the System Integrator Project Cutover Lead, who acts as the coordinator for the cutover activities on the CalHEERS Project.

Project Cutover Lead

The System Integrator lead responsible for planning and executing Project Cutover Activities after the Go-Live decision has been made. The Project Cutover Lead works with the CalHEERS Project Cutover Coordinator.

Project Implementation

The discipline responsible for the management of the processes and tools necessary to plan, manage, and track the activities that support the CalHEERS implementation project wide. This includes the Project Implementation effort and planning and execution of the cutover activities.

Project Implementation Readiness Assessment

The meeting where progress in each of the readiness areas is reviewed and discussed using the Project Implementation Readiness Dashboard.

Project Implementation Readiness Coordinator

The primary contact for the System Integrator Project Implementation Readiness Lead who acts as the coordinator for the project readiness activities on the CalHEERS Project.

Project Implementation Readiness Lead

The System Integrator lead responsible for managing and tracking the Project Implementation Readiness activities in preparation for Go-Live. The Project Implementation Readiness Lead works with the CalHEERS Implementation Readiness Coordinator.

Project Management Maturity

The program or method to systematically improve or mature project management processes.

Project Process Guides

A detailed description of how to execute a process. They are intended to be used for consistency throughout the project. A process may have output artifacts in any of these artifact types.

Project Resource Structure

A breakdown of project personnel from major high-level sponsor and stakeholder organizations down to the CalHEERS State and System Integrator work-performing individuals.

Project Review Baseline

Federal Enterprise Lifecycle Reviews of Exchange Project Management Baseline deliverables.

Project Server

Microsoft® tool used to manage the work plan and report hours against.

Project Web Access

PWA time reporting process.

Property

All Exchange Equipment, the Deliverables, the Work Products, and other Exchange real and personal property, unless otherwise excluded herein.

Protected Health Information

PHI is, as defined by 45 CFR 160.103, information transmitted or maintained by a covered entity or its business associates in any form or medium. It includes an individual's past, present, or future physical or mental health or condition, the provision of health care to the individual, or the past, present, or future payment for the provision of health care to the individual, and that identifies the individual or for which there is a reasonable basis to believe can be used to identify the individual.

Provider

A provider is a physician, hospital, clinic or other individual or institution that has a valid provider agreement with DHCS to provide Medi-Cal services to program beneficiaries.

Public Health Service Act

The operating division of the Health and Human Services Department (HHS) responsible for promoting the protection and advancement of the American population's physical and mental well-being.

Public Records

Contractor acknowledges that this Agreement shall be a public record under State law, subject to California Government Code Section 100508. Any specific information that is claimed by Contractor to be Confidential Information must be clearly identified as such by Contractor.

Q

Qualified (or Qualifying) Life Event

A change in your life that can make you eligible for a special enrollment period to enroll in health coverage. Examples of qualifying life events are moving to a new state, certain changes in your income and changes in your family size (for example, if you marry, divorce or have a baby).

Qualified Dental Plan

Certified dental insurance plans offered to consumers and small businesses purchasing coverage through Covered California.

Qualified Employee

Employees offered coverage through a SHOP by a qualified employer.

Qualified Employer

Employer that has been determined eligible to participate in a SHOP.

Qualified Entity

Any entity that provides a service to the public, to assist with eligibility and enrollment. Qualified Entities may include Navigators, Agents, Consumer Assistance Programs, or less formal entities such as guardians, interested parties and or those with power of attorney.

Qualified Health Plan

Certified health insurance plans offered to consumers and small businesses purchasing coverage through Covered California.

Qualified Health Plan Certification

The process that will grant a “qualification” status to health plans, which will be required for participation on the Exchange.

Qualified Individual

An individual who is determined eligible to purchase health insurance coverage on the Health Insurance Exchange.

Quality Dental Plan

Under the Affordable Care Act, starting in 2014, all dental plans must be certified by the exchange to participation. Plans that receive this certification will provide essential dental benefits, follow established limits on cost-sharing (like deductibles, copayments, and out-of-pocket maximum amounts), and meet other requirements defined by the Exchange.

Quality Health Plan

Under the Affordable Care Act, starting in 2014, all health plans must be certified by the exchange to participation. Plans that receive this certification will provide essential health benefits, follow established limits on cost-sharing (like deductibles, copayments, and out-of-pocket maximum amounts), and meet other requirements defined by the Exchange. (See related item Qualified Health Plan Certification).

Quality of Service

Description or measurement of the overall performance of a service.

Quality Rating System

A rating criteria and process used to determine a Health Plan’s quality rating. This resulting rating may be used to support the certification of qualified health plans.

Quick Reference Guides

Reference guides that provide users with quick and easily accessible information

R

Rational Team Concert

IBM® Rational Team Concert™ is a collaborative software development tool that teams use to manage all aspects of their work, such as iteration and release planning, change management, defect tracking, source control, and build automation.

Reasonable Opportunity Period

It is for the enrollees Covered California needs to provide additional documentation for: citizenship, immigration status, income, etc. They have 95 days to provide docs, if not they will be termed.

Reconciliation

The RX20 is used to update information to MEDS and reconcile the client’s data between CalHEERS and MEDS.

Reconciliation, Enrollment, and Membership

Reconciliation, Enrollment, and Membership covers all Recon activities done by the CCA team and they work with the System Integrator to complete Recon and resolve disputes.

Reconsideration

An action or inquiry made by a customer, or qualified entity acting on behalf of a customer, regarding a potentially incorrect eligibility determination. This step may be taken prior to a formal appeal request.

Redetermination

On an annual basis, a beneficiary's categorical, financial and other eligibility-related circumstances must be re-evaluated to determine whether the individual remains eligible for the program. This re-evaluation process is known as the re-determination.

Reductions in Payments Due

Amounts due the Exchange by Contractor, including but not limited to liquidated or other damages, or claims for damages, may be deducted or set off by the Exchange from any money payable to Contractor pursuant to this Agreement. The Exchange shall provide Notice to Contractor of any such deduction or set-off and 30 Days, opportunity to cure the breach resulting in such damages or resolve the claims for damages prior to exercising such deductions or set-offs.

Reference Materials

Materials developed for CalHEERS users on the job.

Reference Plan

The Reference Plan is the lowest cost plan associated with each of the four tiers presented to the Employer during Employer Plan Selection. This plan is used to provide a total estimated annual premium cost for the Employer based on the selected tier, employee roster data, and rating region. Also known as the Benchmark Plan.

Referral

Collecting data and sending to a corresponding agency, such as DHCS (for MAGI and non-MAGI Medi-Cal) or MRMIB for Access for Infants and Mothers.

Rehabilitative/Rehabilitation Services

Health care services that help you keep, get back or improve skills and functioning for daily living that have been lost or impaired because you were sick, hurt or disabled. These services may include physical and occupational therapy, speech-language pathology and psychiatric rehabilitation services in a variety of inpatient and outpatient settings.

Reinsurance Program

The ACA creates reinsurance program, and corresponding assessment, within each state in order to stabilize the individual market during the first three years of the insurance exchanges, when the risk of adverse selection as a result of the market reforms is the greatest. The assessment is imposed for a limited number of years, beginning in 2014 and ending in 2016 (see "transitional reinsurance program.")

Relationship

A relationship describes how a CI interacts with other linking of one CI to another CI or a CalHEERS Incident, Problem, or Technical Change Record.

Release

The combination of Functions described as a Release in the Response, applicable Deliverables, and the Work Plan.

Remote ID Proofing

Remote Identity (ID) Proofing is intended to verify of the authenticity of consumer's identity, so that Covered California has a reasonable level of assurance that the person filling out an application is the person they purport to be.

Renewal

Annual process which typically occurs every October to redetermine eligibility to the Covered California programs.

Reports

An existing report submitted to the State on a regular basis (various formats).

Reporting Administrator

A Covered California employee (or designee) who has the ability to access and run reports in the CalHEERS solution, including ad-hoc reports (CalHEERS system role).

Request for Proposal

A request for proposal (RFP) is a solicitation made, often through a bidding process, by an agency or company interested in procurement of a commodity, service or valuable asset, to potential suppliers to submit business proposals.

Requirements Traceability Matrix

The RTM contains all project requirements which are individually linked to the deliverables, test cases, or other project activities that confirm the completeness of each requirement.

The Contractor and the CalHEERS Project will utilize the RTM to jointly track completion of the open requirements listed on the RTM. The Contractor will provide Notice to CalHEERS when a Baseline RTM requirement is completed. If CalHEERS does not respond to or agree with Contractor's assertion, CalHEERS and the Contractor will work together in good faith to resolve the concerns. If no such resolution is reached the issue will be addressed via the dispute resolution provisions set forth in this Contract. The Contractor and CalHEERS agree that where CalHEERS accepts a requirement as completed by indicating "Yes" in the RTM under the column heading "Implemented?" the requirements will not be revisited or reconsidered.

Resolution

The approaches (technical, business process or combination) for resolving the OCM identified significant differences, thereby preparing the site for the implementation of the CalHEERS application.

Response feed

That is the terminology most carriers are using for the effectuation of enrollment sent to Covered CA so the case will change from the "Pending to Enrolled" status. This then allows the Hotline / SCRs to make necessary corrections to the case. The Hotline is charged with correcting escalated referrals and requests from Kaiser itself and other

carriers but cannot do so when the case is in Pending status, hence we need the enrollment feed sent again.

Retired Annuitant

Former state employee who comes back but are limited on hours and so work special shifts.

Risk

NIST Special Publication (SP) 800-30 “[t]he net mission impact considering (1) the probability that a particular [threat] will exercise (accidentally trigger or intentionally exploit) a particular [vulnerability] and (2) the resulting impact if this should occur [R]isks arise from legal liability or mission loss due to: 1. Unauthorized (malicious or accidental) disclosure, modification, or destruction of information 2. Unintentional errors and omissions 3. IT disruptions due to natural or man-made disasters 4. Failure to exercise due care and diligence in the implementation and operation of the IT system.”

Risk Adjustment

A statistical process that takes into account the underlying health status and health spending of the enrollees in an insurance plan when looking at their health care outcomes or health care costs.

Risk Adjustment Program

ACA requires states to set up a risk adjustment program for health plans operating both inside and outside the new insurance exchanges. The program assesses a charge on health plans in the state that have low-cost enrollees, the revenue from which is then used to pay plans with high-cost enrollees.

Risk and Issue Management Group

Group responsible for tracking, reviewing, and deciding on the disposition of risks and issues.

Risk Assessment

An evaluation of potential threats against safeguards and security interest and the countermeasures necessary to address potential vulnerabilities. It is a five-step process that provides the decision-maker with a firm foundation upon which to make an informed decision. During a risk assessment, the value of the information, analysis of the threat, and determination of the information’s vulnerability are conducted. Following the completion of these three activities, a determination of the risk rating is made, and countermeasures are considered and implemented, as necessary.

Risk Management

The integrated process of assessing the threat, the vulnerabilities, and the value of the asset, and applying cost-effective countermeasures.

Risk Management Programs

The financial management strategies associated with managing Exchange risk, including reinsurance, risk adjustment and risk corridor programs.

Risk Management Tool

Standard tool that the project uses to log project-level risks.

Roll Backward/Forward

Ability for plans to roll coverage effective dates backward or forward.

Root Cause Analysis

The process of discovering the root cause of problems in order to identify appropriate solutions.

Roster

A list of people. For example, CEC roster will be a list of Counselors. Employer (or Employees) roster is a list of employees enrolled in a plan which will be used, for example, to create the bill. (Only people on the roster could be billed).

Rough Order of Magnitude Cost

Refers to an initial estimate of the cost of a project or parts of a project.

Rules of Behavior

Provides appropriate use of all CalHEERS information technology resources for operators (e.g., developers, system and network administrators, database administrators, testers) including state employees, contractors, and other authorized users which the organization has the authority to impose rules of behavior with regard to system access.

S**Scenario-Based Learning**

A training method that provides trainees with CalHEERS relevant processes using training simulations.

Schedule

The dates described in a Work Plan for deadlines for performance of Services and other Project events and activities.

Security Incident

The act of violating an explicit or implied security policy, which includes attempts (either failed or successful) to gain unauthorized access to a system or its data, unwanted disruption or denial of service, the unauthorized use of a system for the processing or storage of data, and changes to system hardware, firmware, or software characteristics without the owner's knowledge, instruction, or consent. Incidents include the loss of data through theft or device misplacement, loss or misplacement of hardcopy documents, and misrouting of mail, all of which may have the potential to put the data at risk of unauthorized access, use, disclosure, modification, or destruction. Adverse events such as floods, fires, electrical outages, excessive heat are not considered incidents. For purposes of this Agreement, a "Security Incident" shall, in accordance with the HIPAA Security Rule, likewise be deemed to consist of the attempted or successful unauthorized access, use, disclosure, modification or destruction of information or the interference with system operations of CalHEERS (45 CFR §164.304).

Self Service Portal

CalHEERS Help Desk Self Service Portal (SSP). Tickets are entered tickets thru SSP.

Self-Attest or Self-Attestation

An option to provide information (e.g., income) required by an entity without providing the data via authoritative source (e.g., IRS tax return) or attestation via notary public. Self-Attestation requires that you attest that the information you provide is accurate under the risk of perjury. Proposed CMS rules include that for APTC and Cost Share Reduction a head-of-household taxpayer can self-attest their income and household composition when IRS tax return data is not available or is significantly differs from available data.

Self-Hosted Maintenance and Support

Maintenance provided by Contractor when the Exchange does Self-Hosting.

Self-Hosting

Operation of the Software by the Exchange on the Exchange's equipment

Senate Bill

A bill is a proposed law under consideration by the Senate. A bill does not become law until it is passed by the legislature and, in most cases, approved by the executive. Once a bill has been enacted into law, it is called an act or a statute.

Service Center

A Covered California Service Center is a department designated to assist consumers by responding to inquiries and provide tailored information to match consumers health care needs and eligibility with the best plan and coverage. Service Center locations are in Fresno, Irvine, McClellan and Rancho Cordova.

Service Center Representative

A state employee of the Covered California Service Center, and responsible for working directly with Covered California consumers. A county eligibility worker could also fulfill this requirement (CalHEERS system role).

Service Center Representative – Appeals

This is a CalHEERS system role. A Covered California Service Center employee who provides front line support to Consumers, answering questions and entering information in the CalHEERS application on the Consumer's behalf. This employee also has the ability to process appeals.

Service Center Representative – MEDS

This is a CalHEERS system role. A Covered California Service Center employee who provides front line support to Consumers, answering questions and entering information in the CalHEERS application on the Consumer's behalf. This employee also has the ability to process MEDS alerts.

Service Center Supervisor

This is a CalHEERS system role. A Covered California Service Center employee who provides supervisor responsibilities to Service Center Representatives.

Service Center Supervisor – Enhanced

This is a CalHEERS system role. A Covered California Service Center supervisor employee who has enhanced page access capacity, for example the ability to access the Manual Eligibility Determination Page.

Service Level Agreement

The standards to which the System shall perform, and which Services and Deliverables will meet as described in this Contract.

Service Now (Ticket Management System)

Tool used to manage incidents and infrastructure/code.

Service Object Access Protocol User Interface

Test client for web services.

Service Oriented Architecture

A method that allows differing services to communicate together through interfaces and messages. This is becoming more common in web-based applications.

Service(s)

The tasks and services to be performed by the Contractor (and/or its Subcontractors), as described in the Contract.

Share of Cost

The amount that a Medi-Cal beneficiary must pay or obligate each month for medical costs before Medi-Cal will pay for services rendered if the beneficiary earns more than the maintenance need permitted under Title XIX.

Shared Services

Refers to the provision of a service by one part of an organization or group where that service had previously been found in more than one part of the organization or group. Thus, the funding and resourcing of the service is shared and the providing department effectively becomes an internal service provider.

SharePoint

Microsoft® tool used to store and share project documentation.

Shop and Compare Tools

Tools that will be made available to facilitate the comparison of available QHPs. The Exchange will support tools for both the individual and the SHOP Exchange.

Significant Difference

The CalHEERS OCM categorization of an identified business process or role difference that requires development of a resolution; identified based on the extent of the change required, and significance of the impact to the site.

Silver plan

Covered California health insurance plans — and all health plans in the individual and small-group markets — are sold in four levels of coverage: Bronze, Silver, Gold and Platinum. As the metal category increases in value, so does the percentage of medical expenses that a health plan covers compared with what you are expected to pay in co-pays and deductibles. On average, Platinum-level plans cover 90 percent of health care costs, and you pay 10 percent; Gold plans cover 80 percent, while you pay 20 percent; Silver plans cover 70 percent, while you pay 30 percent; and Bronze plans cover 60 percent, while you pay 40 percent. Plans in higher metal categories have higher monthly premiums, but when you need medical care, you pay less. Alternatively, you can choose

to pay a lower monthly premium, and when you need medical care, you pay more. You can choose the level of coverage that best meets your health needs and budget.

Simple Object Access Protocol

A protocol specification for exchanging structured information in the implementation of Web Services in computer networks. It relies on XML Information Set for its message format, and usually relies on other Application Layer protocols, most notably Hypertext Transfer Protocol (HTTP) or Simple Mail Transfer Protocol (SMTP), for message negotiation and transmission.

Single Sign On

Single sign-on (SSO) is a property of access control of multiple related, but independent software systems. With this property a user logs in once and gains access to all systems without being prompted to log in again at each of them. Conversely, Single sign-off is the property whereby a single action of signing out terminates access to multiple software systems.

Site Coordinator

A site staff member leading the CalHEERS implementation for their specific site.

Site Implementation

Site implementation is the discipline responsible for overall management of the implementation effort and is led by the Site Implementation Manager.

Site Implementation Manager

Site implementation is the discipline responsible for overall management of the implementation effort and is led by the Site Implementation Manager.

Site Implementation Readiness Assessment Template

Template that provides a metrics-based evaluation of readiness status that leads to an evaluation of the likelihood of a successful cutover. Interchangeable with “Site Implementation readiness Review Template,” below.

Site Implementation Readiness Review Template

Template used to assess site readiness, used at a site meeting conducted ten days prior to cutover. Review of the SIRR results in an actual recommendation as to whether the site is ready for cutover, that feeds into the Project Implementation Go/No-Go decision.

Site(s)

The locations for the Equipment, Software, and Project staff, including without limitation the Facilities, Contractor’s back up site and Contractor’s training sites.

Small Business Health Option Program

The component of Covered California designed to allow small businesses to shop for and enroll their employees in qualified health plans.

Small Business Tax Credit (ends 2016)

A tax credit for small businesses that have less than 25 full-time employees, pay an average wage of less than \$50,000 a year and pay at least half of employee health insurance premiums.

Snippets

Pulled into a notice which is Information specific to a client or decision.

Social Security Administration

SSA is an independent government agency responsible for the Social Security system which provides income to retired citizens 65 years and older.

Social Security Number

In the United States, a Social Security number (SSN) is a nine-digit number issued to U.S. citizens, permanent residents, and temporary (working) residents under section 205(c)(2) of the Social Security Act, codified as 42 U.S.C. § 405(c)(2). The number is issued to an individual by the Social Security Administration, an independent agency of the United States government. Its primary purpose is to track individuals for Social Security purposes.

Soft Pause

Soft Pause is when a member (Parent, Child, Aged, Blind or Disabled) who is on Medi-Cal is found to be no longer eligible for the program that they are on. The Soft Pause indicator is set for the member. They continue to get services under the same Medi-Cal Aid Code while it is determined whether they are eligible for other programs or not. Soft Pause is typically about a 30-day continuation but could be longer. They will be taken off soft pause by either being discontinued from Medi-Cal or is placed in some other program. This is an action that is done by the Counties.

Software as a Service

A software distribution model in which applications are hosted by a vendor or service provider and made available to customers over a network, typically the Internet.

Source Code

The series of instructions to a computer for carrying out the various tasks that are performed by a computer program, expressed in a programming language that is easily comprehensible to appropriately trained persons and that translates such instructions into Object Code which then directs the computer to perform its functions.

Source of Record

Source of Record. The system or entity that stores or originates the actual value. Aka Source of Truth or System of Record. E.g., CalHEERS is the SOR for an individual's address as it is entered by the individual into CalHEERS. The Carriers are the SOR for the Effective Date for a Member as they are the ones who receive payment and then notify CalHEERS.

Special Enrollment

The opportunity for people who experience a life-changing event (such as the loss of a job, a divorce, the death of a spouse, or the birth of a child) to sign up immediately in a health insurance plan, either through Covered California or through an unrelated insurance company, even if it is outside of the plan's specified open-enrollment period.

Special Enrollment Period

A period during which a qualified individual or enrollee who experiences certain qualifying events may enroll in, or change enrollment in, a QHP through the Exchange outside of the initial and annual open enrollment periods.

Specifications

The technical, functional, and other written specifications that define the requirements for the Project, as described in the Contract, -prior Deliverables or Services which have received Acceptance, the Service Level Agreements, executed Change Requests, all applicable State and federal laws and regulations (as of the execution date and thereafter as addressed in executed Change Requests), and the requirements established by the Information Exchange Agreement. The Specifications are, by this reference, made a part of this Contract, as though completely set forth herein.

Spoofing

Threat action aimed to illegally access and uses another user's credentials, such as username and password.

Spoofing, Tampering, Repudiation, Information (Disclosure), Denial (of service), Elevation (of Privilege)

Spoofing identity, Tampering with data, Repudiation and nonrepudiation, Information Disclosure, Denial of service, Elevation of Privilege

Staff

The Contractor's employees, Subcontractors and agents who shall provide the Services on behalf of Contractor.

Stakeholder Analysis

The process of identifying individuals or groups that are likely to affect or be affected by the proposed change and assessing them in relation to the change.

Standard Operating Procedures (SOP)

Specifically for Operations, an existing process, usually to support of the system and usually has an output in a spreadsheet. Examples include batch runs, daily maintenance, upgrades, license renewals.

State Administrative Manual (California)

The State Administrative Manual (SAM) is a reference source for statewide policies, procedures, requirements and information developed and issued by authoring agencies such as the Governor's Office, Department of General Services (DGS), Department of Finance (DOF), and Department of Human Resources (CalHR). In order to provide a uniform approach to statewide management policy, the contents have the approval of and are published by the authority of the DOF Director and the DGS Director.

State Controllers Office

The Controller is the state's independent fiscal watchdog, providing sound fiscal control over more than \$100 billion in receipts and disbursements of public funds a year, offering fiscal guidance to local governments and uncovering fraud and abuse of taxpayer dollars.

State Project Director

The State Project Director is responsible for planning, directing, and overseeing the Project, and ensure that Deliverables and Functionality are achieved as defined in the Contract, Project Charter, funding documentation and subsequent Project plans. The Project Director provides leadership and strategic direction to the organization to ensure

Project and organization objectives are accomplished via effective Project management. The Contractor will report to the State Project Director.

The State Project Director is also responsible for the management of all resources assigned to the Project, serves as the primary liaison between the Project and the Project Sponsors and Steering Committee, and escalates decisions and issues as needed. The Project Director coordinates Project related issues with other efforts, reviews and resolves Project issues not resolved at lower levels and directs the Project management Functions. The Project Director acts as the principal interface to the Contractors.

Statement of Standards for Attestation Engagements (SSAE) 16

A regulation created by the Auditing Standards Board (ASB) of the American Institute of Certified Public Accountants (AICPA) for redefining and updated how service companies report on compliance controls.

Statement of Work

Captures a detailed overview of the project in all its dimensions.

Statewide Automated Welfare System (Consortium)

Statewide Automated Welfare System (SAWS) is a CalHEERS Interface partner. SAWS is used to administer intake, eligibility determination and benefit calculation, re-determination, benefit issuance, case management, fair hearings, quality control, fraud and reporting for CalWORKs, Medi-Cal and SNAP programs. The SAWS consist of two separate county consortia systems, CalSAWS and CalWIN.

Statewide Client Index

A DHCS system that generates and controls CINs. It allows access to a beneficiary's information for file clearance purposes used by several state agencies and departments to establish identity information and assign and individual CINs.

Statewide Client Index Number

Identifier used in MEDS.

Status at a Glance

A type of Report that shows the status of tasks in an easy-to-read format.

Strategic Prioritization with Executive Approval for Research

A collaborative work group made of leaders from CCA, DHCS, CWDA and CalHEERS State whose purpose is to identify and strategically prioritize research initiatives that drive HCD towards fulfilling the UX vision for CalHEERS.

Structured Query Language

Often shortened to SQL, it is a language used to view or update information within a database.

Subcontractor

A person, partnership, or company, which is not in the employment of or owned by Contractor and which is performing Services under this Contract under a separate agreement with and/or on behalf of Contractor.

Subject Matter Expert

A person who is an expert in a particular area or topic.

Sub-Process

A compound activity that is included within a process.

Subscriber ID

For the Individual market, the Subscriber ID in the 834 is the member ID of the primary tax filer (or primary coverage person). For the SHOP market, the Subscriber ID in the 834 and 820 is the member ID of the employee.

Subsidy

Cost-sharing subsidies and tax credits will reduce the cost of premiums and other out-of-pocket expenses for health coverage that qualifying individuals or families purchase through Covered California. The preferred way of describing this in consumer-facing text is premium assistance.

Summary of Benefits and Coverage

An easy-to-read summary that lets you make apples-to-apples comparisons of costs and coverage between health plans. You can compare options based on price, benefits and other features that may be important to you. You'll get a summary of benefits and coverage (SBC) when you shop for coverage on your own or through your job, renew or change coverage, or request an SBC from the health insurance company.

Support

The technical and customer support Services which are described as such in the Solicitation, the Response and in the Work Plan

Surrender of Property

Contractor shall surrender to the Exchange all Property upon the earlier of it no longer being required or termination of this Contract (as provided in Section 14.5 of CalHEERS SDMO Special Provisions) or expiration (in accordance with the applicable Transition Plan Deliverable) of this Agreement.

System Center Configuration Manager

A lifecycle management tool from Microsoft to keep track of a network's inventory, tracking application installation, deploying updates and security patches.

System Change Request

A written form used by Contractor and the Exchange to describe an Enhancement.

System for Electronic Rate and Form Filing

This system was developed by the National Association of Insurance Commissioners (NAIC) as an effective and efficient means for Insurance Carriers to transmit policy rate and form filings between the carrier and state regulators. It is also used by carriers to load their plan and rate information into CalHEERS. Once loaded, the plan information is available to consumers for selection through the Covered California website.

System Integrator

A system Integrator is a professional organization or entity that implements enterprise-wide IT applications, brings together component subsystems into a whole and ensuring

that those subsystems function together and who governs the deployment-to-operation lifecycle of a complex IT solution within an organization.

System Requirements Management Tool

The System Requirements Management Tool (SRMT) is the ALM Requirements Module used to maintain and trace system requirements for CalHEERS.

System Testing

Testing that is performed on the Releases and System and Hosting Services (in whole or in part) by the Contractor before beginning Acceptance Tests on the Releases and System and Hosting Services as further defined in the Test Plan and Test Reports Deliverables and Work Plan.

T

Target State Architecture

Framework that defines the architectural products and solutions required for the implementation of the CalHEERS Technology Refresh Initiative, which aims to replace proprietary legacy software with scalable technology and architecture running natively with the cloud.

Tax Credit

One of the largest premium assistance programs for health insurance. Starting in 2014, it helps consumers pay health insurance premiums. Tax credits will also be available to small businesses with no more than 25 full-time-equivalent employees to help offset the cost of providing coverage. The preferred way of describing this in consumer-facing text is premium assistance, but the phrase "tax credit" may be used in employer-facing text. As per Covered CA 6/21/13 use Tax Credit in SHOP or when referring to the employer market. Use Premium Assistance for the individual market only.

Tax Dependent

An individual who is claimed by another for tax purposes. The individual who is claimed is called a tax dependent.

Tax Household

The taxpayer(s) and any individuals who are claimed as dependents on one federal income tax return. A tax household may include a spouse or dependents.

Tax Penalty

Starting in 2014, consumers who don't have health insurance will pay a tax penalty, starting at \$95 per individual, \$285 per family, or 1 percent of income, whichever is greater. In 2016 it is \$695 per individual, \$2085 per family, or 2.5 percent of income. Exempt are those who make too little money to file a federal tax return and those ineligible for premium assistance and who would have to spend more than 8 percent of their household income on the lowest-cost Bronze Plan.

Taxes

Contractor shall remit to the California Board of Equalization sales and use taxes to the extent they are applicable to Deliverables or Services provided by Contractor to the Exchange. Contractor may charge the Exchange for such sales and use taxes on such Deliverables or Services on applicable invoices, and the Exchange shall reimburse Contractor for such taxes. However, Contractor must pay all other applicable taxes

under the Agreement including, but not limited to, taxes based on Contractor's income or revenue, and personal property taxes levied or assessed on Contractor's personal property to which the Exchange does not hold title.

Technical Report Type 3

Technical reports that describe the 834, 820, 999, TA1 etc. transaction types. Available at the WPC website <http://www.wpc-edi.com/>

Template

Usually in the form of a document, a file with a basic outline for work that needs to be created or brought to current.

Temporary Assistance for Needy Families

A federal assistance program providing cash assistance to indigent families with dependent children.

Term

The term for the Agreement shall begin on the Execution Date and shall continue for five years unless terminated earlier as provided in the Agreement.

Text Telephone

A special telephone device used by the hearing or speech impaired to communicate by typing messages back and forth instead of talking or listening. Sometimes referenced as teleprinter or teletypewriter (TTY), an electromechanical typewriter paired with a communication channel.

The Act

Social Security Act

The Code

Internal Revenue Code of 1986

The Exchange's Property

The Exchange will provide Contractor access to and use of the Exchange's Property as described in a Deliverable.

The Federal Managers' Financial Integrity Act

The Federal Managers' Financial Integrity Act (FMFIA) (of 1982) requires agencies to establish internal control and financial systems that provide reasonable assurance of achieving the three objectives of internal control, which are: effectiveness and efficiency of Operations, Compliance with regulations and applicable laws, and reliability of financial reporting.

Third Party Software Licenses

~~Prior to utilizing any Third Party Software product that may be included as part of a Software Deliverable to the Exchange and that could be used directly by the Exchange if the Third Party Software would be installed on the Exchange's Equipment, Contractor shall provide to the Exchange copies of any applicable license agreement from the licensor of the Third Party Software to allow the Exchange to pre approve such license agreement.~~

Threat

An adapted definition of threat, from NIST SP 800-30, is “[t]he potential for a person or thing to exercise (accidentally trigger or intentionally exploit) a specific vulnerability.” There are several types of threats that may occur within an information system or operating environment. Threats may be grouped into general categories such as natural, human, and environmental.”

To-Be

The resulting site environment once the CalHEERS application is implemented in a site.

To-Be Business Process Model

A business process model that portrays how a business process will be structured in the future based on the use of the CalHEERS solution.

Tool

An application or application data file that the project uses that may generate a report or be a vehicle for referencing specific information.

Training

The discipline responsible for the design, development, and delivery of CalHEERS training. Training is designed to prepare users to do their jobs using the system and help consumers to understand how to navigate the CalHEERS application to select and obtain health coverage.

Training Coordinator

A site staff member leading the CalHEERS training for their specific site.

Training Environment

During training courses, trainees will enter data into the CalHEERS training environment. It is similar to the CalHEERS production application but does not use live data. Each course’s practice scenarios can be set up and executed by participants in the Training Environment.

Training Lead

The System Integrator lead responsible for oversight of the Training team that provides training focused on Consumers, Assisters, Eligibility Administrators, and CalHEERS Project staff.

Training Materials

Materials in various formats created to support an OCM, educational, training, or other process.

Train-the-Trainer

Training material with Trainer notes so that Trainers can train other employees and deliver the course independently.

Transition

Transition is the process to implement an awarded contract with minimal issues or disruption to the State. Transition refers to the changeover from:

- One Contract to another; and/or
- From one Contractor to another; or

- For every Contract, consideration shall be given to both the transition in and out requirements.

Transition Management

The implementing, planning, and monitoring of a change in contract from one company or organization to another.

Transitional Reinsurance Program

The ACA creates reinsurance program, and corresponding assessment, within each state in order to stabilize the individual market during the first three years of the insurance exchanges, when the risk of adverse selection as a result of the market reforms is the greatest. The assessment is imposed for a limited number of years; beginning in 2014 and ending in 2016 (see “reinsurance”)

Transition-In

Transition-In is those activities the Contractor must perform where the incumbent contractor must transition contract operations to the State, the Contractor or a third party.

Transition-Out

Transition-Out are those activities the Contractor must perform where it must transition contract operations to the State, another contractor or a Third-Party.

TriCare

Government Health Insurance considered to be minimal essential coverage.

True Cost

The Cost the System Integrator (SI) paid for, and in turn charges the State, for an item or service that includes no mark up, kick-back or labor costs. Under this Contract, True Cost only applies to Hardware, Software, and Cloud Services as identified in the Statement of Work.

Truven

Truven is a contractor to Covered California working to set-up a data warehouse for us that will incorporate claims processing (the majority of the data). EAS stands for Enterprise Health Analytics Solution project. Carriers will be making monthly data submissions to us through Truven.

U**Unauthorized Code**

Any: (i) virus, Trojan horse, worm or other software routines or equipment components designed to permit unauthorized access to disable, erase, or otherwise harm Software, Equipment, or Data or to perform any other such actions; and (ii) back door, time bomb, drop dead device, or other software routine designed to disable a computer program automatically with the passage of time or under the positive control of a person other than a licensee of the Software. Unauthorized Code does not include software routines in a computer program, if any, designed to permit an owner of the computer program (or other person acting by authority of the owner) to obtain access to a licensee's computer system(s) (e.g., remote access via modem) solely for purposes of maintenance or Operations.

Update County Of Responsibility

The HX05 is a batch interface from CalHEERS to MEDS to report a transfer of responsibility for a client's case from one county to another.

Update Demographics

The HX12 is a batch interface from CalHEERS to MEDS to update client information for a client who is active in any segment on MEDS.

Uptime

The time that the entire System and Hosting Services are Operational, as measured 24-hours-a-day, Monday through Sunday, on a monthly basis, except for mutually agreed upon scheduled maintenance activities. Uptime is referred to as "Availability". If the CalHEERS exercises its Self-Hosting Option, Uptime shall only apply to the System.

Urgent Care

Care for an illness, injury or condition serious enough that a reasonable person would seek care right away, but not so severe as to require emergency room care.

Use Case

A sequence of steps that details how an individual interacts with the system.

Use of Property

Any Property furnished to Contractor by the Exchange shall, unless otherwise provided herein, or approved in writing by the Exchange Project Director, be used only for the performance of its obligations under and subject to the terms of this Agreement.

User Account

A set of login, password, demographic and other information related to a CalHEERS system identity.

User Experience

UX (User Experience) refers to a person's emotions and attitudes about using a particular product, system or service. It includes the practical, experiential, affective, meaningful and valuable aspects of human-computer interaction and product ownership.

User Role

A set of responsibilities or job functions assigned to or expected of a person or group of individuals. Individuals assigned to a role must be able to complete functions associated with the role.

User(s)

Parties who will have use of and access to the System and Services.

V**Validation, Enrichment, Transformation, Routing, and Service Operation**

The elements of an infrastructure for key service integration that includes:

- A Validation (V) request
- An Enrichment (E) request which adds additional information from internal and external data sources

- Inbound and outbound data transformation (T) to transform inbound data to canonical format and outbound data to the external target format
- Configuration-driven routing (R) to dynamically route the request to the appropriate service/process
- Service Operation (O)

Variable Text

Text which can change in each letter such as a name or address.

Versions

Unless otherwise mutually agreed to in writing, Contractor shall, during the Project, maintain any and all Third Party Software products at their most current version or no more than one version back from the most current version at no additional charge for such Services.

Very Lawful Presence (Services)

The VLP service suite is comprised of multiple services that are available to state-based exchanges (SBE) for the purpose of verifying consumer immigration information. This information will be verified against attested information from the consumer's health insurance application. The federal hub (FDSH) interfaces with the Department of Homeland Security (DHS) to retrieve immigration information based on the requests from the SBE.

Veterans Administration

Department of Veterans Affairs

Virtual Private Network

Tool used to connect to the data centers in order to access many of the above-mentioned tools.

W**Web Based Training**

Web-based training is any form of training that is delivered online.

Web Conference

Web Conference Courses are Instructor-led Training but delivered in a Virtual Classroom. Participants attend instructor-led system demonstrations remotely and have the opportunity to interact with the instructors to ask questions and get answers.

Web Portal

A web portal or links page is a web site that functions as a point of access to information in the World Wide Web.

Web Services Definition Layer

An XML-based interface definition language that is used for describing the functionality offered by a web service.

Webinar

An Instructor-led training held via the Internet. Trainees will register and sign up for webinars using the Covered California LMS.

Wellness Program

A program intended to improve and promote health and fitness that's usually offered through the workplace, although insurance plans can offer them directly to their enrollees. The program allows your employer or plan to offer you premium discounts, cash rewards, gym memberships, and other incentives to participate. Some examples of wellness programs include programs to help you stop smoking, diabetes management programs, weight loss programs, and preventative health screenings.

Wireframe

A representative illustration of the functional design of a CalHEERS application page.

Wireframe Page Specifications

A visual guide that represents the skeletal framework of a website.

Withdraw (Application Withdraw)

An activity performed by a consumer who withdraw his or her application prior to submission of the application and therefore eligibility determination is not calculated.

Withholding Payments

If a Contractor fails to deliver Deliverables or to provide Services which satisfy Contractor's obligations hereunder, the Exchange may provide Notice to Contractor of such failure and, if Contractor fails to correct such failure within 30 Days of the date of such Notice, shall have the right to withhold payments due hereunder for (i) the Deliverables or Services which Contractor has failed to deliver or provide as required in the Agreement, respectively, and (ii) Key Deliverables, milestones (in the Cost Schedules described in Exhibit A), Hosting Services, and Operations and Maintenance Services adversely affected by such failures in the Exchange's reasonable judgment. The Exchange may withhold any such payments due hereunder to Contractor, without penalty or work stoppage by Contractor, until such failure to perform is cured.

Work Plan

The overall plan and delineation of tasks, activities and events to be performed, Deliverables to be produced, Services to be provided, and associated resource requirements with regard to the Project. Each revised Work Plan shall be incorporated herein upon its Acceptance by the CalHEERS Project.

Work Product

New artifacts to be created to support a new process, new deliverable, or new report as a status or output of a process. Deliverables and products produced by Contractor under this Contract including but not limited to, Deliverables, models, processes, techniques, findings, conclusions, recommendations, reports, designs, plans, diagrams, drawings, Configurations, Custom Software, databases, documents, pamphlets, advertisements, books, magazines, surveys, studies, computer programs, films, tapes, and/or sound reproductions, to the extent provided by law.

Work Product Tool

An application or application data file that the project uses that may generate a report or be a vehicle for referencing specific information.

X**XML Schema**

It is used in the interface with SAWS.

Y
Z

APPENDIX D - COST WORKBOOK

INTRODUCTION - BIDDER COST WORKBOOK

This worksheet provides general instructions for completing the OTSI CalHEERS RFP #73040873, Appendix D - Cost Workbook, which is required to be submitted as part of the bidders' proposals. This worksheet also gives an overview of the various worksheets that bidders must complete to arrive at the overall estimated costs for the contract. For evaluation purposes, the different cost categories within this cost workbook fall into one of two designations; Evaluated and Unevaluated.

Instructions (Important - Please Read These General Instructions First):

- 1) Input the bidding company's name at the top of worksheet D-1, Cell B1, and the name will be auto-populated on all the worksheets.
- 2) Please note the following pertaining to the color coding of cells within each worksheet:
 - Cells filled Yellow = Bidders shall populate data in Yellow cells only, unless worksheet instructions specify otherwise.
 - Cells filled Green or Grey = Data within these cells is not to be altered by bidders, unless worksheet instructions specify otherwise.
 - Cells filled Light Green or White = These cells are formula-driven and will be auto-populated via formulas provided by the State, except where worksheet instructions state otherwise.
 - Cells filled Light Blue = Data the State is providing for consideration.
- 3) Bidders need not worry about rounding as the State has implemented formulas that include rounding within Appendix D-1, Total Cost Summary, at the Cost Category level.
- 4) Bidders must provide costs within all years identified in this cost workbook. If the State chooses to not exercise any of the option years (years 6-10), contract year 5 will be considered the Transition-Out year.
- 5) Additional rows may be added to worksheets where specified in the instructions. However, bidders are not permitted to delete any rows or columns.
- 6) If additional rows are inserted by the bidder, it is the bidder's responsibility to ensure the formulas are carried down accurately.
- 7) Note that the State will not be held responsible for any miscalculations due to additional rows or otherwise altering of the worksheet by the bidder.

Summary of Worksheets:

- Tab D-1, Total Cost Summary - Identifies the total estimated cost of the proposed contract summarized in a single worksheet using the data from the other worksheets in the workbook.
- Tab D-2, Instructions - Provides detailed instructions for filling out the D-2, SDMO Hardware Cost worksheet.
- Tab D-2, SDMO Hardware Costs- This worksheet identifies the Bidder costs for Hardware.
- Tab D-3, Instructions - Provides detailed instructions for filling out the D-3, SDMO Software Costs and the Service Center Software Costs worksheets.
- Tab D-3, SDMO Software Costs and Service Center Costs - This worksheet identifies the D-3, SDMO Software Costs and Service Center Software Costs.
- Tab D-4, Instructions - Provides detailed instructions for filling out the D-4, Cloud Hosting Data Center Services Costs and Service Center Cloud Hosting Data Center Services Costs worksheets.
- Tab D-4, Cloud Hosting Data Center Services Costs - This worksheet identifies the Bidder costs for D-4, Cloud Hosting Data Center Services and Service Center Cloud Hosting Data Center Services Costs.
- Tab D-5, Instructions - Provides detailed instructions for filling out the D-5, SDMO Fixed Price Onshore Costs worksheet.
- Tab D-5, SDMO Fixed Price Onshore Costs - This worksheet identifies the Bidder onshore costs for the activities identified in the Statement of Work. (All Key Staff, except the Transition Manager, must be costed under Fixed Price Onshore/Offshore Costs.)
- Tab D-5.1, Instructions - Provides detailed instructions for filling out the D-5.1, SDMO Fixed Price Onshore Costs (Year 1) worksheet.
- Tab D-5.1, SDMO Fixed Price Onshore Costs (Year 1) - Identifies the Bidder Year 1 onshore costs, for the activities identified in the Statement of Work. (All Key Staff, except the Transition Manager, must be costed under Fixed Price Onshore/Offshore Costs.)
- Tab D-5.2, Instructions - Provides detailed instructions for filling out the D-5.2, SDMO F.P PSS Onshore Costs worksheet and the D-5.3, SDMO F.P.PSS Onshore Costs (Year 1) worksheet.
- Tab D-5.2, SDMO F.P. PSS Onshore Costs worksheet.
- Tab D-5.3, SDMO F.P. PSS Onshore Costs (Year 1) worksheet.
- Tab D-5.4, Instructions - Provides instructions for filling out the D-5.4, SDMO F.P. - Offshore Costs worksheet.
- Tab D-5.4, SDMO F.P. - Offshore Costs - This worksheet collects the Bidder detailed onshore costs for the Project Support Services activities identified in the Statement of Work.
- Tab D-5.5, Instructions - Provides instructions for filling out the D-5.5, SDMO F.P. Offshore Costs (Year 1) worksheet.
- Tab D-5.5, SDMO F.P. Offshore Costs (Year 1) - Identifies the Bidder Year 1 Offshore costs, for the activities identified in the Statement of Work. (All Key Staff, except the Transition Manager, must be costed under Fixed Price Onshore/Offshore Costs.)
- Tab D-5.6, Instructions - Provides detailed instructions for filling out the D-5.6, SDMO Fixed Price PSS Offshore worksheet & D-5.7 SDMO Fixed Price Offshore (Year 1) - PSS worksheet.
- Tab D-5.6, SDMO Fixed Price Offshore Costs - PSS - This worksheet identifies the Bidder offshore costs for the activities identified in the Statement of Work. (All Key Staff, except the Transition Manager, must be costed under Fixed Price Onshore/Offshore Costs.)
- Tab D-5.7, SDMO Fixed Price Offshore Costs (Year 1) - PSS - Identifies the Bidder Year 1 offshore costs, for the activities identified in the Statement of Work. (All Key Staff, except the Transition Manager, must be costed under Fixed Price Onshore/Offshore Costs.)

- Tab D-6, Transaction Based Costs - Identifies the Bidder costs for Transaction-Based services based on Transaction types and estimated volumes provided by the State.
- Tab D-7, Instructions - Provides detailed instructions for filling out the D-7, System Changes Costs worksheet.
- Tab D-7, Onshore System Changes Costs - This worksheet identifies the Bidder costs for Onshore System Change Work which is directed via the change management process outlined in the Statement of Work.
- Tab D-7.1, Onshore System Changes Staffing Rates - This worksheet identifies the Onshore Hourly Staff Rates the Bidder will use when performing onshore system change work as defined in the Statement of Work. The onshore staffing rates identified will auto-populate into D-7, Onshore System Changes Costs.
- Tab D-7.2, Instructions - Provides detailed instructions for filling out the D-7.2, Offshore System Changes Costs worksheet.
- Tab D-7.2, Offshore System Changes Costs - This worksheet identifies the Bidder costs for Offshore System Change Work which is directed via the change management process outlined in the Statement of Work.
- Tab D-7.3, Offshore System Changes Staffing Rates - This worksheet identifies the Offshore Hourly Staff Rates the Bidder will use when performing offshore system change work as defined in the Statement of Work. The offshore staffing rates identified will auto-populate into D-7.2, Offshore System Changes Costs.
- Tab D-8, Transition-In (TIP1 & TIP2) Costs - This worksheet identifies the Bidder costs for Transition-In as defined in SOW Section 7.1, TRANSITION-IN, including costs related to the Transition Manager, Transition-In related Deliverables (identified in the Transition-In Milestones), and the Transition-In associated performance bond.
- Tab D-8.1, Transition-In (TIP1 & TIP2) Payment Milestones - This worksheet uses the cost data from D-8 to calculate the five (5) milestone related payments that the Bidder will receive upon successful completion of the Transition-In milestones.
- Tab D-8.2, Transition-Out Costs - This worksheet identifies the Bidder costs for Transition-Out as defined in SOW Section 7.3, TRANSITION-OUT, including costs related to the Transition Manager and the Transition-Out related deliverables (identified in the Transition-Out Milestones).
- Tab D-8.3, Transition-Out Payment Milestones - This worksheet uses the data from D-8.2 to calculate the five (5) milestone related payments that the Bidder will receive upon successful completion of the Transition-Out milestones.

<Vendor Name>

APPENDIX D-1, INSTRUCTIONS - TOTAL COST SUMMARY

DO NOT MAKE ANY CHANGES TO THIS WORKSHEET. IT IS FORMULA-DRIVEN AND PULLS COST DATA FROM THE OTHER WORKSHEETS IN THIS WORKBOOK.

Appendix D-1, TOTAL COST SUMMARY, summarizes all the costs associated with the Bidder's proposal, both evaluated and unevaluated, for purposes of the procurement.

Line 1 - Shows Bid Amount A which is assigned an evaluation point value of 2,000 of the total 3,500 cost points. This subtotal includes Lines 2 through 5.

Line 6 - Shows Bid Amount B which is assigned an evaluation point value of 300 of the total 3,500 cost points. This subtotal includes Line 7.

Line 8 - Shows Bid Amount C which is assigned an evaluation point value of 1,000 of the total 3,500 cost points. This subtotal includes Line 9.

Line 10 - Shows Bid Amount D which is assigned an evaluation point value of 200 of the total 3,500 cost points. This subtotal includes Lines 11 and 12.

Line 13 - Shows the Evaluated Contract Costs Subtotals by year and for the total term of the contract.

Lines 14 - Shows the Unevaluated Contract Costs. This Subtotal includes Lines 15 through 18.

Line 19 - Shows the Unevaluated Contract Costs Subtotals by year and for the total term of the contract.

Line 20 - Shows the subtotal of evaluated and unevaluated costs commbined for each contract year, as well as the Total Contract Cost (rounded up to the whole dollar).

D-1: Total Cost Summary													
1	2	3	4	5	6	7	8	9	10	11	12	13	12
Line #	Cost Category	Source Worksheet	Contract Year 1	Contract Year 2	Contract Year 3	Contract Year 4	Contract Year 5	Contract Year 6 (Option Year 1)	Contract Year 7 (Option Year 2)	Contract Year 8 (Option Year 3)	Contract Year 9 (Option Year 4)	Contract Year 10 (Option Year 5)	Total Cost
1	Bid Amount A (2,000 points)												\$0.00
2	SDMO Hardware (100 pts)	D-2 SDMO Hardware Costs	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00						\$0.00
3	SDMO Software (400 pts)	D-3 SDMO Software Costs	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00						\$0.00
4	SDMO Cloud Hosting (500 pts)	D-4 Cloud Hosting Data Center Services Costs	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00						\$0.00
5	SDMO Fixed Price Services (Yr 2 thru Yr 10) (1,000 pts)	D-5, D-5.4 Fixed Price Costs (On/Off)		\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
6	Bid Amount B (300 points)												\$0.00
7	Transaction-based (Yr 2 through Yr 10)	D-6 Transaction-based Costs		\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
8	Bid Amount C (1,000 points)												\$0.00
9	System Changes	D-7, D-7.2 Sys Change Costs (On/Off)	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
10	Bid Amount D (200 points)												\$0.00
11	Transition-In (TIP1 & TIP2) (100 pts)	D-8 Transition-In (TIP1 & TIP2) Costs	\$0.00	\$0.00									\$0.00
12	Transition Out (100 pts)	D-8.2 Transition-Out Costs										\$0.00	\$0.00
13	EVALUATED CONTRACT COST SUBTOTAL		\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
14	Unevaluated Contract Costs (0 points)												\$0.00
15	SDMO Fixed Price Services (Yr 1)	D-5.1, D-5.5 [Fixed Price (On/Off) Yr 1]	\$0.00										\$0.00
16	Transaction-Based Costs (Yr 1)	D-6 Transaction-based Costs	\$0.00										\$0.00
17	Performance Bond Costs	D-8 Transition-In (TIP1 & TIP2) Costs	\$0.00										\$0.00
18	Unanticipated Tasks (10% of contract)	N/A	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
19	UNEVALUATED CONTRACT COST SUBTOTAL		\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
20	TOTAL CONTRACT COST		\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00

<Vendor Name>

APPENDIX D-2, INSTRUCTIONS - SDMO HARDWARE COSTS

Appendix D-2, SDMO HARDWARE COSTS, is used to identify all of the bidder's hardware costs associated with the CalHEERS solution.

Line 77 - Provides the State projected hardware budget value estimated for proposal evaluation purposes only. The actual budget value varies depending on the CalHEERS business needs.

Any Deliverables, Artifacts, or Standard Operating Procedures related to the topic of SDMO Hardware, including any offcycle updates, are to be costed under SDMO Fixed Price Onshore or Offshore Costs, except for those Deliverables identified within the Transition-In and Transition-Out Milestones.

For Hardware function/specifications and to determine the hardware needed for your proposed solution, see the CalHEERS Hardware/Software Inventory located within the Bidders' Library.

Bidders are to propose the same, alternative or different replacement hardware, via Column 7 (Proposed Hardware), as long as such hardware meets or exceeds the specifications of the existing hardware.

Bidders are only permitted to populate this tab with the True Cost, as defined in Appendix C - Glossary, of the hardware items they propose as part of their solution.

- Bidders are not permitted to apply any mark-up on top of the actual cost of the hardware items identified in this tab.
- Bidders are not permitted to add any labor costs related to the hardware items identified in this tab, as those costs shall be identified within the line that supports SOW 6.14 - System Hardware/Cloud Services/Software, within Tab D-5, SDMO Fixed Price Costs.

Bidders are permitted to insert additional rows into the bottom section of the worksheet to identify additionally proposed hardware. Bidders must ensure that the formulas at bottom of the table are updated to include any added rows.

Bidders must include all Hardware cost impacts associated with technology refresh in this worksheet, entering those costs within the year they are planned (please review SOW 6.6 Technology Refresh, for details).

Bidders shall NOT include staffing costs (labor hours) associated with the below listed Tech Refresh activities in this worksheet, as they are to be costed within Appendix D-5 - SDMO Fixed Price series of cost worksheets:

- Technology Refresh planning, management, assessment, reporting, tracking, deliverable development, workplan development/maintenance, artifact development/maintenance (e.g., Tech Refresh Roadmap).
- Implementation of State approved technology refresh recommendations.

The costs identified within this worksheet (Appendix D-2, SDMO Hardware Costs) will be linked to Appendix D-1, TOTAL COST SUMMARY, and will be part of the bid amount.

Column 1, Line # = No entry needed unless rows are added at the bottom for additional hardware.

Columns 2 through 6 = No entry needed. These columns are used to identify the different hardware components for the CalHEERS solution.

Column 7, Proposed Hardware = Bidders must enter the proposed hardware that is either the same or comparable to the listed item, completing the same function and meeting or exceeding the specifications of the existing hardware.

Column 8, Install Location = Bidders must enter the Install Location as either Contract Site or specify a site name for all hardware identified as part of bidder's solution.

Columns 9, 12, 15, 18, 21, Unit Cost = Bidders must enter the unit cost for each hardware item, inclusive of all related costs. For Year 1, Bidders are to enter costs which consider and align with the Bidder's Transition In Plan.

Columns 10, 13, 16, 19, 22, Quantity = Bidders must provide the quantity of hardware needed per hardware item for each contract year.

Columns 11, 14, 17, 20, 23, Total Cost Year X = No entry needed, formula-driven.

Column 24, Total Item Cost = No entry needed. The State has included a formula in this column that will sum the costs for each hardware item over the term of the Contract.

<Vendor Name>

D-2: SDMO Hardware Costs																
1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17
Line #	Hardware Vendor	Hardware Model	Hardware Function	Location	Quantity	Proposed Hardware	Install Location	Contract Year 1			Contract Year 2			Contract Year 3		
								Unit Cost	Quantity	Total Cost Year 1	Unit Cost	Quantity	Total Cost Year 2	Unit Cost	Quantity	Total Cost Year 3
1	Cisco	Cisco ASA 5525-X Firewall	Adaptive Security Appliance	CalHEERS Campus	2			\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00
2	Crestron	Crestron Trasmitter	display	CalHEERS Campus	4			\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00
3	DA-LITE	DA-LITE Motorized Screen	display	CalHEERS Campus	4			\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00
4	Espon	Espon PowerLite L610U	display	CalHEERS Campus	5			\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00
5	Poly	Poly Pano	display	CalHEERS Campus	1			\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00
6	Polycom	Polycom Pano	display	CalHEERS Campus	10			\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00
7	Samsung	Samsung 55"	display	CalHEERS Campus	1			\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00
8	Hewlett Packard	10733 - HP Universal Dock	Docking Station	CalHEERS Campus	1			\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00
9	Hewlett-Packard	HP USB - C DOCK G5	Docking Station	CalHEERS Campus	85			\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00
10	Microsoft	Surface Pro 7 Docking Station	Docking Station	CalHEERS Campus	2			\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00
11	Cisco	Cisco Meraki MX84 48PT Switch	Gateway	CalHEERS Campus	5			\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00
12	MP	MP VOIP Gateway	Gateway	CalHEERS Campus	1			\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00
13	NA	All Systems Broadband (Owned by Comcast)	Integrated Secure Modem	CalHEERS Campus	1			\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00
14	Cisco	Cisco 3504 Wireless Controller	Integrated Secure Modem	CalHEERS Campus	2			\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00
15	Hewlett-Packard	10726-bangera	Laptop	CalHEERS Campus	52			\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00
16	HP	10728-MYTHILI	Laptop	CalHEERS Campus	1			\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00
17	Hewlett-Packard	10734-YANG	Laptop	CalHEERS Campus	1			\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00
18	Microsoft	10742 - Surface Pro 7	Laptop	CalHEERS Campus	1			\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00
19	Hewlett-Packard	11203I-I40403v2	Laptop	CalHEERS Campus	2			\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00
20	HP	11205I-I40403vv	Laptop	CalHEERS Campus	1			\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00
21	Hewlett-Packard	11224I-I40403vj	Laptop	CalHEERS Campus	8			\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00
22	HP	11235I-I40403wz	Laptop	CalHEERS Campus	2			\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00
23	Hewlett-Packard	HP Elitebook 860 G10	Laptop	CalHEERS Campus	82			\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00
24	Microsoft	Microsoft Surface Pro 9	Laptop	CalHEERS Campus	3			\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00
25	Samsung	10837 - Campus Communications Monitor	Monitor	CalHEERS Campus	3			\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00
26	Hewlett-Packard	6899 - HP EliteDisplay E233	Monitor	CalHEERS Campus	2			\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00

<Vendor Name>

D-2: SDMO Hardware Costs														
1	2	3	4	5	6	7	8	18	19	20	21	22	23	24
Line #	Hardware Vendor	Hardware Model	Hardware Function	Location	Quantity	Proposed Hardware	Install Location	Contract Year 4			Contract Year 5			Sub Total Item Cost
								Unit Cost	Quantity	Total Cost Year 4	Unit Cost	Quantity	Total Cost Year 5	
1	Cisco	Cisco ASA 5525-X Firewall	Adaptive Security Appliance	CalHEERS Campus	2			\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00
2	Crestron	Crestron Trasmitter	display	CalHEERS Campus	4			\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00
3	DA-LITE	DA-LITE Motorized Screen	display	CalHEERS Campus	4			\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00
4	Espon	Espon PowerLite L610U	display	CalHEERS Campus	5			\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00
5	Poly	Poly Pano	display	CalHEERS Campus	1			\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00
6	Polycom	Polycom Pano	display	CalHEERS Campus	10			\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00
7	Samsung	Samsung 55"	display	CalHEERS Campus	1			\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00
8	Hewlett Packard	10733 - HP Universal Dock	Docking Station	CalHEERS Campus	1			\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00
9	Hewlett-Packard	HP USB - C DOCK G5	Docking Station	CalHEERS Campus	85			\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00
10	Microsoft	Surface Pro 7 Docking Station	Docking Station	CalHEERS Campus	2			\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00
11	Cisco	Cisco Meraki MX84 48PT Switch	Gateway	CalHEERS Campus	5			\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00
12	MP	MP VOIP Gateway	Gateway	CalHEERS Campus	1			\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00
13	NA	All Systems Broadband (Owned by Comcast)	Integrated Secure Modem	CalHEERS Campus	1			\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00
14	Cisco	Cisco 3504 Wireless Controller	Integrated Secure Modem	CalHEERS Campus	2			\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00
15	Hewlett-Packard	10726-bangera	Laptop	CalHEERS Campus	52			\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00
16	HP	10728-MYTHILI	Laptop	CalHEERS Campus	1			\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00
17	Hewlett-Packard	10734-YANG	Laptop	CalHEERS Campus	1			\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00
18	Microsoft	10742 - Surface Pro 7	Laptop	CalHEERS Campus	1			\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00
19	Hewlett-Packard	11203I-I40403v2	Laptop	CalHEERS Campus	2			\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00
20	HP	11205I-I40403vv	Laptop	CalHEERS Campus	1			\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00
21	Hewlett-Packard	11224I-I40403vj	Laptop	CalHEERS Campus	8			\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00
22	HP	11235I-I40403wz	Laptop	CalHEERS Campus	2			\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00
23	Hewlett-Packard	HP Elitebook 860 G10	Laptop	CalHEERS Campus	82			\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00
24	Microsoft	Microsoft Surface Pro 9	Laptop	CalHEERS Campus	3			\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00
25	Samsung	10837 - Campus Communications Monitor	Monitor	CalHEERS Campus	3			\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00
26	Hewlett-Packard	6899 - HP EliteDisplay E233	Monitor	CalHEERS Campus	2			\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00

<Vendor Name>

D-2: SDMO Hardware Costs																
1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17
Line #	Hardware Vendor	Hardware Model	Hardware Function	Location	Quantity	Proposed Hardware	Install Location	Contract Year 1			Contract Year 2			Contract Year 3		
								Unit Cost	Quantity	Total Cost Year 1	Unit Cost	Quantity	Total Cost Year 2	Unit Cost	Quantity	Total Cost Year 3
27	Samsung	8157 - Campus Communications Monitor	Monitor	CalHEERS Campus	6			\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00
28	APC	APC Geist Power Meter	Monitor	CalHEERS Campus	9			\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00
29	Cisco	APC Geist Power Monitor	Monitor	CalHEERS Campus	1			\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00
30	APC	APC NetBotz Rack Monitor 250	Monitor	CalHEERS Campus	1			\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00
31	Dell	Dell P2213 22 Inch Flat Panel Monitor	Monitor	CalHEERS Campus	27			\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00
32	APC	Geist Power Meter Monitor	Monitor	CalHEERS Campus	1			\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00
33	Hewlett-Packard	HP Z24i 24 Inch IPS Monitor	Monitor	CalHEERS Campus	300			\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00
34	IBM	Reflection Monitor	Monitor	CalHEERS Campus	1			\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00
35	Samsung	Samsung 82"	Monitor	CalHEERS Campus	10			\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00
36	Hewlett-Packard	8155 - Dogwood Printer	Printer	CalHEERS Campus	8			\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00
37	N/A	AV Rack	Rack	CalHEERS Campus	1			\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00
38	Crestron	Crestron AMP-X300	Rack Server	CalHEERS Campus	2			\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00
39	SHURE	SHURE	Rack Server	CalHEERS Campus	4			\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00
40	Tesira	Tesira Forte AVBVT	Rack Server	CalHEERS Campus	1			\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00
41	Cisco	Cisco WAP	Router	CalHEERS Campus	18			\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00
42	AWS	prod-abe-dr-application-2-AWSLOCDRABEAP03	Server	Amazon Web Services	642			\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00
43	Amazon	prod-abe-dr-application-3-AWSLOCDRABEAP04	Server	Amazon Web Services	1			\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00
44	AWS	workerenv-8001962027207252-25a4aab0-d47e-4727-b34e-2ddef9e5a3cb-worker	Server	Amazon Web Services	69			\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00
45	Cisco	Cisco Catalyst C9300 48PT Switch	Switch	CalHEERS Campus	18			\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00
46	NA	Verizon Switch	Switch	CalHEERS Campus	2			\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00
47	Varies	AWS Discovered Applications	Vulnerability Scanning Software	Amazon Web Services	1			\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00
48	HP	10744d-0040jd9	Workstation	CalHEERS Campus	2			\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00
49	Hewlett-Packard	10746 - HP Elitedesk 800 G4 Workstation	Workstation	CalHEERS Campus	2			\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00
50	HP	10747d-0040jjb	Workstation	CalHEERS Campus	1			\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00

<Vendor Name>

D-2: SDMO Hardware Costs														
1	2	3	4	5	6	7	8	18	19	20	21	22	23	24
Line #	Hardware Vendor	Hardware Model	Hardware Function	Location	Quantity	Proposed Hardware	Install Location	Contract Year 4			Contract Year 5			Sub Total Item Cost
								Unit Cost	Quantity	Total Cost Year 4	Unit Cost	Quantity	Total Cost Year 5	
27	Samsung	8157 - Campus Communications Monitor	Monitor	CalHEERS Campus	6			\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00
28	APC	APC Geist Power Meter	Monitor	CalHEERS Campus	9			\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00
29	Cisco	APC Geist Power Monitor	Monitor	CalHEERS Campus	1			\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00
30	APC	APC NetBotz Rack Monitor 250	Monitor	CalHEERS Campus	1			\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00
31	Dell	Dell P2213 22 Inch Flat Panel Monitor	Monitor	CalHEERS Campus	27			\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00
32	APC	Geist Power Meter Monitor	Monitor	CalHEERS Campus	1			\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00
33	Hewlett-Packard	HP Z24i 24 Inch IPS Monitor	Monitor	CalHEERS Campus	300			\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00
34	IBM	Reflection Monitor	Monitor	CalHEERS Campus	1			\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00
35	Samsung	Samsung 82"	Monitor	CalHEERS Campus	10			\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00
36	Hewlett-Packard	8155 - Dogwood Printer	Printer	CalHEERS Campus	8			\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00
37	N/A	AV Rack	Rack	CalHEERS Campus	1			\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00
38	Crestron	Crestron AMP-X300	Rack Server	CalHEERS Campus	2			\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00
39	SHURE	SHURE	Rack Server	CalHEERS Campus	4			\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00
40	Tesira	Tesira Forte AVBVT	Rack Server	CalHEERS Campus	1			\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00
41	Cisco	Cisco WAP	Router	CalHEERS Campus	18			\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00
42	AWS	prod-abe-dr-application-2-AWSLOCDRABEAP03	Server	Amazon Web Services	642			\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00
43	Amazon	prod-abe-dr-application-3-AWSLOCDRABEAP04	Server	Amazon Web Services	1			\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00
44	AWS	workerenv-8001962027207252-25a4aab0-d47e-4727-b34e-2ddef9e5a3cb-worker	Server	Amazon Web Services	69			\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00
45	Cisco	Cisco Catalyst C9300 48PT Switch	Switch	CalHEERS Campus	18			\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00
46	NA	Verizon Switch	Switch	CalHEERS Campus	2			\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00
47	Varies	AWS Discovered Applications	Vulnerability Scanning Software	Amazon Web Services	1			\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00
48	HP	10744d-0040jd9	Workstation	CalHEERS Campus	2			\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00
49	Hewlett-Packard	10746 - HP Elitedesk 800 G4 Workstation	Workstation	CalHEERS Campus	2			\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00
50	HP	10747d-0040jib	Workstation	CalHEERS Campus	1			\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00

<Vendor Name>																
D-2: SDMO Hardware Costs																
1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17
Line #	Hardware Vendor	Hardware Model	Hardware Function	Location	Quantity	Proposed Hardware	Install Location	Contract Year 1			Contract Year 2			Contract Year 3		
								Unit Cost	Quantity	Total Cost Year 1	Unit Cost	Quantity	Total Cost Year 2	Unit Cost	Quantity	Total Cost Year 3
51	Hewlett-Packard	10748 - HP Elitedesk 800 G4 Workstation	Workstation	CalHEERS Campus	1			\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00
52	HP	10751d-0040jfz	Workstation	CalHEERS Campus	3			\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00
53	Exact Vision	Exact Vision	Workstation	CalHEERS Campus	1			\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00
54	3M	3M Privacy Filter for 14 Inch laptops	Workstation	CalHEERS Campus	0			\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00
55	3M	3M Privacy Filter for 16 Inch laptops	Workstation	CalHEERS Campus	10			\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00
56	3M	3M Privacy Filter for 32 inch monitors	Workstation	CalHEERS Campus	10			\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00
57	Cisco Systems	Cisco_SNTC 8X5XNBD Cisco Systems	Hardware Collector Appliance	CalHEERS Campus	0			\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00
58	Kensington	Kensington Universal Cable Lock 10mm	Laptop Cable Lock	CalHEERS Campus	200			\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00
59	Logitech	Logitech Keyboard and Mouse	Keyboard & Mouse	CalHEERS Campus	40			\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00
60								\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00
61			Identify Additional Hardware to the Right					\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00
62			Identify Additional Hardware to the Right					\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00
63			Identify Additional Hardware to the Right					\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00
64			Identify Additional Hardware to the Right					\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00
65			Identify Additional Hardware to the Right					\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00
66			Identify Additional Hardware to the Right					\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00
67			Identify Additional Hardware to the Right					\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00
68			Identify Additional Hardware to the Right					\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00
69			Identify Additional Hardware to the Right					\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00
70			Identify Additional Hardware to the Right					\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00
71			Identify Additional Hardware to the Right					\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00
72			Identify Additional Hardware to the Right					\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00
73			Identify Additional Hardware to the Right					\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00
74			Identify Additional Hardware to the Right					\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00
75			Identify Additional Hardware to the Right					\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00
76	Bidder Total Hardware Costs									\$0.00			\$0.00			\$0.00
77	State Projected Hardware Budget															

<Vendor Name>														
D-2: SDMO Hardware Costs														
1	2	3	4	5	6	7	8	18	19	20	21	22	23	24
Line #	Hardware Vendor	Hardware Model	Hardware Function	Location	Quantity	Proposed Hardware	Install Location	Contract Year 4			Contract Year 5			Sub Total Item Cost
								Unit Cost	Quantity	Total Cost Year 4	Unit Cost	Quantity	Total Cost Year 5	
51	Hewlett-Packard	10748 - HP Elitedesk 800 G4 Workstation	Workstation	CalHEERS Campus	1			\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00
52	HP	10751d-0040jfz	Workstation	CalHEERS Campus	3			\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00
53	Exact Vision	Exact Vision	Workstation	CalHEERS Campus	1			\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00
54	3M	3M Privacy Filter for 14 Inch laptops	Workstation	CalHEERS Campus	0			\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00
55	3M	3M Privacy Filter for 16 Inch laptops	Workstation	CalHEERS Campus	10			\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00
56	3M	3M Privacy Filter for 32 inch monitors	Workstation	CalHEERS Campus	10			\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00
57	Cisco Systems	Cisco_SNTC 8X5XNBD Cisco Systems	Hardware Collector Appliance	CalHEERS Campus	0			\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00
58	Kensington	Kensington Universal Cable Lock 10mm	Laptop Cable Lock	CalHEERS Campus	200			\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00
59	Logitech	Logitech Keyboard and Mouse	Keyboard & Mouse	CalHEERS Campus	40			\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00
60								\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00
61			Identify Additional Hardware to the Right					\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00
62			Identify Additional Hardware to the Right					\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00
63			Identify Additional Hardware to the Right					\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00
64			Identify Additional Hardware to the Right					\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00
65			Identify Additional Hardware to the Right					\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00
66			Identify Additional Hardware to the Right					\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00
67			Identify Additional Hardware to the Right					\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00
68			Identify Additional Hardware to the Right					\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00
69			Identify Additional Hardware to the Right					\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00
70			Identify Additional Hardware to the Right					\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00
71			Identify Additional Hardware to the Right					\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00
72			Identify Additional Hardware to the Right					\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00
73			Identify Additional Hardware to the Right					\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00
74			Identify Additional Hardware to the Right					\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00
75			Identify Additional Hardware to the Right					\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00
76	Bidder Total Hardware Costs									\$0.00			\$0.00	\$0.00
77	State Projected Hardware Budget													\$750,000.00

<Vendor Name>

APPENDIX D-3, INSTRUCTIONS - SDMO SOFTWARE COSTS AND SERVICE CENTER SOFTWARE COSTS

Appendix D-3, SDMO SOFTWARE COSTS (minus Service Center), is used to identify all of the bidder’s software costs associated with the CalHEERS.

Line 245 - Provides the State projected software budget value (minus service center) estimated for proposal evaluation purposes only. The actual budget value varies depending on the CalHEERS business needs.

Any Deliverables, Artifacts, or Standard Operating Procedures related to the topic of SDMO Software, including any offcycle updates, are to be costed under SDMO Fixed Price Onshore or Offshore Costs, except for those Deliverables identified within the Transition-In and Transition-Out Milestones.

For Software function/specifications and to determine the software needed for your proposed solution, please see the CalHEERS Hardware and Software Inventory within the Bidders' Library.

Bidders are to propose the same, alternative or different replacement software, via Column 9 (Proposed Software), as long as such software meets or exceeds the specifications of the existing software.

Bidders are only permitted to populate this tab with the True Cost, as defined in Appendix C - Glossary, of the software items they propose as part of their solution.

-Bidders are not permitted to apply any mark-up on top of the actual cost of the software items identified in this tab.

-Bidders are not permitted to add any labor costs related to the software items identified in this tab, as those costs shall be identified within the line that supports SOW 6.14 - System Hardware/Cloud Services/Software, within Tab D-5, SDMO Fixed Price Costs.

Bidders are responsible to accurately propose software for their solution, delineating between software to be represented on D-3, SDMO Software Costs (minus Service Center), and software that is Cloud Hosting related and thus should be represented on D-4, Cloud Hosting Data Center Services Costs (minus Service Center).

Bidders are permitted to insert additional rows into the bottom section of the worksheet to identify additionally proposed software. Bidders must ensure that the formulas at bottom of the table are updated to include any added rows.

Bidders must include all Software cost impacts associated with technology refresh (minus the Service Center) in this worksheet, entering those costs within the year they are planned (please review SOW 6.6 Technology Refresh, for details).

Bidders shall NOT include staffing costs (labor hours) associated with the below listed Tech Refresh activities in this worksheet, as they are to be costed within Appendix D-5 - SDMO Fixed Price series of cost worksheets:

-Technology Refresh planning, management, assessment, reporting, tracking, deliverable development, workplan development/maintenance, artifact development/maintenance (e.g., Tech Refresh Roadmap).

-Implementation of State approved technology refresh recommendations.

The costs identified within this worksheet Appendix D-3, SDMO Software Costs (minus Service Center), will be linked to Appendix D-1, TOTAL COST SUMMARY, and will be part of the bid amount.

Column 1, Line # = No entry needed unless rows are added at the bottom for additional software.

Columns 2 through 6 = No entry needed. These columns are used to identify the different software components for the CalHEERS solution.

Column 7, Notes = Bidders can enter notes, if necessary but are not permitted to include any information that alters/impacts the cost of the proposed software item.

Column 8, Host Location = Bidders must enter the host location as either Contract Site or specify a site name.

Column 9, Proposed Software = Bidders must enter the proposed software that is either the same or comparable to the listed item, completing the same function and meeting or exceeding the specifications of the existing software.

Columns 10, 13, 16, 19, 22 Unit Cost = The Bidder must enter the unit cost for each software item proposed, inclusive of all related costs. For Year 1, Bidders are to enter software costs which take into consideration and align with the Bidder’s Transition-In Plan.

Columns 11, 14, 17, 20, 23 Quantity = Bidders must provide the quantity of licenses needed for each software item by contract year.

Columns 12, 15, 18, 21, 24 Total Cost Year X = No entry needed, formula-driven.

Column 25, Total Item Cost = No entry needed. The State has provided formulas that calculate the cost of each software item over the term of the contract.

Appendix D-3.1: Service Center Software Costs, which starts at Excel row 254 is used to identify all of the bidder's software costs associated with the Service Center.

Line 27 - Provides the State projected Service Center software budget value estimated for proposal evaluation purposes only. The actual budget value varies depending on the CalHEERS business needs.

Any Deliverables, Artifacts, or Standard Operating Procedures related to the topic of SDMO Software, including any offcycle updates, are to be costed under SDMO Fixed Price Onshore or Offshore Costs, except for those Deliverables identified within the Transition-In and Transition-Out Milestones.

For Software function/specifications and to determine the software needed for your proposed solution, please see the CalHEERS Hardware and Software Inventory within the Bidders' Library.

Bidders are to propose the same, alternative or different replacement software, via Column 9 (Proposed Software), as long as such software meets or exceeds the specifications of the existing software.

Bidders are only permitted to populate this tab with the True Cost, as defined in Appendix C - Glossary, of the software items they propose as part of their solution.

- Bidders are not permitted to apply any mark-up on top of the actual cost of the software items identified in this tab.
- Bidders are not permitted to add any labor costs related to the software items identified in this tab, as those costs shall be identified within the line that supports SOW 6.14 - System Hardware/Cloud Services/Software, within Tab D-5, SDMO Fixed Price Costs.

Bidders are responsible to accurately propose software for their solution, delineating between software to be represented on D-3.1, Service Center Software Costs, and software that is Cloud Hosting related and thus should be represented on D-4.1, Service Center Cloud Hosting Data Center Services Costs.

Bidders are permitted to insert additional rows into the bottom section of the worksheet to identify additionally proposed software for Service Center . Bidders must ensure that the formulas at bottom of the worksheet are updated to include any added rows.

Bidders must include all Software cost impacts associated with technology refresh for the Service Center in this worksheet, entering those costs within the year they are planned (please review SOW 6.6 Technology Refresh, for details).

Bidders shall NOT include staffing costs (labor hours) associated with the below listed Tech Refresh activities in this worksheet, as they are to be costed within Appendix D-5 - SDMO Fixed Price series of cost worksheets:

- Technology Refresh planning, management, assessment, reporting, tracking, deliverable development, workplan development/maintenance, artifact development/maintenance (e.g., Tech Refresh Roadmap).
- Implementation of State approved technology refresh recommendations.

The costs identified within this worksheet Appendix D-3.1, Service Center Software Costs, will be linked to Appendix D-1, TOTAL COST SUMMARY, and will be part of the bid amount.

Column 1, Line # = No entry needed unless rows are added at the bottom for additional software.

Columns 2 through 6 = No entry needed. These columns are used to identify the different software components for the CalHEERS Service Center solution.

Column 7, Notes = Bidders can enter notes, if necessary but are not permitted to include any information that alters/impacts the cost of the proposed software item.

Column 8, Host Location = Bidders must enter the host location as either Contract Site or specify a site name.

Column 9, Proposed Software = Bidders must enter the proposed software that is either the same or comparable to the listed item, completing the same function and meeting or exceeding the specifications of the existing software.

Columns 10, 13, 16, 19, 22 Unit Cost = The Bidder must enter the unit cost for each software item proposed, inclusive of all related costs. For Year 1, Bidders are to enter software costs which take into consideration and align with the Bidder's Transition-In Plan.

Columns 11, 14, 17, 20, 23 Quantity = Bidders must provide the quantity of licenses needed for each software item by contract year.

Columns 12, 15, 18, 21, 24 Total Cost Year X = No entry needed, formula-driven.

Column 25, Total Item Cost = No entry needed. The State has provided formulas that calculate the cost of each software item over the term of the contract.

<Vendor Name>

D-3: SDMO Software Costs (minus Service Center)																	
1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18
Line #	Software Category	Type of Software	Current Vendor Software	License Type	Quantity	Notes	Host Location	Proposed Software	Contract Year 1			Contract Year 2			Contract Year 3		
									Unit Cost	Quantity	Total Cost Year 1	Unit Cost	Quantity	Total Cost Year 2	Unit Cost	Quantity	Total Cost Year 3
1		Change Scout Leadership Portal User License (DLT Owned) - Enterprise Tool	ChangeScout	Named User	17				\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00
2		Adaptavist - JIRA Script Runner Add On License - Enterprise Tool	Adaptavist	Named User	1,000				\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00
3		Adobe Acrobat Pro License	Adobe	Named User	88				\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00
4		Adobe Creative Cloud License (HCD)	Adobe	Named User	5				\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00
5		Application Lifecycle Management (ALM) Area Concurrent User License - Enterprise Tool	Micro Focus	Concurrent User	84				\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00
6		Application Lifecycle Management (ALM) Global Concurrent User License - Enterprise Tool	Micro Focus	Concurrent User	17				\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00
7		Articulate Global Articulate 360	Articulate Global	Named User	1				\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00
8		Articulate 360 Teams Plan	Articulate Global		2				\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00
9		Atlassian - JIRA License - Enterprise Tool	Atlassian	Named User	1,000				\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00
10		Jira Software 500 users: Commercial Term License Renewal	Atlassian		1				\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00
11		Confluence (Cloud) Premium 25 Users	Atlassian		2				\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00
12		Attended - Named User	UI Path	Named User	8				\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00
13		Automation Developer - Named User	UI Path	Named User	5				\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00
14		Axure Software Solutions RP Pro License	Axure	Named User	1				\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00
15		Axure RP 9 Pro - 1 Year Subscription Renewal	Axure						\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00
16		Baseline Symphony Data License (CCA-1)	Integrated Healthcare Association	Custom Metric	1				\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00
17		One-Time Symphony Data License Upgrade	Integrated Healthcare Association	Custom Metric	1				\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00
18		Blancoo	Blancoo	Named User	1				\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00
19		BrowserStack Enterprise Automate Mobile	BrowserStack	Device	11				\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00
20		BrowserStack Enterprise Live - Team	BrowserStack	Device	11				\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00
21		Burp Suite Portswigger Pro	PortSwigger	Device	2				\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00
22		Annual CA Workload Contract Maintenance Renewal	CA Technologies		1				\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00
23		CA Workload Automation iDash License	CA Technologies	Device	25				\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00
24		CA Workload Autosys AI Edition License	CA Technologies	Device	25				\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00
25		Ceptah Bridge License (DLT Owned)	Ceptah	Named User	5				\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00
26		Ceptah Bridge License	Ceptah		1				\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00
27		Change Scout Standard User License - FPACT	ChangeScout	Named User	4				\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00
28		Change Scout Standard User License (DLT Owned) - Enterprise Tool	ChangeScout	Named User	3				\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00
29		Confluence Cloud License	Atlassian	Device	25				\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00
30		Cornerstone Learning Management Licenses	Cornerstone	Named User	800				\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00
31		Databricks License	Databricks	Enterprise Agreement	1				\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00
32		AWS Enhanced Security and Compliance Support	Databricks		1				\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00
33		Databricks Advanced Analytics	Databricks		1				\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00
34		Databricks AWS Direct Commit	Databricks		1				\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00
35		Databricks On-Demand Training	Databricks		1				\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00
36		Databricks Success Credits	Databricks		35,000				\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00
37		Multi-cloud Enhanced Support	Databricks		1				\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00
38		Product Support - Original	Dynatrace LLC		1				\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00
39		Dynatrace Flexpoint Software Licenses - IDP	Dynatrace LLC	Device	9				\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00
40		Dynatrace Flexpoint Software licenses for FPACT	Dynatrace LLC	Device	64				\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00
41		Dynatrace for Government - Davis Data Units - 1 Million Annual Units	Dynatrace LLC	Device	2				\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00

<Vendor Name>

D-3: SDMO Software Costs (minus Service Center)															
1	2	3	4	5	6	7	8	9	19	20	21	22	23	24	25
Line #	Software Category	Type of Software	Current Vendor Software	License Type	Quantity	Notes	Host Location	Proposed Software	Contract Year 4			Contract Year 5			Total Item Cost
									Unit Cost	Quantity	Total Cost Year 4	Unit Cost	Quantity	Total Cost Year 5	
1		Change Scout Leadership Portal User License (DLT Owned) - Enterprise Tool	ChangeScout	Named User	17				\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00
2		Adaptavist - JIRA Script Runner Add On License - Enterprise Tool	Adaptavist	Named User	1,000				\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00
3		Adobe Acrobat Pro License	Adobe	Named User	88				\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00
4		Adobe Creative Cloud License (HCD)	Adobe	Named User	5				\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00
5		Application Lifecycle Management (ALM) Area Concurrent User License - Enterprise Tool	Micro Focus	Concurrent User	84				\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00
6		Application Lifecycle Management (ALM) Global Concurrent User License - Enterprise Tool	Micro Focus	Concurrent User	17				\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00
7		Articulate Global Articulate 360	Articulate Global	Named User	1				\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00
8		Articulate 360 Teams Plan	Articulate Global		2				\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00
9		Atlassian - JIRA License - Enterprise Tool	Atlassian	Named User	1,000				\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00
10		Jira Software 500 users: Commercial Term License Renewal	Atlassian		1				\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00
11		Confluence (Cloud) Premium 25 Users	Atlassian		2				\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00
12		Attended - Named User	UI Path	Named User	8				\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00
13		Automation Developer - Named User	UI Path	Named User	5				\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00
14		Axure Software Solutions RP Pro License	Axure	Named User	1				\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00
15		Axure RP 9 Pro - 1 Year Subscription Renewal	Axure						\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00
16		Baseline Symphony Data License (CCA-1)	Integrated Healthcare Association	Custom Metric	1				\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00
17		One-Time Symphony Data License Upgrade	Integrated Healthcare Association	Custom Metric	1				\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00
18		Blancoo	Blancoo	Named User	1				\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00
19		BrowserStack Enterprise Automate Mobile	BrowserStack	Device	11				\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00
20		BrowserStack Enterprise Live - Team	BrowserStack	Device	11				\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00
21		Burp Suite Portswigger Pro	PortSwigger	Device	2				\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00
22		Annual CA Workload Contract Maintenance Renewal	CA Technologies		1				\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00
23		CA Workload Automation iDash License	CA Technologies	Device	25				\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00
24		CA Workload Autosys AI Edition License	CA Technologies	Device	25				\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00
25		Ceptah Bridge License (DLT Owned)	Ceptah	Named User	5				\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00
26		Ceptah Bridge License	Ceptah		1				\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00
27		Change Scout Standard User License - FPACT	ChangeScout	Named User	4				\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00
28		Change Scout Standard User License (DLT Owned) - Enterprise Tool	ChangeScout	Named User	3				\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00
29		Confluence Cloud License	Atlassian	Device	25				\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00
30		Cornerstone Learning Management Licenses	Cornerstone	Named User	800				\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00
31		Databricks License	Databricks	Enterprise Agreement	1				\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00
32		AWS Enhanced Security and Compliance Support	Databricks		1				\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00
33		Databricks Advanced Analytics	Databricks		1				\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00
34		Databricks AWS Direct Commit	Databricks		1				\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00
35		Databricks On-Demand Training	Databricks		1				\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00
36		Databricks Success Credits	Databricks		35,000				\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00
37		Multi-cloud Enhanced Support	Databricks		1				\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00
38		Product Support - Original	Dynatrace LLC		1				\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00
39		Dynatrace Flexpoint Software Licenses - IDP	Dynatrace LLC	Device	9				\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00
40		Dynatrace Flexpoint Software licenses for FPACT	Dynatrace LLC	Device	64				\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00
41		Dynatrace for Government - Davis Data Units - 1 Million Annual Units	Dynatrace LLC	Device	2				\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00

<Vendor Name>

D-3: SDMO Software Costs (minus Service Center)																	
1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18
Line #	Software Category	Type of Software	Current Vendor Software	License Type	Quantity	Notes	Host Location	Proposed Software	Contract Year 1			Contract Year 2			Contract Year 3		
									Unit Cost	Quantity	Total Cost Year 1	Unit Cost	Quantity	Total Cost Year 2	Unit Cost	Quantity	Total Cost Year 3
42		Dynatrace for Government - Davis Data Units - 2 Million Annual Units	Dynatrace LLC	Device	1				\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00
43		Dynatrace for Government - DEM Units - 6.4 Million Annual Units	Dynatrace LLC	Device	1				\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00
44		Dynatrace For Government Host License	Dynatrace LLC	Device	380				\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00
45		Figma License (HCD)	Figma, Inc	Named User	13				\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00
46		Flexera Manager for Data Centers License - Enterprise Tool	Flexera	Device	500				\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00
47		Flexera Manager Suite for Clients License - Enterprise Tool	Flexera	Device	200				\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00
48		Freedom Scientific JAWS Pro Network Licenses	Freedom Scientific	Named User	5				\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00
49		Freedom Scientific JAWS Pro Single User License	Freedom Scientific	Named User	1				\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00
50		Git Lab Premium Licenses	GitLab	Named User	400				\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00
51		Git Lab Premium Licenses - FPACT	GitLab	Named User	50				\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00
52		Go To Assist Remote Support License	LogMeln	Named User	2				\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00
53		IBM Engineering Workflow Management (EWM) Developer Floating User Standard - Subscription - Enterprise Tool	IBM	Concurrent User	10				\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00
54		IBM Engineering Workflow Management (EWM) Stakeholder Floating User - Subscription - Enterprise Tool	IBM	Concurrent User	110				\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00
55		IBM Sterling Transformation Extender Non-Production for Red Hat Open Shift Virtual Processor Core License	IBM	Device	4				\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00
56		IBM Sterling Transformation Extender Pack for Healthcare Non-Production for Red Hat Open Shift Virtual Processor Core License	IBM	Device	4				\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00
57		IBM Sterling Transformation Extender Pack for Healthcare Production for Red Hat Open Shift Virtual Processor Core License	IBM	Device	4				\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00
58		IBM Sterling Transformation Extender Production for Red Hat Open Shift Virtual Processor Core License	IBM	Device	4				\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00
59		In Vision Studio License (HCD)	In Vision	Named User	2				\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00
60		Liquibase Pro - Premium Support	Liquibase	Device	25				\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00
61		Lucid Suite (HCD)	Lucid	Named User	25				\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00
62		M365 F-3 License (49050379)	Microsoft - SEC	Device	110				\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00
63		Micro Focus Reflection Desktop 17.0	Micro Focus	Named User	3				\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00
64		Microsoft Visio Standard License (49050379) - Enterprise Tool	Microsoft - SEC	Named User	40				\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00
65		Microsoft Windows Server Standard Core Extended Security Updates 2012 - 2 Core	Microsoft - SEC	Microsoft Server Processor	72				\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00
66		Mouse Flow License (HCD)	Mouseflow, Inc.	Named User	1				\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00
67		NICE Engage License (Playback Portal Cloud)	Nice Systems	Device	1				\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00
68		Nucleus Security Subscription	Nucleus	Device	796				\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00
69		NXLog Enterprise Edition Single License	NXLog	Device	2				\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00
70		NXLog Manager License Single Agent	NXLog	Device	2				\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00
71		Product Support - 10 HR of EM Support, 8x5, 48 Hr Response Time	NXLog		1				\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00
72		O365 E5 License (Outlook, Teams) (49050379) - Enterprise Tool	Microsoft - SEC	Named User	950				\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00
73		Okta Multi Factor Authentication Licenses	Okta	Device	100				\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00
74		Okta On-Premise Multi-Factor Authorization Subscription License	Okta	Device	1,200				\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00
75		Okta On-Premise Multi-Factor Authorization Subscription License - FPACT	Okta	Device	90				\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00
76		Okta On-Premise Single Sign-On Subscription License	Okta	Device	1,200				\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00
77		Okta On-Premise Single Sign-On Subscription License - FPACT	Okta	Device	90				\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00
78		Okta Single Sign-On Licenses	Okta	Device	100				\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00
79		Okta Universal Directory Subscription License	Okta	Device	1,200				\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00
80		Okta Universal Directory Subscription License - FPACT	Okta	Device	90				\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00
81		Okta Universal DirectoryLicenses	Okta	Device	100				\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00
82		Okta Premier Success Package Support	Okta		1				\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00
83		Orchestrator Licenses - Non Production	UI Path	Device	3				\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00

<Vendor Name>

D-3: SDMO Software Costs (minus Service Center)															
1	2	3	4	5	6	7	8	9	19	20	21	22	23	24	25
Line #	Software Category	Type of Software	Current Vendor Software	License Type	Quantity	Notes	Host Location	Proposed Software	Contract Year 4			Contract Year 5			Total Item Cost
									Unit Cost	Quantity	Total Cost Year 4	Unit Cost	Quantity	Total Cost Year 5	
42		Dynatrace for Government - Davis Data Units - 2 Million Annual Units	Dynatrace LLC	Device	1				\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00
43		Dynatrace for Government - DEM Units - 6.4 Million Annual Units	Dynatrace LLC	Device	1				\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00
44		Dynatrace For Government Host License	Dynatrace LLC	Device	380				\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00
45		Figma License (HCD)	Figma, Inc	Named User	13				\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00
46		Flexera Manager for Data Centers License - Enterprise Tool	Flexera	Device	500				\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00
47		Flexera Manager Suite for Clients License - Enterprise Tool	Flexera	Device	200				\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00
48		Freedom Scientific JAWS Pro Network Licenses	Freedom Scientific	Named User	5				\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00
49		Freedom Scientific JAWS Pro Single User License	Freedom Scientific	Named User	1				\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00
50		Git Lab Premium Licenses	GitLab	Named User	400				\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00
51		Git Lab Premium Licenses - FPACT	GitLab	Named User	50				\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00
52		Go To Assist Remote Support License	LogMeln	Named User	2				\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00
53		IBM Engineering Workflow Management (EWM) Developer Floating User Standard - Subscription - Enterprise Tool	IBM	Concurrent User	10				\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00
54		IBM Engineering Workflow Management (EWM) Stakeholder Floating User - Subscription - Enterprise Tool	IBM	Concurrent User	110				\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00
55		IBM Sterling Transformation Extender Non-Production for Red Hat Open Shift Virtual Processor Core License	IBM	Device	4				\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00
56		IBM Sterling Transformation Extender Pack for Healthcare Non-Production for Red Hat Open Shift Virtual Processor Core License	IBM	Device	4				\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00
57		IBM Sterling Transformation Extender Pack for Healthcare Production for Red Hat Open Shift Virtual Processor Core License	IBM	Device	4				\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00
58		IBM Sterling Transformation Extender Production for Red Hat Open Shift Virtual Processor Core License	IBM	Device	4				\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00
59		In Vision Studio License (HCD)	In Vision	Named User	2				\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00
60		Liquibase Pro - Premium Support	Liquibase	Device	25				\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00
61		Lucid Suite (HCD)	Lucid	Named User	25				\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00
62		M365 F-3 License (49050379)	Microsoft - SEC	Device	110				\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00
63		Micro Focus Reflection Desktop 17.0	Micro Focus	Named User	3				\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00
64		Microsoft Visio Standard License (49050379) - Enterprise Tool	Microsoft - SEC	Named User	40				\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00
65		Microsoft Windows Server Standard Core Extended Security Updates 2012 - 2 Core	Microsoft - SEC	Microsoft Server Processor	72				\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00
66		Mouse Flow License (HCD)	Mouseflow, Inc.	Named User	1				\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00
67		NICE Engage License (Playback Portal Cloud)	Nice Systems	Device	1				\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00
68		Nucleus Security Subscription	Nucleus	Device	796				\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00
69		NXLog Enterprise Edition Single License	NXLog	Device	2				\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00
70		NXLog Manager License Single Agent	NXLog	Device	2				\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00
71		Product Support - 10 HR of EM Support, 8x5, 48 Hr Response Time	NXLog		1				\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00
72		O365 E5 License (Outlook, Teams) (49050379) - Enterprise Tool	Microsoft - SEC	Named User	950				\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00
73		Okta Multi Factor Authentication Licenses	Okta	Device	100				\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00
74		Okta On-Premise Multi-Factor Authorization Subscription License	Okta	Device	1,200				\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00
75		Okta On-Premise Multi-Factor Authorization Subscription License - FPACT	Okta	Device	90				\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00
76		Okta On-Premise Single Sign-On Subscription License	Okta	Device	1,200				\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00
77		Okta On-Premise Single Sign-On Subscription License - FPACT	Okta	Device	90				\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00
78		Okta Single Sign-On Licenses	Okta	Device	100				\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00
79		Okta Universal Directory Subscription License	Okta	Device	1,200				\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00
80		Okta Universal Directory Subscription License - FPACT	Okta	Device	90				\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00
81		Okta Universal DirectoryLicenses	Okta	Device	100				\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00
82		Okta Premier Success Package Support	Okta		1				\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00
83		Orchestrator Licenses - Non Production	UI Path	Device	3				\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00

<Vendor Name>

D-3: SDMO Software Costs (minus Service Center)																	
1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18
Line #	Software Category	Type of Software	Current Vendor Software	License Type	Quantity	Notes	Host Location	Proposed Software	Contract Year 1			Contract Year 2			Contract Year 3		
									Unit Cost	Quantity	Total Cost Year 1	Unit Cost	Quantity	Total Cost Year 2	Unit Cost	Quantity	Total Cost Year 3
84		Orchestrator Licenses - Production	UI Path	Device	1				\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00
85		Palo Alto Twistlock License - Credits	Palo Alto Networks	Device	3,100				\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00
86		Palo Alto VM 300 Firewalls - Credits	Palo Alto Networks	Device	64				\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00
87		Palo Alto VM 500 Firewalls - Credits	Palo Alto Networks	Device	165				\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00
88		Palo Alto VM 700 Firewalls - Credits	Palo Alto Networks	Device	364				\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00
89		Cortex Data Lake with 1TB of storage, 1-year, includes Premium Support	Palo Alto		1				\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00
90		Prisma Access Enterprise Edition	Palo Alto		1,100				\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00
91		Prisma Access Premium Success	Palo Alto		1				\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00
92		QuickStart Service for Prisma Access Enterprise, 1 Year	Palo Alto		1				\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00
93		Ping Identity License Bundle - External	Ping Identity Corporation	Device	1,500,000				\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00
94		Authorization Module External	Ping Identity Corporation		1,588,190				\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00
95		Directory Server Module External	Ping Identity Corporation		1,588,190				\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00
96		Edge Security Identity Gateway External	Ping Identity Corporation		88,190				\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00
97		Federation Module External	Ping Identity Corporation		1,588,190				\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00
98		Identity Gateway Module External	Ping Identity Corporation		1,500,000				\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00
99		Identity Synchronization Module External	Ping Identity Corporation		1,588,190				\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00
100		Intelligent Access External	Ping Identity Corporation		88,190				\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00
101		Intelligent Authentication External	Ping Identity Corporation		1,500,000				\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00
102		Lifecycle & Relationship Management External	Ping Identity Corporation		1,588,190				\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00
103		Self-Service Module External	Ping Identity Corporation		1,588,190				\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00
104		Ping Identity License Bundle - Internal	Ping Identity Corporation	Device	18,000				\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00
105		Authorization Module Internal	Ping Identity Corporation		19,810				\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00
106		Directory Server Module Internal	Ping Identity Corporation		19,810				\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00
107		Edge Security Identity Gateway Internal	Ping Identity Corporation		1,810				\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00
108		Federation Module Internal	Ping Identity Corporation		19,810				\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00
109		Identity Gateway Module Internal	Ping Identity Corporation		18,000				\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00
110		Identity Synchronization Module Internal	Ping Identity Corporation		19,810				\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00

<Vendor Name>

D-3: SDMO Software Costs (minus Service Center)															
1	2	3	4	5	6	7	8	9	19	20	21	22	23	24	25
Line #	Software Category	Type of Software	Current Vendor Software	License Type	Quantity	Notes	Host Location	Proposed Software	Contract Year 4			Contract Year 5			Total Item Cost
									Unit Cost	Quantity	Total Cost Year 4	Unit Cost	Quantity	Total Cost Year 5	
84		Orchestrator Licenses - Production	UI Path	Device	1				\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00
85		Palo Alto Twistlock License - Credits	Palo Alto Networks	Device	3,100				\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00
86		Palo Alto VM 300 Firewalls - Credits	Palo Alto Networks	Device	64				\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00
87		Palo Alto VM 500 Firewalls - Credits	Palo Alto Networks	Device	165				\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00
88		Palo Alto VM 700 Firewalls - Credits	Palo Alto Networks	Device	364				\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00
89		Cortex Data Lake with 1TB of storage, 1-year, includes Premium Support	Palo Alto		1				\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00
90		Prisma Access Enterprise Edition	Palo Alto		1,100				\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00
91		Prisma Access Premium Success	Palo Alto		1				\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00
92		QuickStart Service for Prisma Access Enterprise, 1 Year	Palo Alto		1				\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00
93		Ping Identity License Bundle - External	Ping Identity Corporation	Device	1,500,000				\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00
94		Authorization Module External	Ping Identity Corporation		1,588,190				\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00
95		Directory Server Module External	Ping Identity Corporation		1,588,190				\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00
96		Edge Security Identity Gateway External	Ping Identity Corporation		88,190				\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00
97		Federation Module External	Ping Identity Corporation		1,588,190				\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00
98		Identity Gateway Module External	Ping Identity Corporation		1,500,000				\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00
99		Identity Synchronization Module External	Ping Identity Corporation		1,588,190				\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00
100		Intelligent Access External	Ping Identity Corporation		88,190				\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00
101		Intelligent Authentication External	Ping Identity Corporation		1,500,000				\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00
102		Lifecycle & Relationship Management External	Ping Identity Corporation		1,588,190				\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00
103		Self-Service Module External	Ping Identity Corporation		1,588,190				\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00
104		Ping Identity License Bundle - Internal	Ping Identity Corporation	Device	18,000				\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00
105		Authorization Module Internal	Ping Identity Corporation		19,810				\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00
106		Directory Server Module Internal	Ping Identity Corporation		19,810				\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00
107		Edge Security Identity Gateway Internal	Ping Identity Corporation		1,810				\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00
108		Federation Module Internal	Ping Identity Corporation		19,810				\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00
109		Identity Gateway Module Internal	Ping Identity Corporation		18,000				\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00
110		Identity Synchronization Module Internal	Ping Identity Corporation		19,810				\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00

<Vendor Name>

D-3: SDMO Software Costs (minus Service Center)																	
1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18
Line #	Software Category	Type of Software	Current Vendor Software	License Type	Quantity	Notes	Host Location	Proposed Software	Contract Year 1			Contract Year 2			Contract Year 3		
									Unit Cost	Quantity	Total Cost Year 1	Unit Cost	Quantity	Total Cost Year 2	Unit Cost	Quantity	Total Cost Year 3
111		Identity Workflow Module Internal	Ping Identity Corporation		19,810				\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00
112		Intelligent Access Internal	Ping Identity Corporation		1,810				\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00
113		Intelligent Authentication Internal	Ping Identity Corporation		18,000				\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00
114		Lifecycle & Relationship Management Internal	Ping Identity Corporation		19,810				\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00
115		Self-Service Module Internal	Ping Identity Corporation		19,810				\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00
116		Professional Services Support	Ping Identity Corporation		1				\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00
117		Push Authentication Simple Notification Service	Ping Identity Corporation		1				\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00
118		Select Tier Customer Care package for Customer Support and Customer Success	Ping Identity Corporation		1				\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00
119		Product Support - 10 HR of EM Support, 8x5, 48 Hr Response Time	NXLog	Device	1				\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00
120		Project Plan 3 License (49050379) - Enterprise Tool	Microsoft - SEC	Named User	35				\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00
121		Project Plan 5 License (49050379) - Enterprise Tool	Microsoft - SEC	Named User	15				\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00
122		PRTG Network Monitor License	Paessler	Device	1				\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00
123		Qualys Guard Policy Compliance Subscription License	Qualys Inc.	Device	636				\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00
124		Qualys Guard Policy Compliance Subscription License- FPACT	Qualys Inc.	Device	90				\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00
125		Qualys Guard Vulnerability Management Subscription License	Qualys Inc.	Device	636				\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00
126		Qualys Guard Vulnerability Management Subscription License - FPACT	Qualys Inc.	Device	90				\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00
127		Qualys Express Suite - Qualys Scanner Appliance (24 - 25)	Qualys		1				\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00
128		Qualys Policy Compliance Subscription License	Qualys		4				\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00
129		Qualys Vulnerability Mgmt. Subscription License	Qualys		4				\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00
130		Qualys Express Suite - Qualys Policy Appliance	Qualys Inc.		1				\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00
131		Qualys Express Suite - Qualys Policy Appliance (24 - 25)	Qualys Inc.		1				\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00
132		Qualys Express Suite - Qualys Scanner Appliance	Qualys Inc.		1				\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00
133		Red Hat Consumption for Open Enrollment	Red Hat	Device	1				\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00
134		Red Hat Decision Manager (Now Owned by IBM)	IBM	Device	64				\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00
135		Red Hat OpenShift Container Platform with Integration, Full Support - Non-Production Environments	Red Hat	Device	32				\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00
136		Red Hat OpenShift Container Platform with Integration, Full Support - Production Environments	Red Hat	Device	32				\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00
137		Red Hat OpenShift Container Platform with Runtimes, Full Support - Non-Production Environments	Red Hat	Device	1,056				\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00
138		Red Hat OpenShift Container Platform with Runtimes, Full Support - Production Environments	Red Hat	Device	320				\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00
139		Red Hat OpenShift Container Platform, Full Support - Non-Production Environments	Red Hat	Device	352				\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00
140		Red Hat OpenShift Container Platform, Full Support - Production Environments	Red Hat	Device	24				\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00
141		Red Hat Fuse Extended Life Support renewal	Red Hat		16				\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00
142		Red Hat OpenShift Container Platform with Integration, Full Support (16 Cores or 32 vCPUs, Yearly) - Non-Production Environments	Red Hat		1				\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00
143		Red Hat OpenShift Container Platform with Integration, Full Support (16 Cores or 32 vCPUs, Yearly) - Production Environments	Red Hat		1				\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00
144		Red hat Openshift Container Platform with Integration, Full support (2 Cores 4 vCPUs,Yearly)	Red Hat		7				\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00

<Vendor Name>

D-3: SDMO Software Costs (minus Service Center)															
1	2	3	4	5	6	7	8	9	19	20	21	22	23	24	25
Line #	Software Category	Type of Software	Current Vendor Software	License Type	Quantity	Notes	Host Location	Proposed Software	Contract Year 4			Contract Year 5			Total Item Cost
									Unit Cost	Quantity	Total Cost Year 4	Unit Cost	Quantity	Total Cost Year 5	
111		Identity Workflow Module Internal	Ping Identity Corporation		19,810				\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00
112		Intelligent Access Internal	Ping Identity Corporation		1,810				\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00
113		Intelligent Authentication Internal	Ping Identity Corporation		18,000				\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00
114		Lifecycle & Relationship Management Internal	Ping Identity Corporation		19,810				\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00
115		Self-Service Module Internal	Ping Identity Corporation		19,810				\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00
116		Professional Services Support	Ping Identity Corporation		1				\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00
117		Push Authentication Simple Notification Service	Ping Identity Corporation		1				\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00
118		Select Tier Customer Care package for Customer Support and Customer Success	Ping Identity Corporation		1				\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00
119		Product Support - 10 HR of EM Support, 8x5, 48 Hr Response Time	NXLog	Device	1				\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00
120		Project Plan 3 License (49050379) - Enterprise Tool	Microsoft - SEC	Named User	35				\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00
121		Project Plan 5 License (49050379) - Enterprise Tool	Microsoft - SEC	Named User	15				\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00
122		PRTG Network Monitor License	Paessler	Device	1				\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00
123		Qualys Guard Policy Compliance Subscription License	Qualys Inc.	Device	636				\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00
124		Qualys Guard Policy Compliance Subscription License- FPACT	Qualys Inc.	Device	90				\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00
125		Qualys Guard Vulnerability Management Subscription License	Qualys Inc.	Device	636				\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00
126		Qualys Guard Vulnerability Management Subscription License - FPACT	Qualys Inc.	Device	90				\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00
127		Qualys Express Suite - Qualys Scanner Appliance (24 - 25)	Qualys		1				\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00
128		Qualys Policy Compliance Subscription License	Qualys		4				\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00
129		Qualys Vulnerability Mgmt. Subscription License	Qualys		4				\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00
130		Qualys Express Suite - Qualys Policy Appliance	Qualys Inc.		1				\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00
131		Qualys Express Suite - Qualys Policy Appliance (24 - 25)	Qualys Inc.		1				\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00
132		Qualys Express Suite - Qualys Scanner Appliance	Qualys Inc.		1				\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00
133		Red Hat Consumption for Open Enrollment	Red Hat	Device	1				\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00
134		Red Hat Decision Manager (Now Owned by IBM)	IBM	Device	64				\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00
135		Red Hat OpenShift Container Platform with Integration, Full Support - Non-Production Environments	Red Hat	Device	32				\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00
136		Red Hat OpenShift Container Platform with Integration, Full Support - Production Environments	Red Hat	Device	32				\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00
137		Red Hat OpenShift Container Platform with Runtimes, Full Support - Non-Production Environments	Red Hat	Device	1,056				\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00
138		Red Hat OpenShift Container Platform with Runtimes, Full Support - Production Environments	Red Hat	Device	320				\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00
139		Red Hat OpenShift Container Platform, Full Support - Non-Production Environments	Red Hat	Device	352				\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00
140		Red Hat OpenShift Container Platform, Full Support - Production Environments	Red Hat	Device	24				\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00
141		Red Hat Fuse Extended Life Support renewal	Red Hat		16				\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00
142		Red Hat OpenShift Container Platform with Integration, Full Support (16 Cores or 32 vCPUs, Yearly) - Non-Production Environments	Red Hat		1				\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00
143		Red Hat OpenShift Container Platform with Integration, Full Support (16 Cores or 32 vCPUs, Yearly) - Production Environments	Red Hat		1				\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00
144		Red hat Openshift Container Platform with Integration, Full support (2 Cores 4 vCPUs,Yearly)	Red Hat		7				\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00

<Vendor Name>

D-3: SDMO Software Costs (minus Service Center)																	
1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18
Line #	Software Category	Type of Software	Current Vendor Software	License Type	Quantity	Notes	Host Location	Proposed Software	Contract Year 1			Contract Year 2			Contract Year 3		
									Unit Cost	Quantity	Total Cost Year 1	Unit Cost	Quantity	Total Cost Year 2	Unit Cost	Quantity	Total Cost Year 3
145		Red Hat OpenShift Container Platform with Runtimes, Full Support (16 Cores or 32 vCPUs, Yearly) - Non-Production Environments	Red Hat		1				\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00
146		Red Hat OpenShift Container Platform with Runtimes, Full Support (16 Cores or 32 vCPUs, Yearly) - Production Environments	Red Hat		2				\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00
147		Red Hat OpenShift Container Platform with Runtimes, Full Support (64 Cores or 128 vCPUs, Yearly) - Non-Production Environments	Red Hat		8				\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00
148		Red Hat OpenShift Container Platform with Runtimes, Full Support (64 Cores or 128 vCPUs, Yearly) - Production Environments	Red Hat		2				\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00
149		Red Hat OpenShift Container Platform with Runtimes, Full Support (16 Cores or 32 vCPUs,Yearly)	Red Hat		2				\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00
150		Red Hat OpenShift Container Platform with Runtimes, Full Support (2 Cores or 4 vCPUs,Yearly)	Red Hat		4				\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00
151		Red Hat OpenShift Container Platform with Runtimes, Full Support (2 cores or 4vCPUs, Yearly)	Red Hat		1				\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00
152		Red Hat OpenShift Container Platform, Full Support (2 Cores or 4 vCPUs, Yearly)	Red Hat		25				\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00
153		Red Hat OpenShift Container Platform, Full Support (2 Cores or 4 vCPUs, Yearly) - Non-Production Environments	Red Hat		88				\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00
154		Red Hat OpenShift Container Platform, Full Support (2 Cores or 4 vCPUs, Yearly) - Production Environments	Red Hat		3				\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00
155		Red Hat OpenShift Runtimes, Full Support (2 cores or 4vCPUs, Yearly)	Red Hat		44				\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00
156		Business Support for Reflection Desktop Maintenance	Rocket Software		3				\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00
157		Remote Desktop Services License- (49050379)	Microsoft - SEC	Named User	10				\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00
158		Security Fortify Premium Edition Suite	OpenText	Device	1				\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00
159		Security WebInspect License	OpenText	Device	1				\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00
160		Security WebInspect License Maintenance - Support	OpenText		1				\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00
161		Security WebInspect License Maintenance Licenses - FPACT	OpenText	Device	1				\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00
162		Security WebInspect Licenses - FPACT	OpenText	Device	1				\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00
163		ServiceNow FedRAMP Premium for Production and Non-Production Instances	ServiceNow	Named User	3				\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00
164		ServiceNow Integration Hub Unspecified	ServiceNow	Device	1				\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00
165		ServiceNow License - Enterprise Tool	ServiceNow	Named User	220				\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00
166		ServiceNow Licenses - FPACT	ServiceNow	Named User	6				\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00
167		Sketch License (HCD)	Sketch	Named User	1				\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00
168		Smart Bear/SoapUI - Fixed User - Pro	Smart Bear - SEC	Device	2				\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00
169		Smart Bear/SoapUI - Floating User - Pro	Smart Bear - SEC	Device	1				\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00
170		Smarty License	Smarty	Device	1				\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00
171		Snowflake License	Snowflake	Device	2				\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00
172		Snowflake Software (59,500 Compute Credits per year + 60 TB per month)	Snowflake		1				\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00
173		Snyk for Government - Enterprise	Snyk		1				\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00
174		Snyk for Government - Open Source	Snyk		80				\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00
175		Socure Decision Module (Subscription by Months)	SOCURE INC		6				\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00
176		SocureGov Digital Intelligence Bundle (Quantity depicts the number of API Calls)	SOCURE INC		1,300,000				\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00
177		SocureGov Digital Intelligence Testing Bundle (Quantity depicts the number of API Calls)	SOCURE INC		500,000				\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00
178		SocureGov Document Verification and Biometric Verification (Quantity depicts the number of API Calls)	SOCURE INC		130,000				\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00
179		SonarQube Enterprise Edition Software	SonarSource - SEC	Device	2				\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00
180		SonarQube Enterprise Edition up to 5 Million Lines of Code (LOC).	SonarSource - SEC		1				\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00

<Vendor Name>

D-3: SDMO Software Costs (minus Service Center)															
1	2	3	4	5	6	7	8	9	19	20	21	22	23	24	25
Line #	Software Category	Type of Software	Current Vendor Software	License Type	Quantity	Notes	Host Location	Proposed Software	Contract Year 4			Contract Year 5			Total Item Cost
									Unit Cost	Quantity	Total Cost Year 4	Unit Cost	Quantity	Total Cost Year 5	
145		Red Hat OpenShift Container Platform with Runtimes, Full Support (16 Cores or 32 vCPUs, Yearly) - Non-Production Environments	Red Hat		1				\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00
146		Red Hat OpenShift Container Platform with Runtimes, Full Support (16 Cores or 32 vCPUs, Yearly) - Production Environments	Red Hat		2				\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00
147		Red Hat OpenShift Container Platform with Runtimes, Full Support (64 Cores or 128 vCPUs, Yearly) - Non-Production Environments	Red Hat		8				\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00
148		Red Hat OpenShift Container Platform with Runtimes, Full Support (64 Cores or 128 vCPUs, Yearly) - Production Environments	Red Hat		2				\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00
149		Red Hat OpenShift Container Platform with Runtimes, Full Support (16 Cores or 32 vCPUs,Yearly)	Red Hat		2				\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00
150		Red Hat OpenShift Container Platform with Runtimes, Full Support (2 Cores or 4 vCPUs,Yearly)	Red Hat		4				\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00
151		Red Hat OpenShift Container Platform with Runtimes, Full Support (2 cores or 4vCPUs, Yearly)	Red Hat		1				\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00
152		Red Hat OpenShift Container Platform, Full Support (2 Cores or 4 vCPUs, Yearly)	Red Hat		25				\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00
153		Red Hat OpenShift Container Platform, Full Support (2 Cores or 4 vCPUs, Yearly) - Non-Production Environments	Red Hat		88				\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00
154		Red Hat OpenShift Container Platform, Full Support (2 Cores or 4 vCPUs, Yearly) - Production Environments	Red Hat		3				\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00
155		Red Hat OpenShift Runtimes, Full Support (2 cores or 4vCPUs, Yearly)	Red Hat		44				\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00
156		Business Support for Reflection Desktop Maintenance	Rocket Software		3				\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00
157		Remote Desktop Services License- (49050379)	Microsoft - SEC	Named User	10				\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00
158		Security Fortify Premium Edition Suite	OpenText	Device	1				\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00
159		Security WebInspect License	OpenText	Device	1				\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00
160		Security WebInspect License Maintenance - Support	OpenText		1				\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00
161		Security WebInspect License Maintenance Licenses - FPACT	OpenText	Device	1				\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00
162		Security WebInspect Licenses - FPACT	OpenText	Device	1				\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00
163		ServiceNow FedRAMP Premium for Production and Non-Production Instances	ServiceNow	Named User	3				\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00
164		ServiceNow Integration Hub Unspecified	ServiceNow	Device	1				\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00
165		ServiceNow License - Enterprise Tool	ServiceNow	Named User	220				\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00
166		ServiceNow Licenses - FPACT	ServiceNow	Named User	6				\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00
167		Sketch License (HCD)	Sketch	Named User	1				\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00
168		Smart Bear/SoapUI - Fixed User - Pro	Smart Bear - SEC	Device	2				\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00
169		Smart Bear/SoapUI - Floating User - Pro	Smart Bear - SEC	Device	1				\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00
170		Smarty License	Smarty	Device	1				\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00
171		Snowflake License	Snowflake	Device	2				\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00
172		Snowflake Software (59,500 Compute Credits per year + 60 TB per month)	Snowflake		1				\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00
173		Snyk for Government - Enterprise	Snyk		1				\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00
174		Snyk for Government - Open Source	Snyk		80				\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00
175		Socure Decision Module (Subscription by Months)	SOCURE INC		6				\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00
176		SocureGov Digital Intelligence Bundle (Quantity depicts the number of API Calls)	SOCURE INC		1,300,000				\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00
177		SocureGov Digital Intelligence Testing Bundle (Quantity depicts the number of API Calls)	SOCURE INC		500,000				\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00
178		SocureGov Document Verification and Biometric Verification (Quantity depicts the number of API Calls)	SOCURE INC		130,000				\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00
179		SonarQube Enterprise Edition Software	SonarSource - SEC	Device	2				\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00
180		SonarQube Enterprise Edition up to 5 Million Lines of Code (LOC).	SonarSource - SEC		1				\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00

<Vendor Name>

D-3: SDMO Software Costs (minus Service Center)																	
1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18
Line #	Software Category	Type of Software	Current Vendor Software	License Type	Quantity	Notes	Host Location	Proposed Software	Contract Year 1			Contract Year 2			Contract Year 3		
									Unit Cost	Quantity	Total Cost Year 1	Unit Cost	Quantity	Total Cost Year 2	Unit Cost	Quantity	Total Cost Year 3
181		Splunk Enterprise License	Splunk	Custom Metric	53				\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00
182		Splunk Enterprise Security License	Splunk	Custom Metric	950				\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00
183		Splunk User Behavior Analytics License	Splunk	Custom Metric	12,050				\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00
184		SQL Server 2016 Enterprise Core License - (49050379)	Microsoft - SEC	Device	12				\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00
185		Stark License (HCD)	Stark Lab, Inc.	Named User	11				\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00
186		Tableau Creator License	Tableau	Named User	48				\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00
187		Tableau Data Management License	Tableau	Device	149				\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00
188		Tableau Explorer License	Tableau	Named User	51				\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00
189		Tableau Server Management License	Tableau	Device	149				\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00
190		Tableau Viewer Licenses	Tableau	Device	195				\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00
191		Tasktop Integration Hub Enterprise Edition Licenses - Enterprise Tool	Planview - SEC	Named User	400				\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00
192		Teams AC with Dial Out US/CA Sub Add-on	Microsoft - SEC	Named User	100				\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00
193		Teams Domestic Calling Plan Sub 120 Min Per User	Microsoft - SEC	Named User	100				\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00
194		Tech Smith Snag It License	TechSmith	Named User	70				\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00
195		Tempo - JIRA Planner by Tempo - Enterprise Tool	Tempo - SEC	Named User	1,000				\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00
196		Tempo - JIRA Structure Add On License - Enterprise Tool	Tempo - SEC	Named User	1,000				\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00
197		Tempo - JIRA Tempo Time Sheets Add On License - Enterprise Tool	Tempo - SEC	Named User	1,000				\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00
198		JIRA Planner by Tempo – Resource Planning & Capacity Planning Data Center for Jira Software (Data Center) 500 Users: Commercial Term License	Tempo - SEC		500				\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00
199		Trend Micro - CCA DW	Trend Micro	Device	4				\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00
200		Trend Micro Deep Security Agent License via AWS Marketplace	Trend Micro	Device	450				\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00
201		Trend Micro Deep Security Agent License via AWS Marketplace for FPACT	Trend Micro	Device	24				\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00
202		Trend Micro Deep Security as a Service Via AWS Marketplace - CCA	Trend Micro	Device	4				\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00
203		Unattended Robot - Non-Production	UI Path	Device	2				\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00
204		Unattended Robot - Production	UI Path	Device	3				\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00
205		User Testing Service (HCD)	UserTesting Inc		1				\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00
206		Windows 11 Enterprise License - (49050379)	Microsoft - SEC	Device	110				\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00
207		Beyond Trust Appliance U Series-VM Maintenance Coverage Term: 7/1/2024 - 6/30/2025	BeyondTrust		2				\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00
208		Password Safe with Beyond Insight Maintenance Coverage Term 7/1/2024 - 6/30/2025	BeyondTrust		1,000				\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00
209		Adobe Experience Manager - Cloud Service Sandbox	Adobe		1				\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00
210		Adobe Experience Manager - Dev/QA	Adobe		3				\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00
211		Adobe Experience Manager - Enhanced Security (FED RAMP)	Adobe		1				\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00
212		Adobe Experience Manager - Opt Dev License for Fulfillment	Adobe		1				\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00
213		Adobe Experience Manager - Premier Support Elite	Adobe		1				\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00
214		Adobe Experience Manager Cloud Service	Adobe		1				\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00
215		Adobe Experience Manager Forms - HR 99.5 - 15M Renditions	Adobe		1				\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00
216		Adobe Experience Manager Forms - Opt OSGI Dev License	Adobe		1				\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00
217		Google reCAPTCHA	Google		10				\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00
218		Navigator Software Subscription - FPACT	Navigator		1				\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00
219		Usage: 2 Million Monthly Active Users	OPTIMIZE NORTH AMERICA INC		8				\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00
220		Web Experimentation - Ultimate Package	OPTIMIZE NORTH AMERICA INC		8				\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00
221		Beyond Trust Appliance U Series - VM License	Beyond Trust		2				\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00

<Vendor Name>

D-3: SDMO Software Costs (minus Service Center)															
1	2	3	4	5	6	7	8	9	19	20	21	22	23	24	25
Line #	Software Category	Type of Software	Current Vendor Software	License Type	Quantity	Notes	Host Location	Proposed Software	Contract Year 4			Contract Year 5			Total Item Cost
									Unit Cost	Quantity	Total Cost Year 4	Unit Cost	Quantity	Total Cost Year 5	
181		Splunk Enterprise License	Splunk	Custom Metric	53				\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00
182		Splunk Enterprise Security License	Splunk	Custom Metric	950				\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00
183		Splunk User Behavior Analytics License	Splunk	Custom Metric	12,050				\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00
184		SQL Server 2016 Enterprise Core License - (49050379)	Microsoft - SEC	Device	12				\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00
185		Stark License (HCD)	Stark Lab, Inc.	Named User	11				\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00
186		Tableau Creator License	Tableau	Named User	48				\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00
187		Tableau Data Management License	Tableau	Device	149				\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00
188		Tableau Explorer License	Tableau	Named User	51				\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00
189		Tableau Server Management License	Tableau	Device	149				\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00
190		Tableau Viewer Licenses	Tableau	Device	195				\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00
191		Tasktop Integration Hub Enterprise Edition Licenses - Enterprise Tool	Planview - SEC	Named User	400				\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00
192		Teams AC with Dial Out US/CA Sub Add-on	Microsoft - SEC	Named User	100				\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00
193		Teams Domestic Calling Plan Sub 120 Min Per User	Microsoft - SEC	Named User	100				\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00
194		Tech Smith Snag It License	TechSmith	Named User	70				\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00
195		Tempo - JIRA Planner by Tempo - Enterprise Tool	Tempo - SEC	Named User	1,000				\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00
196		Tempo - JIRA Structure Add On License - Enterprise Tool	Tempo - SEC	Named User	1,000				\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00
197		Tempo - JIRA Tempo Time Sheets Add On License - Enterprise Tool	Tempo - SEC	Named User	1,000				\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00
198		JIRA Planner by Tempo – Resource Planning & Capacity Planning Data Center for Jira Software (Data Center) 500 Users: Commercial Term License	Tempo - SEC		500				\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00
199		Trend Micro - CCA DW	Trend Micro	Device	4				\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00
200		Trend Micro Deep Security Agent License via AWS Marketplace	Trend Micro	Device	450				\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00
201		Trend Micro Deep Security Agent License via AWS Marketplace for FPACT	Trend Micro	Device	24				\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00
202		Trend Micro Deep Security as a Service Via AWS Marketplace - CCA	Trend Micro	Device	4				\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00
203		Unattended Robot - Non-Production	UI Path	Device	2				\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00
204		Unattended Robot - Production	UI Path	Device	3				\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00
205		User Testing Service (HCD)	UserTesting Inc		1				\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00
206		Windows 11 Enterprise License - (49050379)	Microsoft - SEC	Device	110				\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00
207		Beyond Trust Appliance U Series-VM Maintenance Coverage Term: 7/1/2024 - 6/30/2025	BeyondTrust		2				\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00
208		Password Safe with Beyond Insight Maintenance Coverage Term 7/1/2024 - 6/30/2025	BeyondTrust		1,000				\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00
209		Adobe Experience Manager - Cloud Service Sandbox	Adobe		1				\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00
210		Adobe Experience Manager - Dev/QA	Adobe		3				\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00
211		Adobe Experience Manager - Enhanced Security (FED RAMP)	Adobe		1				\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00
212		Adobe Experience Manager - Opt Dev License for Fulfillment	Adobe		1				\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00
213		Adobe Experience Manager - Premier Support Elite	Adobe		1				\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00
214		Adobe Experience Manager Cloud Service	Adobe		1				\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00
215		Adobe Experience Manager Forms - HR 99.5 - 15M Renditions	Adobe		1				\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00
216		Adobe Experience Manager Forms - Opt OSGI Dev License	Adobe		1				\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00
217		Google reCAPTCHA	Google		10				\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00
218		Navigator Software Subscription - FPACT	Navigator		1				\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00
219		Usage: 2 Million Monthly Active Users	OPTIMIZEZY NORTH AMERICA INC		8				\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00
220		Web Experimentation - Ultimate Package	OPTIMIZEZY NORTH AMERICA INC		8				\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00
221		Beyond Trust Appliance U Series - VM License	Beyond Trust		2				\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00

<Vendor Name>

D-3: SDMO Software Costs (minus Service Center)																	
1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18
Line #	Software Category	Type of Software	Current Vendor Software	License Type	Quantity	Notes	Host Location	Proposed Software	Contract Year 1			Contract Year 2			Contract Year 3		
									Unit Cost	Quantity	Total Cost Year 1	Unit Cost	Quantity	Total Cost Year 2	Unit Cost	Quantity	Total Cost Year 3
222		Optimizely Software Subscription	OPTIMIZEZY NORTH AMERICA INC		12				\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00
223		Splunk Synthetics Enterprise Edition - Browser Test License	Splunk		624				\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00
224			Identify Additional Software to the Right						\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00
225			Identify Additional Software to the Right						\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00
226			Identify Additional Software to the Right						\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00
227			Identify Additional Software to the Right						\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00
228			Identify Additional Software to the Right						\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00
229			Identify Additional Software to the Right						\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00
230			Identify Additional Software to the Right						\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00

<Vendor Name>

D-3: SDMO Software Costs (minus Service Center)															
1	2	3	4	5	6	7	8	9	19	20	21	22	23	24	25
Line #	Software Category	Type of Software	Current Vendor Software	License Type	Quantity	Notes	Host Location	Proposed Software	Contract Year 4			Contract Year 5			Total Item Cost
									Unit Cost	Quantity	Total Cost Year 4	Unit Cost	Quantity	Total Cost Year 5	
222		Optimizely Software Subscription	OPTIMIZEZY NORTH AMERICA INC		12				\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00
223		Splunk Synthetics Enterprise Edition - Browser Test License	Splunk		624				\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00
224			Identify Additional Software to the Right						\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00
225			Identify Additional Software to the Right						\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00
226			Identify Additional Software to the Right						\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00
227			Identify Additional Software to the Right						\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00
228			Identify Additional Software to the Right						\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00
229			Identify Additional Software to the Right						\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00
230			Identify Additional Software to the Right						\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00

<Vendor Name>

D-3: SDMO Software Costs (minus Service Center)																	
1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18
Line #	Software Category	Type of Software	Current Vendor Software	License Type	Quantity	Notes	Host Location	Proposed Software	Contract Year 1			Contract Year 2			Contract Year 3		
									Unit Cost	Quantity	Total Cost Year 1	Unit Cost	Quantity	Total Cost Year 2	Unit Cost	Quantity	Total Cost Year 3
231			Identify Additional Software to the Right						\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00
232			Identify Additional Software to the Right						\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00
233			Identify Additional Software to the Right						\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00
234			Identify Additional Software to the Right						\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00
235			Identify Additional Software to the Right						\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00
236			Identify Additional Software to the Right						\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00
237			Identify Additional Software to the Right						\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00
238			Identify Additional Software to the Right						\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00
239			Identify Additional Software to the Right						\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00
240			Identify Additional Software to the Right						\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00
241			Identify Additional Software to the Right						\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00
242			Identify Additional Software to the Right						\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00
243			Identify Additional Software to the Right						\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00
244		Bidder Software Cost (minus Service Center)									\$0.00			\$0.00			\$0.00
245		State Projected Software Budget (minus Service Center)															

<Vendor Name>

D-3: SDMO Software Costs (minus Service Center)															
1	2	3	4	5	6	7	8	9	19	20	21	22	23	24	25
Line #	Software Category	Type of Software	Current Vendor Software	License Type	Quantity	Notes	Host Location	Proposed Software	Contract Year 4			Contract Year 5			Total Item Cost
									Unit Cost	Quantity	Total Cost Year 4	Unit Cost	Quantity	Total Cost Year 5	
231			Identify Additional Software to the Right						\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00
232			Identify Additional Software to the Right						\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00
233			Identify Additional Software to the Right						\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00
234			Identify Additional Software to the Right						\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00
235			Identify Additional Software to the Right						\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00
236			Identify Additional Software to the Right						\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00
237			Identify Additional Software to the Right						\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00
238			Identify Additional Software to the Right						\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00
239			Identify Additional Software to the Right						\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00
240			Identify Additional Software to the Right						\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00
241			Identify Additional Software to the Right						\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00
242			Identify Additional Software to the Right						\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00
243			Identify Additional Software to the Right						\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00
244		Bidder Software Cost (minus Service Center)									\$0.00			\$0.00	\$0.00
245		State Projected Software Budget (minus Service Center)													\$77,300,000.00

<Vendor Name>

D-3: SDMO Software Costs (minus Service Center)																	
1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18
Line #	Software Category	Type of Software	Current Vendor Software	License Type	Quantity	Notes	Host Location	Proposed Software	Contract Year 1			Contract Year 2			Contract Year 3		
									Unit Cost	Quantity	Total Cost Year 1	Unit Cost	Quantity	Total Cost Year 2	Unit Cost	Quantity	Total Cost Year 3
D-3.1: Service Center Software Costs																	
1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18
Line #	Software Category	Type of Software	Current Vendor Software	License Type	Quantity	Notes	Host Location	Proposed Software	Contract Year 1			Contract Year 2			Contract Year 3		
									Unit Cost	Quantity	Total Cost Year 1	Unit Cost	Quantity	Total Cost Year 2	Unit Cost	Quantity	Total Cost Year 3
1									\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00
2									\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00
3									\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00
4									\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00
5									\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00
6									\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00
7									\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00
8									\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00
9									\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00
10									\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00
11									\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00
12									\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00
13									\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00
14									\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00
15									\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00
16									\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00
17									\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00
18									\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00
19									\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00
20									\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00
21			Identify Additional Software to the Right						\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00
22			Identify Additional Software to the Right						\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00
23			Identify Additional Software to the Right						\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00
24			Identify Additional Software to the Right						\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00
25			Identify Additional Software to the Right						\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00
26		Bidder Service Center Software Cost									\$0.00			\$0.00			\$0.00
27		State Projected Service Center Software Budget															

<Vendor Name>

D-3: SDMO Software Costs (minus Service Center)															
1	2	3	4	5	6	7	8	9	19	20	21	22	23	24	25
Line #	Software Category	Type of Software	Current Vendor Software	License Type	Quantity	Notes	Host Location	Proposed Software	Contract Year 4			Contract Year 5			Total Item Cost
									Unit Cost	Quantity	Total Cost Year 4	Unit Cost	Quantity	Total Cost Year 5	
D-3.1: Service Center Software Costs															
1	2	3	4	5	6	7	8	9	19	20	21	22	23	24	40
Line #	Software Category	Type of Software	Current Vendor Software	License Type	Quantity	Notes	Host Location	Proposed Software	Contract Year 4			Contract Year 5			Total Item Cost
									Unit Cost	Quantity	Total Cost Year 4	Unit Cost	Quantity	Total Cost Year 5	
1									\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00
2									\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00
3									\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00
4									\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00
5									\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00
6									\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00
7									\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00
8									\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00
9									\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00
10									\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00
11									\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00
12									\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00
13									\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00
14									\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00
15									\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00
16									\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00
17									\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00
18									\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00
19									\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00
20									\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00
21			Identify Additional Software to the Right						\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00
22			Identify Additional Software to the Right						\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00
23			Identify Additional Software to the Right						\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00
24			Identify Additional Software to the Right						\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00
25			Identify Additional Software to the Right						\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00
26		Bidder Service Center Software Cost									\$0.00			\$0.00	\$0.00
27		State Projected Service Center Software Budget													\$15,100,000.00

Bidder Total Software Costs \$0.00

<Vendor Name>
APPENDIX D-4, INSTRUCTIONS - CLOUD HOSTING DATA CENTER SERVICES COSTS (minus Service Center)

Appendix D-4, Cloud Hosting Data Center Services Costs (minus Service Center), is used to identify all of the bidder's hosting data center costs associated with CalHEERS operation in the cloud, except hosting data center costs associated with the Service Center.

Any Deliverables, Artifacts, or Standard Operating Procedures related to the topic of Cloud Hosting Data Center Services, including any offcycle updates, are to be costed under SDMO Fixed Price Onshore or Offshore Costs, except for those Deliverables identified within the Transition-In and Transition-Out Milestones.

For details on the existing CalHEERS cloud hosting data center services, [please see State provided Ref Documents \(e.g. S1018\) in the Bidders' Library for the additional data supporting Cloud Hosting](#), as well as, the D-6.18-1 - Hosting Services Plan, and the D-6.2-6 - Capacity Management Plan, within the Bidders' Library.

While the current CalHEERS Cloud Hosting Data Center Services are provided through AWS, bidders are permitted to propose alternative or replacement hosting services, as long as such services meet or exceed the specifications of the existing services.

Bidders are only permitted to populate this tab with the True Cost, as defined in Appendix C - Glossary, of the Cloud Hosting Services they propose as part of their solution.

- Bidders are not permitted to apply any mark-up on top of the actual cost of the cloud hosting service items identified in this tab.
- Bidders are not permitted to add any labor costs related to the cloud hosting service items identified in this tab, with exception to the one-time infrastructure costs related to a migration. Bidder Labor costs shall be identified within the line that supports SOW 6.17 - Hosting Services, within Tab D-5, SDMO Fixed Price Costs.

Bidders must include all cloud hosting data center services costs impacts associated with technology refresh in this worksheet, entering those costs within the year they are planned (columns 24 through 38), please review SOW 6.6 Technology Refresh, for details.

Bidders shall NOT include staffing costs (labor hours) associated with the below listed Tech Refresh activities in this worksheet, as they are to be costed within Appendix D-5 - SDMO Fixed Price series of cost worksheets:

- Technology Refresh planning, management, assessment, reporting, tracking, deliverable development, workplan development/maintenance, artifact development/maintenance (e.g., Tech Refresh Roadmap).
- Implementation of State approved technology refresh recommendations.

Bidders are responsible to accurately propose software for their solution, delineating between software to be represented on D-3, SDMO Software Costs (minus Service Center)/D-3.1, Service Center Software Costs, and software that is Cloud Hosting related and thus should be represented on D-4, Cloud Hosting Data Center Services Costs (minus Service Center)/D-4.1, Service Center Cloud Hosting Data Center Services Costs.

Bidders are permitted to insert additional rows into the bottom section of the worksheet to identify additionally proposed services. Bidders must ensure that the formulas at bottom of the worksheet are updated to include any added rows.

The costs identified within this worksheet (Appendix D-4, Cloud Hosting Data Center Services Costs) will be linked to Appendix D-1, TOTAL COST SUMMARY, and will be part of the bid amount.

Column 1, Line # = No entry needed unless rows are added at the bottom for additional cloud hosting data center services.

Columns 2 through 18 = Bidders must provide all the details related to the product, services, or resources proposed under cloud hosting data center services for the CalHEERS solution, inclusive of all related costs, including initial installation, including migration if proposed as part of the solution, and associated with recurring costs for Contract Year 1 through 5.

Column 19 through 22 = One-time Infrastructure Costs, Bidders must enter the details pertaining to the one-time costs for installation of their proposed cloud hosting data center services, including migration if applicable. Bidders need to ensure that there is no overlap between One-time installation Costs and the recurring costs of Contract Year 1.

Column 23 = Total One-time Infrastructure Costs, No entry needed unless rows are added at the bottom for additional cloud hosting data center services. The State has provided formulas that calculate the One-time Installation Costs of each cloud hosting service, summing to a subtotal at the bottom of the column.

Columns 24 through 38 = Contract Year X Recurring Costs = The Bidder must enter the details, unit cost and quantity for each product, services, or resources proposed, inclusive of all related costs within the Contract Year. For Year 1, Bidders are to enter cloud hosting data center services costs which take into consideration and align with the Bidder's Transition-In Plan.

Column 39 = Total Recurring Costs, No entry needed unless rows are added at the bottom for additional cloud hosting data center services. The State has provided formulas that calculate the Total Recurring Costs of each cloud hosting data center service, summing to a subtotal at the bottom of the column.

Column 40, Total Cloud Hosting Data Center Services Cost (Minus Service Center) = No entry needed unless rows are added at the bottom for additional cloud hosting data center services. The State has provided formulas that calculate the total cost of each product, services, or resources proposed for Contract Year 1 through 5.

Bidders are permitted to insert additional rows into the bottom section of the worksheet to identify additionally proposed products, services, or resources. Bidders must ensure that the formulas at bottom of the worksheet are updated to include any added rows.

Appendix D-4.1 (Located on Tab D-4, starting at Row 68), Service Center Cloud Hosting Data Center Services Costs, is used to identify all of the bidder's cloud hosting data center services costs associated with the CalHEERS Service Center.

All Instructions for Appendix D-4 (above) apply to Service Center Cloud Hosting Data Center Services Costs, however Appendix D-4.1 is limited to covering only the proposed cloud hosting data center services and costs associated with the CalHEERS Service Center.

<Vendor Name>

D-4: Cloud Hosting Data Center Services Costs (minus Service Center)																	
1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18
Line #	Region	Environment	Product, Service or Resource Type	Product, Service or Resource Description	Manufacture	Compute	Memory	Operating System	Storage Type	Storage Amount	Data Transfer/Egress	# of Instances	Instance Type	Tenancy	Assumed Usage	Usage Type	Purchasing Option
1																	
2																	
3																	
4																	
5																	
6																	
7																	
8																	
9																	
10																	
11																	
12																	
13																	
14																	
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<Vendor Name>

D-4: Cloud Hosting Data Center Services Costs (minus Service Center)																			
1	2	3	4	5	6	7	19	20	21	22	23	24	25	26	27	28	29	30	
Line #	Region	Environment	Product, Service or Resource Type	Product, Service or Resource Description	Manufacture	Compute	One-time Infrastructure Costs					Contract Year 1 Recurring Costs			Contract Year 2 Recurring Costs			Contra	
							Unit Cost (Install)	Quantity (Install)	Effort/Hrs (Install)	Blended Rate (Install)	Total One-Time Infrastructure Costs	Unit Cost	Quantity	Total Cost Year 1	Unit Cost	Quantity	Total Cost Year 2	Unit Cost	
1							\$0.00	0	0	\$0.00	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	
2							\$0.00	0	0	\$0.00	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	
3							\$0.00	0	0	\$0.00	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	
4							\$0.00	0	0	\$0.00	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	
5							\$0.00	0	0	\$0.00	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	
6							\$0.00	0	0	\$0.00	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	
7							\$0.00	0	0	\$0.00	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	
8							\$0.00	0	0	\$0.00	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	
9							\$0.00	0	0	\$0.00	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	
10							\$0.00	0	0	\$0.00	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	
11							\$0.00	0	0	\$0.00	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	
12							\$0.00	0	0	\$0.00	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	
13							\$0.00	0	0	\$0.00	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	
14							\$0.00	0	0	\$0.00	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	
15							\$0.00	0	0	\$0.00	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	
16							\$0.00	0	0	\$0.00	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	
17							\$0.00	0	0	\$0.00	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	
18							\$0.00	0	0	\$0.00	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	
19							\$0.00	0	0	\$0.00	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	
20							\$0.00	0	0	\$0.00	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	
21							\$0.00	0	0	\$0.00	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	
22							\$0.00	0	0	\$0.00	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	
23							\$0.00	0	0	\$0.00	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	
24							\$0.00	0	0	\$0.00	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	
25							\$0.00	0	0	\$0.00	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	
26							\$0.00	0	0	\$0.00	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	
27							\$0.00	0	0	\$0.00	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	
28							\$0.00	0	0	\$0.00	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	
29							\$0.00	0	0	\$0.00	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	
30							\$0.00	0	0	\$0.00	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	
31							\$0.00	0	0	\$0.00	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	
32							\$0.00	0	0	\$0.00	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	
33							\$0.00	0	0	\$0.00	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	
34							\$0.00	0	0	\$0.00	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	
35							\$0.00	0	0	\$0.00	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	
36							\$0.00	0	0	\$0.00	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	
37							\$0.00	0	0	\$0.00	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	
38							\$0.00	0	0	\$0.00	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	
39							\$0.00	0	0	\$0.00	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	
40							\$0.00	0	0	\$0.00	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	
41							\$0.00	0	0	\$0.00	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	
42							\$0.00	0	0	\$0.00	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	
43							\$0.00	0	0	\$0.00	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	
44							\$0.00	0	0	\$0.00	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	
45							\$0.00	0	0	\$0.00	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	
46							\$0.00	0	0	\$0.00	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	
47							\$0.00	0	0	\$0.00	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	
48							\$0.00	0	0	\$0.00	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	
49							\$0.00	0	0	\$0.00	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	
50							\$0.00	0	0	\$0.00	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	

<Vendor Name>

D-4: Cloud Hosting Data Center Services Costs (minus Service Center)							31	32
1	2	3	4	5	6	7	ct Year 3 Recurring Costs	
Line #	Region	Environment	Product, Service or Resource Type	Product, Service or Resource Description	Manufacture	Compute	Quantity	Total Cost Year 3
1							0	\$0.00
2							0	\$0.00
3							0	\$0.00
4							0	\$0.00
5							0	\$0.00
6							0	\$0.00
7							0	\$0.00
8							0	\$0.00
9							0	\$0.00
10							0	\$0.00
11							0	\$0.00
12							0	\$0.00
13							0	\$0.00
14							0	\$0.00
15							0	\$0.00
16							0	\$0.00
17							0	\$0.00
18							0	\$0.00
19							0	\$0.00
20							0	\$0.00
21							0	\$0.00
22							0	\$0.00
23							0	\$0.00
24							0	\$0.00
25							0	\$0.00
26							0	\$0.00
27							0	\$0.00
28							0	\$0.00
29							0	\$0.00
30							0	\$0.00
31							0	\$0.00
32							0	\$0.00
33							0	\$0.00
34							0	\$0.00
35							0	\$0.00
36							0	\$0.00
37							0	\$0.00
38							0	\$0.00
39							0	\$0.00
40							0	\$0.00
41							0	\$0.00
42							0	\$0.00
43							0	\$0.00
44							0	\$0.00
45							0	\$0.00
46							0	\$0.00
47							0	\$0.00
48							0	\$0.00
49							0	\$0.00
50							0	\$0.00

<Vendor Name>

D-4: Cloud Hosting Data Center Services Costs (minus Service Center)														
1	2	3	4	5	6	7	33	34	35	36	37	38	39	40
Line #	Region	Environment	Product, Service or Resource Type	Product, Service or Resource Description	Manufacture	Compute	Contract Year 4 Recurring Costs			Contract Year 5 Recurring Costs			Total Recurring Costs	Total Cloud Hosting Cost (Minus Contact Center)
							Unit Cost	Quantity	Total Cost Year 4	Unit Cost	Quantity	Total Cost Year 5		
1							\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	\$0.00
2							\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	\$0.00
3							\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	\$0.00
4							\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	\$0.00
5							\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	\$0.00
6							\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	\$0.00
7							\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	\$0.00
8							\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	\$0.00
9							\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	\$0.00
10							\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	\$0.00
11							\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	\$0.00
12							\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	\$0.00
13							\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	\$0.00
14							\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	\$0.00
15							\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	\$0.00
16							\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	\$0.00
17							\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	\$0.00
18							\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	\$0.00
19							\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	\$0.00
20							\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	\$0.00
21							\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	\$0.00
22							\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	\$0.00
23							\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	\$0.00
24							\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	\$0.00
25							\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	\$0.00
26							\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	\$0.00
27							\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	\$0.00
28							\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	\$0.00
29							\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	\$0.00
30							\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	\$0.00
31							\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	\$0.00
32							\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	\$0.00
33							\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	\$0.00
34							\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	\$0.00
35							\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	\$0.00
36							\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	\$0.00
37							\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	\$0.00
38							\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	\$0.00
39							\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	\$0.00
40							\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	\$0.00
41							\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	\$0.00
42							\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	\$0.00
43							\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	\$0.00
44							\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	\$0.00
45							\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	\$0.00
46							\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	\$0.00
47							\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	\$0.00
48							\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	\$0.00
49							\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	\$0.00
50							\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	\$0.00

<Vendor Name>

D-4: Cloud Hosting Data Center Services Costs (minus Service Center)																	
1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18
Line #	Region	Environment	Product, Service or Resource Type	Product, Service or Resource Description	Manufacture	Compute	Memory	Operating System	Storage Type	Storage Amount	Data Transfer/ Egress	# of Instances	Instance Type	Tenancy	Assumed Usage	Usage Type	Purchasing Option
51																	
52																	
53																	
54																	
55																	
56																	
57																	

<Vendor Name>

D-4: Cloud Hosting Data Center Services Costs (minus Service Center)																			
1	2	3	4	5	6	7	19	20	21	22	23	24	25	26	27	28	29	30	
Line #	Region	Environment	Product, Service or Resource Type	Product, Service or Resource Description	Manufacture	Compute	One-time Infrastructure Costs					Contract Year 1 Recurring Costs			Contract Year 2 Recurring Costs			Contra	
							Unit Cost (Install)	Quantity (Install)	Effort/Hrs (Install)	Blended Rate (Install)	Total One-Time Infrastructure Costs	Unit Cost	Quantity	Total Cost Year 1	Unit Cost	Quantity	Total Cost Year 2	Unit Cost	
51							\$0.00	0	0	\$0.00	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	
52							\$0.00	0	0	\$0.00	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	
53							\$0.00	0	0	\$0.00	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	
54							\$0.00	0	0	\$0.00	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	
55							\$0.00	0	0	\$0.00	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	
56							\$0.00	0	0	\$0.00	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	
57											\$0.00			\$0.00			\$0.00		

<Vendor Name>

D-4: Cloud Hosting Data Center Services Costs (minus Service Center)								
1	2	3	4	5	6	7	31	32
Line #	Region	Environment	Product, Service or Resource Type	Product, Service or Resource Description	Manufacture	Compute	ct Year 3 Recurring Costs	
							Quantity	Total Cost Year 3
51							0	\$0.00
52							0	\$0.00
53							0	\$0.00
54							0	\$0.00
55							0	\$0.00
56							0	\$0.00
57								\$0.00

<Vendor Name>

D-4: Cloud Hosting Data Center Services Costs (minus Service Center)														
1	2	3	4	5	6	7	33	34	35	36	37	38	39	40
Line #	Region	Environment	Product, Service or Resource Type	Product, Service or Resource Description	Manufacture	Compute	Contract Year 4 Recurring Costs			Contract Year 5 Recurring Costs			Total Recurring Costs	Total Cloud Hosting Cost (Minus Contact Center)
							Unit Cost	Quantity	Total Cost Year 4	Unit Cost	Quantity	Total Cost Year 5		
51							\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	\$0.00
52							\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	\$0.00
53							\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	\$0.00
54							\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	\$0.00
55							\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	\$0.00
56							\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	\$0.00
57									\$0.00			\$0.00	\$0.00	\$0.00

<Vendor Name>

D-4: Cloud Hosting Data Center Services Costs (minus Service Center)																	
1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18
Line #	Region	Environment	Product, Service or Resource Type	Product, Service or Resource Description	Manufacture	Compute	Memory	Operating System	Storage Type	Storage Amount	Data Transfer/ Egress	# of Instances	Instance Type	Tenancy	Assumed Usage	Usage Type	Purchasing Option

D-4.1: Service Center Cloud Hosting Data Center Services Costs																	
1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18
Line #	Region	Environment	Product, Service or Resource Type	Product, Service or Resource Description	Manufacture	Compute	Memory	Operating System	Storage Type	Storage Amount	Data Transfer/ Egress	# of Instances	Instance Type	Tenancy	Assumed Usage	Usage Type	Purchasing Option
1																	
2																	
3																	
4																	
5																	
6																	
7																	
8																	
9																	
10																	
11																	
12																	
13																	
14																	
15																	
16																	
17																	
18																	
19																	
20																	
21																	
22																	
23																	
24																	
25																	
26																	
27																	
28																	
29																	
30																	
31																	

<Vendor Name>

D-4: Cloud Hosting Data Center Services Costs (minus Service Center)																			
1	2	3	4	5	6	7	19	20	21	22	23	24	25	26	27	28	29	30	
Line #	Region	Environment	Product, Service or Resource Type	Product, Service or Resource Description	Manufacture	Compute	One-time Infrastructure Costs					Contract Year 1 Recurring Costs			Contract Year 2 Recurring Costs			Contra	
							Unit Cost (Install)	Quantity (Install)	Effort/Hrs (Install)	Blended Rate (Install)	Total One-Time Infrastructure Costs	Unit Cost	Quantity	Total Cost Year 1	Unit Cost	Quantity	Total Cost Year 2	Unit Cost	

D-4.1: Service Center Cloud Hosting Data Center Services Costs																		
1	2	3	4	5	6	7	19	20	21	22	23	24	25	26	27	28	29	30
Line #	Region	Environment	Product, Service or Resource Type	Product, Service or Resource Description	Manufacture	Compute	One-time Infrastructure Costs					Contract Year 1			Contract Year 2			
							Unit Cost (Install)	Quantity (Install)	Effort/Hrs (Install)	Blended Rate (Install)	Total One-Time Contact Center Infrastructure Costs	Unit Cost	Quantity	Total Cost Year 1	Unit Cost	Quantity	Total Cost Year 2	
1							\$0.00	0	0	\$0.00	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00
2							\$0.00	0	0	\$0.00	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00
3							\$0.00	0	0	\$0.00	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00
4							\$0.00	0	0	\$0.00	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00
5							\$0.00	0	0	\$0.00	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00
6							\$0.00	0	0	\$0.00	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00
7							\$0.00	0	0	\$0.00	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00
8							\$0.00	0	0	\$0.00	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00
9							\$0.00	0	0	\$0.00	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00
10							\$0.00	0	0	\$0.00	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00
11							\$0.00	0	0	\$0.00	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00
12							\$0.00	0	0	\$0.00	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00
13							\$0.00	0	0	\$0.00	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00
14							\$0.00	0	0	\$0.00	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00
15							\$0.00	0	0	\$0.00	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00
16							\$0.00	0	0	\$0.00	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00
17							\$0.00	0	0	\$0.00	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00
18							\$0.00	0	0	\$0.00	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00
19							\$0.00	0	0	\$0.00	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00
20							\$0.00	0	0	\$0.00	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00
21							\$0.00	0	0	\$0.00	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00
22							\$0.00	0	0	\$0.00	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00
23							\$0.00	0	0	\$0.00	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00
24							\$0.00	0	0	\$0.00	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00
25							\$0.00	0	0	\$0.00	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00
26							\$0.00	0	0	\$0.00	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00
27							\$0.00	0	0	\$0.00	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00
28							\$0.00	0	0	\$0.00	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00
29							\$0.00	0	0	\$0.00	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00
30							\$0.00	0	0	\$0.00	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00
31											\$0.00			\$0.00			\$0.00	

<Vendor Name>

D-4: Cloud Hosting Data Center Services Costs (minus Service Center)								
1	2	3	4	5	6	7	31	32
Line #	Region	Environment	Product, Service or Resource Type	Product, Service or Resource Description	Manufacture	Compute	Contract Year 3 Recurring Costs	
							Quantity	Total Cost Year 3

D-4.1: Service Center Cloud Hosting Data Center Services Costs								
1	2	3	4	5	6	7	31	32
Line #	Region	Environment	Product, Service or Resource Type	Product, Service or Resource Description	Manufacture	Compute	Contract Year 3	
							Quantity	Total Cost Year 3
1							0	\$0.00
2							0	\$0.00
3							0	\$0.00
4							0	\$0.00
5							0	\$0.00
6							0	\$0.00
7							0	\$0.00
8							0	\$0.00
9							0	\$0.00
10							0	\$0.00
11							0	\$0.00
12							0	\$0.00
13							0	\$0.00
14							0	\$0.00
15							0	\$0.00
16							0	\$0.00
17							0	\$0.00
18							0	\$0.00
19							0	\$0.00
20							0	\$0.00
21							0	\$0.00
22							0	\$0.00
23							0	\$0.00
24							0	\$0.00
25							0	\$0.00
26							0	\$0.00
27							0	\$0.00
28							0	\$0.00
29							0	\$0.00
30							0	\$0.00
31								\$0.00

<Vendor Name>

D-4: Cloud Hosting Data Center Services Costs (minus Service Center)														
1	2	3	4	5	6	7	33	34	35	36	37	38	39	40
Line #	Region	Environment	Product, Service or Resource Type	Product, Service or Resource Description	Manufacture	Compute	Contract Year 4 Recurring Costs			Contract Year 5 Recurring Costs			Total Recurring Costs	Total Cloud Hosting Cost (Minus Contact Center)
							Unit Cost	Quantity	Total Cost Year 4	Unit Cost	Quantity	Total Cost Year 5		

D-4.1: Service Center Cloud Hosting Data Center Services Costs														
1	2	3	4	5	6	7	33	34	35	36	37	38	39	40
Line #	Region	Environment	Product, Service or Resource Type	Product, Service or Resource Description	Manufacture	Compute	Contract Year 4			Contract Year 5			Total Recurring Costs	Total Contact Center Cloud Hosting Cost
							Unit Cost	Quantity	Total Cost Year 4	Unit Cost	Quantity	Total Cost Year 5		
1							\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	\$0.00
2							\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	\$0.00
3							\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	\$0.00
4							\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	\$0.00
5							\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	\$0.00
6							\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	\$0.00
7							\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	\$0.00
8							\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	\$0.00
9							\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	\$0.00
10							\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	\$0.00
11							\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	\$0.00
12							\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	\$0.00
13							\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	\$0.00
14							\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	\$0.00
15							\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	\$0.00
16							\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	\$0.00
17							\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	\$0.00
18							\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	\$0.00
19							\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	\$0.00
20							\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	\$0.00
21							\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	\$0.00
22							\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	\$0.00
23							\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	\$0.00
24							\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	\$0.00
25							\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	\$0.00
26							\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	\$0.00
27							\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	\$0.00
28							\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	\$0.00
29							\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	\$0.00
30							\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	\$0.00
31									\$0.00			\$0.00	\$0.00	\$0.00

Bidder Total Cloud Hosting Data Center Services Costs

\$0.00

<Vendor Name>

APPENDIX D-5, INSTRUCTIONS - SDMO FIXED PRICE ONSHORE COSTS

Appendix D-5, SDMO FIXED PRICE ONSHORE COSTS, is used to identify the bidder’s costs for providing the ongoing services required to maintain and operate CalHEERS.

All Key Staff (and applicable support staff), except for the Transition Manager, are to be costed under the D-5, Fixed Price Onshore/Offshore series of worksheets. The Transition Manager (and applicable Non-Key Staff) should be costed under Appendix D-8, Transition-In Costs, and Appendix D-8.2, Transition-Out Costs.

All Deliverables, Artifacts, or Standard Operating Procedures, including any off cycle updates, are to be costed under SDMO Fixed Price Onshore or Offshore Costs, except for Deliverables developed in association with individual Releases and Change Requests or identified within the Transition-In and Transition-Out Milestones.

Column 1, Line # = No entry needed.

Column 2, SDMO Activity = No entry needed. The State has provided the name of the SDMO activity from Appendix A-4, Statement of Work.

Column 3, SOW Reference = No entry needed. The State has provided the section reference in Appendix A-4, Statement of Work.

Column 4, Estimated Annual Hours Year 1 =No entry needed. The State has provided formulas transfer the bidder identified effort from D-5.1 into this sheet.

Columns 9, 14, 19, 24, 29, 34, 39, 44, 49 Estimated Annual Hours Year X = The bidder must provide the estimated annual hours for each service from the Appendix A-4, Statement of Work. The bidder is expected to meet all the Contract requirements within these hours.

Columns 5, Onshore Blended Rate Year 1 = No entry needed. The State has provided a formulas to transfer the blended onshore rate for SDMO Fixed Price Onshore Costs from D-5.1, and auto-populate the rate down the column.

Columns 10, 15, 20, 25, 30, 35, 40, 45, 50 Onshore Blended Rate Year X = The bidder must enter a blended rate for SDMO Fixed Price Onshore Costs. The blended rate will be the multiplied by the annual hours to determine an annual staffing cost for each activity. The State has provided a formula to auto-populate the rate down each column.

Columns 6, 11, 16, 21, 26, 31, 36, 41, 46, 51 Total Staffing Cost Year X = No entry needed. The Total Annual Cost will be calculated for each activity by multiplying the bidder Estimated Annual Hours by the bidder identified Blended Rate.

Column 7, 12, 17, 22, 27, 32, 37, 42, 47, 52 Other Costs Year X = Onshore costs included in these columns are specific to other non-staffing components of cost associated with the activity, including subcontracts, bid as part of the SDMO Fixed Price. Any costs identified as Other require the bidder to provide supplemental cost details, including a basis of estimation, the number of units, and per unit rate. **Note: labor efforts supporting Hardware, Software, and Cloud Hosting Services (exluding effort for cloud one-time infrastructure implementation) shall be included in this worksheet, as all other aspects of those cost categories should be identified in their respective worksheets: Appendix D-2, SDMO Hardware Costs, or Appendix D-3, SDMO Software Costs, or Appendix D-4, Cloud Hosting Data Center Services Costs.**

Columns 8, 13, 18, 23, 28, 33, 38, 43, 48, 53 Total Annual Cost Year X = No entry needed. The Total Annual Cost will be calculated for each activity, by year, by adding the Total Staffing Cost and Other Cost.

Column 54, Total Onshore Activity Cost = No entry needed. The Total Activity Cost is the sum of Total Annual Costs for the SDMO activity for Years 1 through 10.

Line 11 - While estimating the effort for Quality Management activities, bidder's should pay close attention to SOW Section 3.10.7.2, Implementation of Improvement Recommendations, Req. #s 3.10.7-10 through 3.10.7-16.

Line 14, CalHEERS Project Processes = The bidder must enter their associated costs in this line.

Line 15, CalHEERS Project Training = The bidder must enter their associated costs in this line.

Lines 20-23, 27 - No entry required. These costs are solicited via the Appendix D-7, Onshore System Changes Costs worksheet.

Line 56, Technology Refresh = Bidders shall only include onshore staffing costs (labor hours) associated with the Tech Refresh activities listed below in this worksheet, entering those efforts within the year they are planned (please review SOW 6.6 Technology Refresh, for details):

- Technology Refresh planning, management, assessment, reporting, tracking, deliverable development, workplan development/maintenance, artifact development/maintenance (e.g., Tech Refresh Roadmap).
- Implementation of State approved technology refresh recommendations.

Bidders shall NOT include Hardware, Software, Cloud Hosting Data Center Services costs associated with Technology Refresh in this tab, as they are managed in other tabs within this workbook.

Line 68, Project Support Services = No entry needed. The State has provided formulas that will pull the necessary data from Appendix D-5.2, SDMO Fixed Price Onshore - PSS Worksheet.

Line 71, Total SDMO Fixed Price Onshore Cost - No entry required. The State has provided a formula to SUM all Total Onshore Activity Costs.

Line 72, Cost Percentage of Prior Year = The State expects the Contractor to implement process efficiencies and reduce the Total Annual Cost by at least five percent (5%) per year, starting between Contract Year 2 and Contract Year 3. Any bidder that does not comply with this requirement may be deemed non-responsive.

<Vendor Name>

D-5: SDMO Fixed Price Onshore Costs																					
1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20	21	22
			Cost for Contract Year 1					Cost for Contract Year 2					Cost for Contract Year 3					Cost for Contract Year 4			
Line #	SDMO Activity (Onshore)	SOW Ref	Estimated Annual Hours Year 1	Onshore Blended Rate Year 1	Total Staffing Cost Year 1	Other Cost Year 1	Total Annual Cost Year 1	Estimated Annual Hours Year 2	Onshore Blended Rate Year 2	Total Staffing Cost Year 2	Other Cost Year 2	Total Annual Cost Year 2	Estimated Annual Hours Year 3	Onshore Blended Rate Year 3	Total Staffing Cost Year 3	Other Cost Year 3	Total Annual Cost Year 3	Estimated Annual Hours Year 4	Onshore Blended Rate Year 4	Total Staffing Cost Year 4	Other Cost Year 4
1	Project Management Requirements	3																			
2	Project Management	3.1	-	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00
3	Schedule Management	3.2	-	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00
4	Cost/Cost Estimating Management	3.3	-	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00
5	Human Resource Management	3.4	-	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00
6	Risk and Issue Management	3.5	-	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00
7	Communication Management	3.6	-	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00
8	Document Management	3.7	-	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00
9	SOW Requirements Management	3.8	-	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00
10	Problem Escalation	3.9	-	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00
11	Quality Management	3.10	-	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00
12	Contract Management	3.11	-	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00
13	CalHEERS Proj Enterprise Tools	3.12	-	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00
14	CalHEERS Project Processes	3.13	-	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00
15	CalHEERS Project Training	3.14	-	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00
16	Strategic Planning and Management	3.15	-	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00
17	Policy & Legis Impact Analysis & Change Sup	3.16	-	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00
18	Audit Evaluation and Findings Services	3.17	-	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00
19	System Change & Enhancement Rqmts	4																			
20	System/Software Development Lifecycle (SDLC)	4.1	This SOW activity is covered as part of Tab D-7 System Changes Costs																		
21	Change Management and Configuration Management (System)	4.2	This SOW activity is covered as part of Tab D-7 System Changes Costs																		
22	Change/Refresh/Upgrade	4.3	This SOW activity is covered as part of Tab D-7 System Changes Costs																		
23	Code Development	4.4	This SOW activity is covered as part of Tab D-7 System Changes Costs																		
24	System Requirements Management	4.5	-	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00
25	Release Management	4.6	-	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00
26	Organization & Business Change Management	4.7	-	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00
27	Testing	4.8	This SOW activity is covered as part of Tab D-7 System Changes Costs																		
28	Defect Management	4.9	-	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00
29	Program Support Rqmts	5																			
30	Program Support Services	5.1	-	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00
31	Consumer Experience Services	5.2	-	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00
32	ROP Batch Services	5.3	-	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00
33	BOT Services	5.4	-	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00
34	Small Change Notices Services	5.5	-	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00
35	Salesforce Application Maintenance Services	5.6	-	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00
36	IDP Services	5.7	-	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00
37	Application Maintenance Services	5.8	-	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00
38	Usability Research Services	5.9	-	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00
39	eHIT Services	5.10	-	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00
40	Fed Reg Analysis and Imp Services	5.11	-	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00
41	State Reg Analysis and Impl Services	5.12	-	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00
42	Date & Analytics Services	5.13	-	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00
43	Print Mail Center Support	5.14	-	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00

<Vendor Name>

D-5: SDMO Fixed Price Onshore Costs								
1	2	3	23	24	25	26	27	28
				Cost for Contract Year 5				
Line #	SDMO Activity (Onshore)	SOW Ref	Total Annual Cost Year 4	Estimated Annual Hours Year 5	Onshore Blended Rate Year 5	Total Staffing Cost Year 5	Other Cost Year 5	Total Annual Cost Year 5
1	Project Management Requirements	3						
2	Project Management	3.1	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00
3	Schedule Management	3.2	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00
4	Cost/Cost Estimating Management	3.3	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00
5	Human Resource Management	3.4	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00
6	Risk and Issue Management	3.5	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00
7	Communication Management	3.6	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00
8	Document Management	3.7	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00
9	SOW Requirements Management	3.8	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00
10	Problem Escalation	3.9	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00
11	Quality Management	3.10	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00
12	Contract Management	3.11	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00
13	CalHEERS Proj Enterprise Tools	3.12	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00
14	CalHEERS Project Processes	3.13	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00
15	CalHEERS Project Training	3.14	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00
16	Strategic Planning and Management	3.15	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00
17	Policy & Legis Impact Analysis & Change Sup	3.16	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00
18	Audit Evaluation and Findings Services	3.17	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00
19	System Change & Enhancement Rqmts	4						
20	System/Software Development Lifecycle (SDLC)	4.1						
21	Change Management and Configuration Management (System)	4.2						
22	Change/Refresh/Upgrade	4.3						
23	Code Development	4.4						
24	System Requirements Management	4.5	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00
25	Release Management	4.6	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00
26	Organization & Business Change Management	4.7	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00
27	Testing	4.8						
28	Defect Management	4.9	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00
29	Program Support Rqmts	5						
30	Program Support Services	5.1	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00
31	Consumer Experience Services	5.2	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00
32	ROP Batch Services	5.3	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00
33	BOT Services	5.4	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00
34	Small Change Notices Services	5.5	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00
35	Salesforce Application Maintenance Services	5.6	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00
36	IDP Services	5.7	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00
37	Application Maintenance Services	5.8	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00
38	Usability Research Services	5.9	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00
39	eHIT Services	5.10	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00
40	Fed Reg Analysis and Imp Services	5.11	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00
41	State Reg Analysis and Impl Services	5.12	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00
42	Date & Analytics Services	5.13	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00
43	Print Mail Center Support	5.14	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00

<Vendor Name>

D-5: SDMO Fixed Price Onshore Costs																						
1	2	3	29	30	31	32	33	34	35	36	37	38	39	40	41	42	43	44	45	46	47	48
			Cost for Contract Year 6					Cost for Contract Year 7					Cost for Contract Year 8					Cost for Contract Year 9				
Line #	SDMO Activity (Onshore)	SOW Ref	Estimated Annual Hours Year 6	Onshore Blended Rate Year 6	Total Staffing Cost Year 6	Other Cost Year 6	Total Annual Cost Year 6	Estimated Annual Hours Year 7	Onshore Blended Rate Year 7	Total Staffing Cost Year 7	Other Cost Year 7	Total Annual Cost Year 7	Estimated Annual Hours Year 8	Onshore Blended Rate Year 8	Total Staffing Cost Year 8	Other Cost Year 8	Total Annual Cost Year 8	Estimated Annual Hours Year 9	Onshore Blended Rate Year 9	Total Staffing Cost Year 9	Other Cost Year 9	Total Annual Cost Year 9
1	Project Management Requirements	3																				
2	Project Management	3.1	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00
3	Schedule Management	3.2	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00
4	Cost/Cost Estimating Management	3.3	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00
5	Human Resource Management	3.4	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00
6	Risk and Issue Management	3.5	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00
7	Communication Management	3.6	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00
8	Document Management	3.7	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00
9	SOW Requirements Management	3.8	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00
10	Problem Escalation	3.9	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00
11	Quality Management	3.10	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00
12	Contract Management	3.11	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00
13	CalHEERS Proj Enterprise Tools	3.12	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00
14	CalHEERS Project Processes	3.13	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00
15	CalHEERS Project Training	3.14	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00
16	Strategic Planning and Management	3.15	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00
17	Policy & Legis Impact Analysis & Change Sup	3.16	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00
18	Audit Evaluation and Findings Services	3.17	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00
19	System Change & Enhancement Rqmts	4																				
20	System/Software Development Lifecycle (SDLC)	4.1																				
21	Change Management and Configuration Management (System)	4.2																				
22	Change/Refresh/Upgrade	4.3																				
23	Code Development	4.4																				
24	System Requirements Management	4.5	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00
25	Release Management	4.6	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00
26	Organization & Business Change Management	4.7	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00
27	Testing	4.8																				
28	Defect Management	4.9	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00
29	Program Support Rqmts	5																				
30	Program Support Services	5.1	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00
31	Consumer Experience Services	5.2	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00
32	ROP Batch Services	5.3	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00
33	BOT Services	5.4	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00
34	Small Change Notices Services	5.5	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00
35	Salesforce Application Maintenance Services	5.6	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00
36	IDP Services	5.7	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00
37	Application Maintenance Services	5.8	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00
38	Usability Research Services	5.9	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00
39	eHIT Services	5.10	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00
40	Fed Reg Analysis and Imp Services	5.11	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00
41	State Reg Analysis and Impl Services	5.12	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00
42	Date & Analytics Services	5.13	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00
43	Print Mail Center Support	5.14	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00

<Vendor Name>

D-5: SDMO Fixed Price Onshore Costs								
1	2	3	49	50	51	52	53	54
			Cost for Contract Year 10					
Line #	SDMO Activity (Onshore)	SOW Ref	Estimated Annual Hours Year 10	Onshore Blended Rate Year 10	Total Staffing Cost Year 10	Other Cost Year 10	Total Annual Cost Year 10	Total Onshore Activity Cost
1	Project Management Requirements	3						
2	Project Management	3.1	0.0	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
3	Schedule Management	3.2	0.0	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
4	Cost/Cost Estimating Management	3.3	0.0	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
5	Human Resource Management	3.4	0.0	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
6	Risk and Issue Management	3.5	0.0	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
7	Communication Management	3.6	0.0	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
8	Document Management	3.7	0.0	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
9	SOW Requirements Management	3.8	0.0	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
10	Problem Escalation	3.9	0.0	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
11	Quality Management	3.10	0.0	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
12	Contract Management	3.11	0.0	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
13	CalHEERS Proj Enterprise Tools	3.12	0.0	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
14	CalHEERS Project Processes	3.13	0.0	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
15	CalHEERS Project Training	3.14	0.0	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
16	Strategic Planning and Management	3.15	0.0	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
17	Policy & Legis Impact Analysis & Change Sup	3.16	0.0	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
18	Audit Evaluation and Findings Services	3.17	0.0	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
19	System Change & Enhancement Rqmts	4						
20	System/Software Development Lifecycle (SDLC)	4.1						
21	Change Management and Configuration Management (System)	4.2						
22	Change/Refresh/Upgrade	4.3						
23	Code Development	4.4						
24	System Requirements Management	4.5	0.0	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
25	Release Management	4.6	0.0	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
26	Organization & Business Change Management	4.7	0.0	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
27	Testing	4.8						
28	Defect Management	4.9	0.0	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
29	Program Support Rqmts	5						
30	Program Support Services	5.1	0.0	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
31	Consumer Experience Services	5.2	0.0	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
32	ROP Batch Services	5.3	0.0	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
33	BOT Services	5.4	0.0	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
34	Small Change Notices Services	5.5	0.0	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
35	Salesforce Application Maintenance Services	5.6	0.0	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
36	IDP Services	5.7	0.0	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
37	Application Maintenance Services	5.8	0.0	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
38	Usability Research Services	5.9	0.0	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
39	eHIT Services	5.10	0.0	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
40	Fed Reg Analysis and Imp Services	5.11	0.0	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
41	State Reg Analysis and Impl Services	5.12	0.0	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
42	Date & Analytics Services	5.13	0.0	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
43	Print Mail Center Support	5.14	0.0	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00

D-5: SDMO Fixed Price Onshore Costs																					
1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20	21	22
			Cost for Contract Year 1					Cost for Contract Year 2					Cost for Contract Year 3					Cost for Contract Year 4			
Line #	SDMO Activity (Onshore)	SOW Ref	Estimated Annual Hours Year 1	Onshore Blended Rate Year 1	Total Staffing Cost Year 1	Other Cost Year 1	Total Annual Cost Year 1	Estimated Annual Hours Year 2	Onshore Blended Rate Year 2	Total Staffing Cost Year 2	Other Cost Year 2	Total Annual Cost Year 2	Estimated Annual Hours Year 3	Onshore Blended Rate Year 3	Total Staffing Cost Year 3	Other Cost Year 3	Total Annual Cost Year 3	Estimated Annual Hours Year 4	Onshore Blended Rate Year 4	Total Staffing Cost Year 4	Other Cost Year 4
44	General Innovations	5.15	-	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00
45	Data Usage & Analytics Innovations	5.16	-	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00
46	Consumer Journey & Exp Innovations	5.17	-	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00
47	Artificial Intelligence Innovations	5.18	-	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00
48	Organizational Innovations	5.19	-	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00
49	Security Innovations	5.20	-	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00
50	Operations Requirements	6																			

D-5: SDMO Fixed Price Onshore Costs								
1	2	3	23	24	25	26	27	28
				Cost for Contract Year 5				
Line #	SDMO Activity (Onshore)	SOW Ref	Total Annual Cost Year 4	Estimated Annual Hours Year 5	Onshore Blended Rate Year 5	Total Staffing Cost Year 5	Other Cost Year 5	Total Annual Cost Year 5
44	General Innovations	5.15	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00
45	Data Usage & Analytics Innovations	5.16	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00
46	Consumer Journey & Exp Innovations	5.17	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00
47	Artificial Intelligence Innovations	5.18	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00
48	Organizational Innovations	5.19	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00
49	Security Innovations	5.20	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00
50	Operations Requirements	6						

D-5: SDMO Fixed Price Onshore Costs																						
1	2	3	29	30	31	32	33	34	35	36	37	38	39	40	41	42	43	44	45	46	47	48
			Cost for Contract Year 6					Cost for Contract Year 7					Cost for Contract Year 8					Cost for Contract Year 9				
Line #	SDMO Activity (Onshore)	SOW Ref	Estimated Annual Hours Year 6	Onshore Blended Rate Year 6	Total Staffing Cost Year 6	Other Cost Year 6	Total Annual Cost Year 6	Estimated Annual Hours Year 7	Onshore Blended Rate Year 7	Total Staffing Cost Year 7	Other Cost Year 7	Total Annual Cost Year 7	Estimated Annual Hours Year 8	Onshore Blended Rate Year 8	Total Staffing Cost Year 8	Other Cost Year 8	Total Annual Cost Year 8	Estimated Annual Hours Year 9	Onshore Blended Rate Year 9	Total Staffing Cost Year 9	Other Cost Year 9	Total Annual Cost Year 9
44	General Innovations	5.15	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00
45	Data Usage & Analytics Innovations	5.16	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00
46	Consumer Journey & Exp Innovations	5.17	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00
47	Artificial Intelligence Innovations	5.18	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00
48	Organizational Innovations	5.19	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00
49	Security Innovations	5.20	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00
50	Operations Requirements	6																				

D-5: SDMO Fixed Price Onshore Costs								
1	2	3	49	50	51	52	53	54
			Cost for Contract Year 10					
Line #	SDMO Activity (Onshore)	SOW Ref	Estimated Annual Hours Year 10	Onshore Blended Rate Year 10	Total Staffing Cost Year 10	Other Cost Year 10	Total Annual Cost Year 10	Total Onshore Activity Cost
44	General Innovations	5.15	0.0	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
45	Data Usage & Analytics Innovations	5.16	0.0	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
46	Consumer Journey & Exp Innovations	5.17	0.0	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
47	Artificial Intelligence Innovations	5.18	0.0	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
48	Organizational Innovations	5.19	0.0	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
49	Security Innovations	5.20	0.0	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
50	Operations Requirements	6						

D-5: SDMO Fixed Price Onshore Costs																					
1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20	21	22
			Cost for Contract Year 1					Cost for Contract Year 2					Cost for Contract Year 3					Cost for Contract Year 4			
Line #	SDMO Activity (Onshore)	SOW Ref	Estimated Annual Hours Year 1	Onshore Blended Rate Year 1	Total Staffing Cost Year 1	Other Cost Year 1	Total Annual Cost Year 1	Estimated Annual Hours Year 2	Onshore Blended Rate Year 2	Total Staffing Cost Year 2	Other Cost Year 2	Total Annual Cost Year 2	Estimated Annual Hours Year 3	Onshore Blended Rate Year 3	Total Staffing Cost Year 3	Other Cost Year 3	Total Annual Cost Year 3	Estimated Annual Hours Year 4	Onshore Blended Rate Year 4	Total Staffing Cost Year 4	Other Cost Year 4
51	Operations Planning and Management	6.1	-	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00
52	Operations Manual	6.2	-	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00
53	Operations Reporting, Data, and Analytics	6.3	-	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00
54	Operations Maintenance	6.4	-	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00
55	Interface Support	6.5	-	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00
56	Technology Refresh	6.6	-	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00
57	System Security	6.7	-	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00
58	Data Retention, Backup and Recovery	6.8	-	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00
59	Data Management	6.9	-	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00
60	Technology Recovery	6.10	-	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00
61	Business Continuity	6.11	-	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00
62	System Environments	6.12	-	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00
63	System Performance	6.13	-	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00
64	System Hardware/Cloud Services/Software	6.14	-	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00
65	Problem Management	6.15	-	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00
66	Help Desk Services	6.16	-	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00
67	Hosting Services	6.17	-	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00
68	Project Support Services	6.18			\$0.00	\$0.00	\$0.00			\$0.00	\$0.00	\$0.00			\$0.00	\$0.00	\$0.00			\$0.00	\$0.00
69	Service Center Services	6.19	-	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00
70	Website Management	6.20	-	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00
71	Total SDMO Fixed Price Onshore Cost		0		\$0.00	\$0.00	\$0.00	0		\$0.00	\$0.00	\$0.00	0		\$0.00	\$0.00	\$0.00	0		\$0.00	\$0.00
72	Cost Percentage of Prior Year																0%				

D-5: SDMO Fixed Price Onshore Costs								
1	2	3	23	24	25	26	27	28
				Cost for Contract Year 5				
Line #	SDMO Activity (Onshore)	SOW Ref	Total Annual Cost Year 4	Estimated Annual Hours Year 5	Onshore Blended Rate Year 5	Total Staffing Cost Year 5	Other Cost Year 5	Total Annual Cost Year 5
51	Operations Planning and Management	6.1	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00
52	Operations Manual	6.2	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00
53	Operations Reporting, Data, and Analytics	6.3	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00
54	Operations Maintenance	6.4	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00
55	Interface Support	6.5	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00
56	Technology Refresh	6.6	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00
57	System Security	6.7	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00
58	Data Retention, Backup and Recovery	6.8	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00
59	Data Management	6.9	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00
60	Technology Recovery	6.10	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00
61	Business Continuity	6.11	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00
62	System Environments	6.12	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00
63	System Performance	6.13	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00
64	System Hardware/Cloud Services/Software	6.14	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00
65	Problem Management	6.15	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00
66	Help Desk Services	6.16	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00
67	Hosting Services	6.17	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00
68	Project Support Services	6.18	\$0.00			\$0.00	\$0.00	\$0.00
69	Service Center Services	6.19	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00
70	Website Management	6.20	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00
71	Total SDMO Fixed Price Onshore Cost		\$0.00	0		\$0.00	\$0.00	\$0.00
72	Cost Percentage of Prior Year		0%					0%

D-5: SDMO Fixed Price Onshore Costs																						
1	2	3	29	30	31	32	33	34	35	36	37	38	39	40	41	42	43	44	45	46	47	48
			Cost for Contract Year 6					Cost for Contract Year 7					Cost for Contract Year 8					Cost for Contract Year 9				
Line #	SDMO Activity (Onshore)	SOW Ref	Estimated Annual Hours Year 6	Onshore Blended Rate Year 6	Total Staffing Cost Year 6	Other Cost Year 6	Total Annual Cost Year 6	Estimated Annual Hours Year 7	Onshore Blended Rate Year 7	Total Staffing Cost Year 7	Other Cost Year 7	Total Annual Cost Year 7	Estimated Annual Hours Year 8	Onshore Blended Rate Year 8	Total Staffing Cost Year 8	Other Cost Year 8	Total Annual Cost Year 8	Estimated Annual Hours Year 9	Onshore Blended Rate Year 9	Total Staffing Cost Year 9	Other Cost Year 9	Total Annual Cost Year 9
51	Operations Planning and Management	6.1	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00
52	Operations Manual	6.2	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00
53	Operations Reporting, Data, and Analytics	6.3	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00
54	Operations Maintenance	6.4	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00
55	Interface Support	6.5	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00
56	Technology Refresh	6.6	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00
57	System Security	6.7	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00
58	Data Retention, Backup and Recovery	6.8	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00
59	Data Management	6.9	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00
60	Technology Recovery	6.10	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00
61	Business Continuity	6.11	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00
62	System Environments	6.12	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00
63	System Performance	6.13	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00
64	System Hardware/Cloud Services/Software	6.14	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00
65	Problem Management	6.15	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00
66	Help Desk Services	6.16	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00
67	Hosting Services	6.17	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00
68	Project Support Services	6.18			\$0.00	\$0.00	\$0.00			\$0.00	\$0.00	\$0.00			\$0.00	\$0.00	\$0.00			\$0.00	\$0.00	\$0.00
69	Service Center Services	6.19	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00
70	Website Management	6.20	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00
71	Total SDMO Fixed Price Onshore Cost		0		\$0.00	\$0.00	\$0.00	0		\$0.00	\$0.00	\$0.00	0		\$0.00	\$0.00	\$0.00	0		\$0.00	\$0.00	\$0.00
72	Cost Percentage of Prior Year						0%					0%					0%					0%

D-5: SDMO Fixed Price Onshore Costs								
1	2	3	49	50	51	52	53	54
			Cost for Contract Year 10					
Line #	SDMO Activity (Onshore)	SOW Ref	Estimated Annual Hours Year 10	Onshore Blended Rate Year 10	Total Staffing Cost Year 10	Other Cost Year 10	Total Annual Cost Year 10	Total Onshore Activity Cost
51	Operations Planning and Management	6.1	0.0	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
52	Operations Manual	6.2	0.0	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
53	Operations Reporting, Data, and Analytics	6.3	0.0	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
54	Operations Maintenance	6.4	0.0	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
55	Interface Support	6.5	0.0	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
56	Technology Refresh	6.6	0.0	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
57	System Security	6.7	0.0	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
58	Data Retention, Backup and Recovery	6.8	0.0	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
59	Data Management	6.9	0.0	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
60	Technology Recovery	6.10	0.0	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
61	Business Continuity	6.11	0.0	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
62	System Environments	6.12	0.0	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
63	System Performance	6.13	0.0	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
64	System Hardware/Cloud Services/Software	6.14	0.0	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
65	Problem Management	6.15	0.0	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
66	Help Desk Services	6.16	0.0	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
67	Hosting Services	6.17	0.0	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
68	Project Support Services	6.18			\$0.00	\$0.00	\$0.00	\$0.00
69	Service Center Services	6.19	0.0	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
70	Website Management	6.20	0.0	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
71	Total SDMO Fixed Price Onshore Cost		0		\$0.00	\$0.00	\$0.00	\$0.00
72	Cost Percentage of Prior Year						0%	

<Vendor Name>

APPENDIX D-5.1, INSTRUCTIONS - SDMO FIXED PRICE ONSHORE COSTS (YEAR 1)

Appendix D-5.1, SDMO FIXED PRICE ONSHORE (YEAR 1), is used to identify the bidder's onshore costs for providing the services required to maintain and operate the CalHEERS within Year 1.	
All Key Staff (and applicable support staff), except for the Transition Manager, and all Deliverables (except those identified by the State as Transition-In or Transition-Out Milestones) are to be costed under the D-5, Fixed Price Onshore/Offshore series of worksheets. The Transition Manager (and applicable Non-Key Staff) and the Transition-In and Transition-Out Milestone related Deliverables are to be costed under Appendix D-8, Transition-In Costs, and Appendix D-8.3, Transition-Out Payment.	
All Deliverables, Artifacts, or Standard Operating Procedures, including any off cycle updates, are to be costed under SDMO Fixed Price Onshore or Offshore Costs, except for Deliverables developed in association with individual Releases and Change Requests or identified within the Transition-In and Transition-Out Milestones.	
Column 1, Line # = No entry needed.	
Column 2, SDMO Activity (Onshore) = No entry needed. The State has provided the name of the SDMO activity from the Appendix A-4, Statement of Work.	
Column 3, SOW Reference = No entry needed. The State has provided the section reference associated with the Appendix A-4, Statement of Work.	
Column 4, Line #2, Bidder Onshore Blended Rate Year 1 = The bidder must enter a blended rate for SDMO Fixed Price Onshore Costs (Year 1). The blended rate will be auto-populated for each SDMO activity and will be multiplied by the bidder identified Estimated Hours Month X to determine the monthly and annual staffing cost for each activity within (Year 1).	
Column 5, 8, 11, 14, 17, 20, 23,10 26, 29, 32, 35, 38, Estimated Hours Month X = Bidders are to enter the estimated onshore effort (in total hours) related to each SDMO Activity in each month of Year 1. Please note the following:	
1) The bidder takes full responsibility for all aspects of the SDMO Activity within the first month where the bidder identifies effort in D-5.1.	
2) The effort entered within D-5.1 must align with the bidder's plan for Transition-In.	
3) The bidder is expected to meet all the Contract requirements within the hours identified. Any additional hours needed to perform these activities must be provided to the State at no cost.	
4) The total effort/cost within Year 1, cannot be greater than the highest yearly effort/cost within Years 2-10.	
Columns 7, 10, 13, 16, 19, 22, 25, 28, 31, 34, 37, 40, Total Cost Month X = No entry needed. The State has provided a formula to multiply the Bidder Onshore Blended Rate Year 1 by the bidder estimated hours for each Year 1 month, then adds any bidder identified costs in the Other Costs Month X column, resulting in the total cost for each month within Year 1.	
Column 41, Total Onshore Cost Year 1 = No entry needed, The State has provided formulas to collect the monthly cost totals by activity.	
Line 14, CalHEERS Project Processes = The bidder must enter their associated costs in this line.	
Line 15, CalHEERS Project Training = The bidder must enter their associated costs in this line.	
Lines 21-24, 27 and 28 = No entry required. These costs are solicited via other worksheets of the Appendix D, Cost Workbook.	
Line 68, Project Support Services = No entry needed. The State has provided formulas that will pull the data from D-5.3.	
Line 71 - No entry needed. The State has provided SUM formulas to provide both monthly effort and cost subtotals, as well as, the Total SDMO Fixed Price Onshore Cost Year 1.	

<Vendor Name>

D-5.1: SDMO Fixed Price Onshore Costs (Year 1)																							
1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20	21	22	23	24
				Year 1 / Month 1			Year 1 / Month 2			Year 1 / Month 3			Year 1 / Month 4			Year 1 / Month 5			Year 1 / Month 6			Year 1 / Mo	
Line #	SDMO Activity (Onshore)	SOW Ref	Bidder Onshore Blended Rate Year 1	Estimated Hours Month 1	Other Cost Month 1	Total Cost Month 1	Estimated Hours Month 2	Other Cost Month 2	Total Cost Month 2	Estimated Hours Month 3	Other Cost Month 3	Total Cost Month 3	Estimated Hours Month 4	Other Cost Month 4	Total Cost Month 4	Estimated Hours Month 5	Other Cost Month 5	Total Cost Month 5	Estimated Hours Month 6	Other Cost Month 6	Total Cost Month 6	Estimated Hours Month 7	Other Cost Month 7
1	Project Management Requirements	3																					
2	Project Management	3.1	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00
3	Schedule Management	3.2	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00
4	Cost/Cost Estimating Management	3.3	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00
5	Human Resource Management	3.4	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00
6	Risk and Issue Management	3.5	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00
7	Communication Management	3.6	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00
8	Document Management	3.7	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00
9	SOW Requirements Management	3.8	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00
10	Problem Escalation	3.9	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00
11	Quality Management	3.10	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00
12	Contract Management	3.11	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00
13	CalHEERS Proj Enterprise Tools	3.12	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00
14	CalHEERS Project Processes	3.13	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00
15	CalHEERS Project Training	3.14	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00
16	Strategic Planning and Management	3.15	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00
17	Policy & Legis Impact Analysis & Change Sup	3.16	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00
18	Audit Evaluation and Findings Services	3.17	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00
19	System Change & Enhancement Rqmts	4																					
20	System/Software Development Lifecycle (SDLC)	4.1	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00
21	Change Management and Configuration Management (System)	4.2	This SOW activity is covered as part of Tab D-7 System Changes Costs																				
22	Change/Refresh/Upgrade	4.3	This SOW activity is covered as part of Tab D-7 System Changes Costs																				
23	Code Development	4.4	This SOW activity is covered as part of Tab D-7 System Changes Costs																				
24	System Requirements Management	4.5	This SOW activity is covered as part of Tab D-7 System Changes Costs																				
25	Release Management	4.6	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00
26	Organization & Business Change Management	4.7	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00
27	Testing	4.8	This SOW activity is covered as part of Tab D-7 System Changes Costs																				
28	Defect Management	4.9	This SOW activity is covered as part of Tab D-7 System Changes Costs																				
29	Program Support Rqmts	5																					
30	Program Support Services	5.1	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00
31	Consumer Experience Services	5.2	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00
32	ROP Batch Services	5.3	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00
33	BOT Services	5.4	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00
34	Small Change Notices Services	5.5	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00
35	Salesforce Application Maintenance Services	5.6	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00
36	IDP Services	5.7	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00
37	Application Maintenance Services	5.8	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00
38	Usability Research Services	5.9	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00
39	eHIT Services	5.10	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00
40	Fed Reg Analysis and Imp Services	5.11	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00
41	State Reg Analysis and Impl Services	5.12	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00
42	Date & Analytics Services	5.13	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00
43	Print Mail Center Support	5.14	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00
44	General Innovations	5.15	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00
45	Data Usage & Analytics Innovations	5.16	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00
46	Consumer Journey & Exp Innovations	5.17	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00
47	Artificial Intelligence Innovations	5.18	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00
48	Organizational Innovations	5.19	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00
49	Security Innovations	5.20	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00
50	Operations Requirements	6																					
51	Operations Planning and Management	6.1	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00
52	Operations Manual	6.2	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00
53	Operations Reporting, Data, and Analytics	6.3	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00
54	Operations Maintenance	6.4	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00
55	Interface Support	6.5	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00
56	Technology Refresh	6.6	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00
57	System Security	6.7	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00
58	Data Retention, Backup and Recovery	6.8	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00

<Vendor Name>

D-5.1: SDMO Fixed Price Onshore Costs (Year 1)																			
1	2	3	25	26	27	28	29	30	31	32	33	34	35	36	37	38	39	40	41
			nth 7	Year 1 / Month 8			Year 1 / Month 9			Year 1 / Month 10			Year 1 / Month 11			Year 1 / Month 12			
Line #	SDMO Activity (Onshore)	SOW Ref	Total Cost Month 7	Estimated Hours Month 8	Other Cost Month 8	Total Cost Month 8	Estimated Hours Month 9	Other Cost Month 9	Total Cost Month 9	Estimated Hours Month 10	Other Cost Month 10	Total Cost Month 10	Estimated Hours Month 11	Other Cost Month 11	Total Cost Month 11	Estimated Hours Month 12	Other Cost Month 12	Total Cost Month 12	Total Onshore Cost Year 1
1	Project Management Requirements	3																	
2	Project Management	3.1	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	\$0.00
3	Schedule Management	3.2	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	\$0.00
4	Cost/Cost Estimating Management	3.3	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	\$0.00
5	Human Resource Management	3.4	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	\$0.00
6	Risk and Issue Management	3.5	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	\$0.00
7	Communication Management	3.6	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	\$0.00
8	Document Management	3.7	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	\$0.00
9	SOW Requirements Management	3.8	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	\$0.00
10	Problem Escalation	3.9	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	\$0.00
11	Quality Management	3.10	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	\$0.00
12	Contract Management	3.11	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	\$0.00
13	CalHEERS Proj Enterprise Tools	3.12	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	\$0.00
14	CalHEERS Project Processes	3.13	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	\$0.00
15	CalHEERS Project Training	3.14	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	\$0.00
16	Strategic Planning and Management	3.15	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	\$0.00
17	Policy & Legis Impact Analysis & Change Sup	3.16	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	\$0.00
18	Audit Evaluation and Findings Services	3.17	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	\$0.00
19	System Change & Enhancement Rqmts	4																	
20	System/Software Development Lifecycle (SDLC)	4.1	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	\$0.00
21	Change Management and Configuration Management (System)	4.2																	
22	Change/Refresh/Upgrade	4.3																	
23	Code Development	4.4																	
24	System Requirements Management	4.5																	
25	Release Management	4.6	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	\$0.00
26	Organization & Business Change Management	4.7	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	\$0.00
27	Testing	4.8																	
28	Defect Management	4.9																	
29	Program Support Rqmts	5																	
30	Program Support Services	5.1	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	\$0.00
31	Consumer Experience Services	5.2	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	\$0.00
32	ROP Batch Services	5.3	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	\$0.00
33	BOT Services	5.4	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	\$0.00
34	Small Change Notices Services	5.5	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	\$0.00
35	Salesforce Application Maintenance Services	5.6	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	\$0.00
36	IDP Services	5.7	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	\$0.00
37	Application Maintenance Services	5.8	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	\$0.00
38	Usability Research Services	5.9	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	\$0.00
39	eHIT Services	5.10	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	\$0.00
40	Fed Reg Analysis and Imp Services	5.11	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	\$0.00
41	State Reg Analysis and Impl Services	5.12	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	\$0.00
42	Date & Analytics Services	5.13	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	\$0.00
43	Print Mail Center Support	5.14	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	\$0.00
44	General Innovations	5.15	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	\$0.00
45	Data Usage & Analytics Innovations	5.16	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	\$0.00
46	Consumer Journey & Exp Innovations	5.17	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	\$0.00
47	Artificial Intelligence Innovations	5.18	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	\$0.00
48	Organizational Innovations	5.19	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	\$0.00
49	Security Innovations	5.20	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	\$0.00
50	Operations Requirements	6																	
51	Operations Planning and Management	6.1	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	\$0.00
52	Operations Manual	6.2	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	\$0.00
53	Operations Reporting, Data, and Analytics	6.3	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	\$0.00
54	Operations Maintenance	6.4	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	\$0.00
55	Interface Support	6.5	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	\$0.00
56	Technology Refresh	6.6	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	\$0.00
57	System Security	6.7	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	\$0.00
58	Data Retention, Backup and Recovery	6.8	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	\$0.00

D-5.1: SDMO Fixed Price Onshore Costs (Year 1)																							
1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20	21	22	23	24
				Year 1 / Month 1			Year 1 / Month 2			Year 1 / Month 3			Year 1 / Month 4			Year 1 / Month 5			Year 1 / Month 6			Year 1 / Month 7	
Line #	SDMO Activity (Onshore)	SOW Ref	Bidder Onshore Blended Rate Year 1	Estimated Hours Month 1	Other Cost Month 1	Total Cost Month 1	Estimated Hours Month 2	Other Cost Month 2	Total Cost Month 2	Estimated Hours Month 3	Other Cost Month 3	Total Cost Month 3	Estimated Hours Month 4	Other Cost Month 4	Total Cost Month 4	Estimated Hours Month 5	Other Cost Month 5	Total Cost Month 5	Estimated Hours Month 6	Other Cost Month 6	Total Cost Month 6	Estimated Hours Month 7	Other Cost Month 7
59	Data Management	6.9	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00
60	Technology Recovery	6.10	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00
61	Business Continuity	6.11	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00
62	System Environments	6.12	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00
63	System Performance	6.13	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00
64	System Hardware/Cloud Services/Software	6.14	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00
65	Problem Management	6.15	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00
66	Help Desk Services	6.16	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00
67	Hosting Services	6.17	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00
68	Project Support Services	6.18				\$0.00			\$0.00			\$0.00			\$0.00			\$0.00			\$0.00		
69	Service Center Services	6.19	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00
70	Website Management	6.20	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00
71	Total SDMO Fixed Price Onshore (Year 1) Cost			0	\$0.00	\$0.00	0.0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00

D-5.1: SDMO Fixed Price Onshore Costs (Year 1)																			
1	2	3	25	26	27	28	29	30	31	32	33	34	35	36	37	38	39	40	41
			nth 7	Year 1 / Month 8			Year 1 / Month 9			Year 1 / Month 10			Year 1 / Month 11			Year 1 / Month 12			
Line #	SDMO Activity (Onshore)	SOW Ref	Total Cost Month 7	Estimated Hours Month 8	Other Cost Month 8	Total Cost Month 8	Estimated Hours Month 9	Other Cost Month 9	Total Cost Month 9	Estimated Hours Month 10	Other Cost Month 10	Total Cost Month 10	Estimated Hours Month 11	Other Cost Month 11	Total Cost Month 11	Estimated Hours Month 12	Other Cost Month 12	Total Cost Month 12	Total Onshore Cost Year 1
59	Data Management	6.9	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	\$0.00
60	Technology Recovery	6.10	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	\$0.00
61	Business Continuity	6.11	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	\$0.00
62	System Environments	6.12	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	\$0.00
63	System Performance	6.13	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	\$0.00
64	System Hardware/Cloud Services/Software	6.14	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	\$0.00
65	Problem Management	6.15	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	\$0.00
66	Help Desk Services	6.16	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	\$0.00
67	Hosting Services	6.17	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	\$0.00
68	Project Support Services	6.18	\$0.00			\$0.00			\$0.00			\$0.00			\$0.00			\$0.00	\$0.00
69	Service Center Services	6.19	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	\$0.00
70	Website Management	6.20	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	\$0.00
71	Total SDMO Fixed Price Onshore (Year 1) Cost		\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	\$0.00

<Vendor Name>

D-5.2 Project Support Services - Detailed Cost Breakdown Instructions

The Purpose of the Project Support Services Tabs (D-5.2 & D-5.3) is to provide the State with a detailed cost breakdown of the bidder’s Onshore Project Support Services costs for CalHEERS.

Tab "(D-5.2) SDMO F.P. Onshore-PSS" Cost Breakdown Instructions:

This tab correlates with **Appendix D-5.2 SDMO Fixed Price Onshore 1ab**

Column 2, SOW Subsection = Identifies the subsections within SOW Section 6.18

Column 3, SOW Section 6.18 - Project Support Services (Onshore) = Provides a breakout of certain Project Support Services activities for which the State requires additional cost details.

Column 4, Estimated Annual Hours Year 1 = No entry needed. The State has provided formulas to transfer the bidder identified effort from tab (D-4.1) SDMO F.P. Ons(Yr 1)-PSS into this sheet.

Columns 9, 14, 19, 24, 29, 34, 39, 44, 49 Estimated Annual Hours Year X = The bidder is required to provide the estimated annual hours for the Project Support Services activities from the SOW Section 6.19. The bidder is expected to meet all the Contract requirements within these hours.

Columns 5, Onshore PSS Rates Year 1 = No entry needed. The State has provided formulas to transfer this data from tab (D-4.1) SDMO F.P. Ons(Yr 1) into tab (D-4) SDMO F.P. Onshore-PSS.

Columns 10, 15, 20, 25, 30, 35, 40, 45, 50 Onshore PSS Rates Year X = Bidders are required to provide a yearly Offshore Hourly Rate for each Offshore Project Support Services activity.

Columns 6, 11, 16, 21, 26, 31, 36, 41, 46, 51 Total Staffing Cost Year X = No entry needed. The Total Annual Cost will be calculated for each activity by multiplying the Estimated Annual Hours by the bidder identified Blended Rate.

Column 7, Other Costs Year 1 = No entry needed. The State has provided a formula to transfer the bidder identified other costs from the (D-4.1) SDMO F.P. Ons(Yr 1)-PSS tab.

Column 12, 17, 22, 27, 32, 37, 42, 47, 52 Other Costs Year X = The bidder is required to provide the Other Costs for contract years 2-10. Onshore costs included in these columns are specific to other non-staffing components of cost associated with the activity, including subcontracts, bid as part of the SDMO Fixed Price. Any costs identified as Other require bidders to provide supplemental cost details to include a basis of estimation, the number of units, and per unit rate. Note that all Hardware and all Software used by the Prime Vendor should not be included in this worksheet, but in Appendix D-2, SDMO Hardware Costs or Appendix D-3, SDMO Software costs.

Columns 8, 13, 18, 23, 28, 33, 38, 43, 48, 53 Total Annual Cost Year X = No entry needed. The Total Annual Cost will be calculated for each activity, by year, by adding the Total Staffing Cost and Other Cost.

Column 54, Total PSS Onshore Activity Cost = No entry needed. The Total Project Support Services activity Cost is the sum of Total Annual Costs for the PSS activity for Years 1 through 10.

Total Project Support Services (Onshore) Cost - No entry required. The State has provided a formula to SUM all Total Onshore PSS Activity Costs.

The State has provided formulas to transfer the Total Staffing Cost, Other Cost, and Total Annual Cost data (by Year) from tab (D-5.2) SDMO F.P. Onshore-PSS, into the line #68 of the associated year within tab (D-5) SDMO Fixed Price Onshore.

Tab "(D-5.3) SDMO F.P. Ons(Yr 1)-PSS" Cost Breakdown Instructions:

This tab correlates with tab **Appendix D-5.1 SDMO F.P. Onshore(Yr 1)**

All Key Staff (and applicable support staff), except for the Transition Manager, and all Deliverables (except those identified by the State as Transition-In or Transition-Out Milestones) are to be costed under the D-5, Fixed Price Onshore/Offshore series of worksheets. The Transition Manager (and applicable Non-Key Staff) and the Transition-In and Transition-Out Milestone related Deliverables are to be costed under Appendix D-8.1, Transition-In Costs, and Appendix D-8.3, Transition-Out Costs.

Column 2, SOW Subsection = Identifies the subsections within SOW Section 6.19 (provided to the bidder).

Column 3, SOW Section 6.18- Project Support Services (Onshore - Year 1) = Provides a breakout of certain Project Support Services activities the State requires additional cost details for.

Column 4, Bidder Onshore PSS Rates (Year 1) [highlighted Blue] = Bidders are required to provide an onshore hourly rate for each Project Support Services activity. The rate provided for each activity will be multiplied by the bidder identified Estimated Hours Month X, from the associated activity, to determine the monthly and annual staffing cost for each Project Support Services activities within (Year 1).

Column 5, 8, 11, 14, 17, 20, 23, 26, 29, 32, 35, 38, Estimated Hours Month X = Bidders are to enter the estimated onshore effort (in total hours) related to each Project Support Services activity in each month of Year 1. Please note the following:

- 1) The bidder takes full responsibility for all aspects of the Project Support Services activity within the first month where the bidder identifies effort in (D-5.1).
- 2) The effort entered within (D-5.3) must align with the bidder's plan for Transition-In.
- 3) The bidder is expected to meet all the Contract requirements within the hours identified. Any additional hours needed to perform these activities must be provided to the State at no cost.

Column 6, 9, 12, 15, 18, 21, 24, 27, 30, 33, 36, 39, Other Costs Year 1/Month X = The bidder is required to provide the Other Costs for Year 1/Month X. Onshore costs included in these columns are specific to other non-staffing components of cost associated with the activity, including subcontracts, bid as part of the SDMO Fixed Price. Any costs identified as Other require bidders to provide supplemental cost details to include a basis of estimation, the number of units, and per unit rate. Note that all Hardware and all Software used by the Prime Vendor should not be included in this worksheet, but in Appendix D-2, SDMO Hardware Costs or Appendix D-3, SDMO Software Costs.

Columns 7, 10, 13, 16, 19, 22, 25, 28, 31, 34, 37, 40, Total Cost Month X = No entry needed. The State has provided a formula to multiply the Bidder Onshore PSS Rates Year 1 by the bidder estimated hours for each Project Support Service activity, for Year 1/Month X, then adds any bidder identified costs in the Other Costs Month X column, resulting in the total cost for each Project Support Service activity within Year 1/Month X.

Column 41, Total Onshore Cost Year 1 = No entry needed, The State has provided formulas to collect the monthly cost totals by Project Support Service activity.

Line 43, Total Project Support Services (Onshore - Year 1) Cost - No entry needed. The State has provided SUM formulas to provide both monthly effort and cost subtotals.

The State has provided formulas to transfer the Total Cost data (by Month) from tab (D-5.3) SDMO F.P. Ons-PSS(Yr 1), into line #68 of the associated month within tab (D-5.1) SDMO F.P. Onshore(Yr 1).

<Vendor Name>

Project Support Services - D-5.4 SDMO F.P. Onshore-PSS Costs																						
1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20	21	22	23
			Cost for Contract Year 1					Cost for Contract Year 2					Cost for Contract Year 3					Cost for Contract Year 4				
Line #	SOW Subsection	SOW Section 6.18 - Project Support Services (Onshore)	Estimated Annual Hours Year 1	Onshore PSS Rates Year 1	Total Staffing Cost Year 1	Other Cost Year 1	Total Annual Cost Year 1	Estimated Annual Hours Year 2	Onshore PSS Rates Year 2	Total Staffing Cost Year 2	Other Cost Year 2	Total Annual Cost Year 2	Estimated Annual Hours Year 3	Onshore PSS Rates Year 3	Total Staffing Cost Year 3	Other Cost Year 3	Total Annual Cost Year 3	Estimated Annual Hours Year 4	Onshore PSS Rates Year 4	Total Staffing Cost Year 4	Other Cost Year 4	Total Annual Cost Year 4
1	6.18.1	Project Worksite Maintenance Plan																				
2		Project Worksite Maintenance Plan Cost	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00
3	6.18.2	Project Worksite Maintenance Execution																				
4		Primary Project Worksite - Rent Cost	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00
5		Gateway Oaks Campus (Primary Project Worksite) - Utilities Costs	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00
6		Primary Project Worksite - Leasehold Improvements Costs	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00
7		Primary Project Worksite - Insurance Costs	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00
8		Primary Project Worksite - Janitorial Services Costs	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00
9		Primary Project Worksite - Lighting Maintenance Costs	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00
10		Primary Project Worksite - Window Cleaning Costs	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00
11		Primary Project Worksite - Fire Extinguisher Checks Costs	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00
12		Primary Project Worksite - Telephone System (including Communication Lines and Service Providers) Costs	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00
13		Primary Project Worksite - LAN/WAN & Connectivity Costs	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00
14		Primary Project Worksite - Secured Wireless and Remote Access Costs	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00
15		Primary Project Worksite - Office Equipment Installation and Maintenance Costs	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00
16		Primary Project Worksite - HVAC Services and Maintenance Costs	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00
17		Primary Project Worksite - Plumbing Maintenance Costs	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00
18		Primary Project Worksite - Security Cameras and Patrol Services Costs	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00
19		Primary Project Worksite - All Other Project Worksite Requirements Costs	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00
20	6.18.3	Office Setup & Maintenance Execution																				
21		Primary Project Worksite - Furniture Install & Maintenance Costs	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00
22		Primary Project Worksite - Purchase/lease/rental, Installation & maintenance Costs, including: a. Printers b. Scanners c. Fax Machines d. High speed network scanning/printing machines	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00
23		Primary Project Worksite - Laptops w/ Current software Costs	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00
24		Primary Project Worksite - All Other Office Setup & Maintenance Costs	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00
25	6.18.4	Business Maintenance & Support Execution																				
26		Primary Project Worksite - Security Patrol Services Costs	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00
27		Primary Project Worksite - Security System & Cameras Costs	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00
28		Primary Project Worksite - Confidential Destruction Services Costs	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00
29		Primary Project Worksite - Cleaning Maintenance Services Costs	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00
30		Primary Project Worksite - Garbage and Recycling Services Costs	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00
31		Primary Project Worksite - Mail Delivery Services Costs	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00
32		Primary Project Worksite - All Other Building Maintenance & Support Costs	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00

<Vendor Name>

Project Support Services - D-5.4 SDMO F.P. Onshore-PSS Costs																						
1	2	3	24	25	26	27	28	29	30	31	32	33	34	35	36	37	38	39	40	41	42	43
			Cost for Contract Year 5					Cost for Contract Year 6					Cost for Contract Year 7					Cost for Contract Year 8				
Line #	SOW Subsection	SOW Section 6.18 - Project Support Services (Onshore)	Estimated Annual Hours Year 5	Onshore PSS Rates Year 5	Total Staffing Cost Year 5	Other Cost Year 5	Total Annual Cost Year 5	Estimated Annual Hours Year 6	Onshore PSS Rates Year 6	Total Staffing Cost Year 6	Other Cost Year 6	Total Annual Cost Year 6	Estimated Annual Hours Year 7	Onshore PSS Rates Year 7	Total Staffing Cost Year 7	Other Cost Year 7	Total Annual Cost Year 7	Estimated Annual Hours Year 8	Onshore PSS Rates Year 8	Total Staffing Cost Year 8	Other Cost Year 8	Total Annual Cost Year 8
1	6.18.1	Project Worksite Maintenance Plan																				
2		Project Worksite Maintenance Plan Cost	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00
3	6.18.2	Project Worksite Maintenance Execution																				
4		Primary Project Worksite - Rent Cost	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00
5		Gateway Oaks Campus (Primary Project Worksite) - Utilities Costs	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00
6		Primary Project Worksite - Leasehold Improvements Costs	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00
7		Primary Project Worksite - Insurance Costs	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00
8		Primary Project Worksite - Janitorial Services Costs	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00
9		Primary Project Worksite - Lighting Maintenance Costs	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00
10		Primary Project Worksite - Window Cleaning Costs	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00
11		Primary Project Worksite - Fire Extinguisher Checks Costs	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00
12		Primary Project Worksite - Telephone System (including Communication Lines and Service Providers) Costs	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00
13		Primary Project Worksite - LAN/WAN & Connectivity Costs	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00
14		Primary Project Worksite - Secured Wireless and Remote Access Costs	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00
15		Primary Project Worksite - Office Equipment Installation and Maintenance Costs	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00
16		Primary Project Worksite - HVAC Services and Maintenance Costs	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00
17		Primary Project Worksite - Plumbing Maintenance Costs	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00
18		Primary Project Worksite - Security Cameras and Patrol Services Costs	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00
19		Primary Project Worksite - All Other Project Worksite Requirements Costs	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00
20	6.18.3	Office Setup & Maintenance Execution																				
21		Primary Project Worksite - Furniture Install & Maintenance Costs	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00
22		Primary Project Worksite - Purchase/lease/rental, Installation & maintenance Costs, including: a. Printers b. Scanners c. Fax Machines d. High speed network scanning/printing machines	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00
23		Primary Project Worksite - Laptops w/ Current software Costs	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00
24		Primary Project Worksite - All Other Office Setup & Maintenance Costs	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00
25	6.18.4	Business Maintenance & Support Execution																				
26		Primary Project Worksite - Security Patrol Services Costs	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00
27		Primary Project Worksite - Security System & Cameras Costs	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00
28		Primary Project Worksite - Confidential Destruction Services Costs	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00
29		Primary Project Worksite - Cleaning Maintenance Services Costs	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00
30		Primary Project Worksite - Garbage and Recycling Services Costs	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00
31		Primary Project Worksite - Mail Delivery Services Costs	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00
32		Primary Project Worksite - All Other Building Maintenance & Support Costs	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00

<Vendor Name>

Project Support Services - D-5.4 SDMO F.P. Onshore-PSS Costs													
1	2	3	44	45	46	47	48	49	50	51	52	53	54
			Cost for Contract Year 9					Cost for Contract Year 10					
Line #	SOW Subsection	SOW Section 6.18 - Project Support Services (Onshore)	Estimated Annual Hours Year 9	Onshore PSS Rates Year 9	Total Staffing Cost Year 9	Other Cost Year 9	Total Annual Cost Year 9	Estimated Annual Hours Year 10	Onshore PSS Rates Year 10	Total Staffing Cost Year 10	Other Cost Year 10	Total Annual Cost Year 10	Total PSS Onshore Activity Cost
1	6.18.1	Project Worksite Maintenance Plan											
2		Project Worksite Maintenance Plan Cost	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
3	6.18.2	Project Worksite Maintenance Execution											
4		Primary Project Worksite - Rent Cost	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
5		Gateway Oaks Campus (Primary Project Worksite) - Utilities Costs	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
6		Primary Project Worksite - Leasehold Improvements Costs	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
7		Primary Project Worksite - Insurance Costs	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
8		Primary Project Worksite - Janitorial Services Costs	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
9		Primary Project Worksite - Lighting Maintenance Costs	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
10		Primary Project Worksite - Window Cleaning Costs	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
11		Primary Project Worksite - Fire Extinguisher Checks Costs	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
12		Primary Project Worksite - Telephone System (including Communication Lines and Service Providers) Costs	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
13		Primary Project Worksite - LAN/WAN & Connectivity Costs	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
14		Primary Project Worksite - Secured Wireless and Remote Access Costs	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
15		Primary Project Worksite - Office Equipment Installation and Maintenance Costs	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
16		Primary Project Worksite - HVAC Services and Maintenance Costs	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
17		Primary Project Worksite - Plumbing Maintenance Costs	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
18		Primary Project Worksite - Security Cameras and Patrol Services Costs	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
19		Primary Project Worksite - All Other Project Worksite Requirements Costs	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
20	6.18.3	Office Setup & Maintenance Execution											
21		Primary Project Worksite - Furniture Install & Maintenance Costs	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
22		Primary Project Worksite - Purchase/lease/rental, Installation & maintenance Costs, including: a. Printers b. Scanners c. Fax Machines d. High speed network scanning/printing machines	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
23		Primary Project Worksite - Laptops w/ Current software Costs	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
24		Primary Project Worksite - All Other Office Setup & Maintenance Costs	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
25	6.18.4	Business Maintenance & Support Execution											
26		Primary Project Worksite - Security Patrol Services Costs	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
27		Primary Project Worksite - Security System & Cameras Costs	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
28		Primary Project Worksite - Confidential Destruction Services Costs	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
29		Primary Project Worksite - Cleaning Maintenance Services Costs	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
30		Primary Project Worksite - Garbage and Recycling Services Costs	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
31		Primary Project Worksite - Mail Delivery Services Costs	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
32		Primary Project Worksite - All Other Building Maintenance & Support Costs	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00

Project Support Services - D-5.4 SDMO F.P. Onshore-PSS Costs																						
1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20	21	22	23
			Cost for Contract Year 1					Cost for Contract Year 2					Cost for Contract Year 3					Cost for Contract Year 4				
Line #	SOW Subsection	SOW Section 6.18 - Project Support Services (Onshore)	Estimated Annual Hours Year 1	Onshore PSS Rates Year 1	Total Staffing Cost Year 1	Other Cost Year 1	Total Annual Cost Year 1	Estimated Annual Hours Year 2	Onshore PSS Rates Year 2	Total Staffing Cost Year 2	Other Cost Year 2	Total Annual Cost Year 2	Estimated Annual Hours Year 3	Onshore PSS Rates Year 3	Total Staffing Cost Year 3	Other Cost Year 3	Total Annual Cost Year 3	Estimated Annual Hours Year 4	Onshore PSS Rates Year 4	Total Staffing Cost Year 4	Other Cost Year 4	Total Annual Cost Year 4
33	6.18.5	CalHEERS Business Support Services																				
34		Primary Project Worksite - Security Badges & Badge Management Services Costs	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00
35		Primary Project Worksite - Daily Support Tasks Costs	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00
36		Primary Project Worksite - Daily Cleaning/Maintenance Services Costs	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00
37		Primary Project Worksite - Office Supply Services Costs	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00
38		Primary Project Worksite - Asset Management & Inventory Services Costs	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00
39		Primary Project Worksite - Emergency Evacuation Planning Participation Costs	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00
40		Primary Project Worksite - All Other CalHEERS Business Support Services Costs	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00
41	6.18.6	Facility Asset Inventory Reports																				
42		Facility Asset Inventory Reports	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00
43		Total Project Support Services (Onshore) Cost	0.0		\$0.00	\$0.00	\$0.00	0.0		\$0.00	\$0.00	\$0.00	0.0		\$0.00	\$0.00	\$0.00	0.0		\$0.00	\$0.00	\$0.00

Project Support Services - D-5.4 SDMO F.P. Onshore-PSS Costs																						
1	2	3	24	25	26	27	28	29	30	31	32	33	34	35	36	37	38	39	40	41	42	43
			Cost for Contract Year 5					Cost for Contract Year 6					Cost for Contract Year 7					Cost for Contract Year 8				
Line #	SOW Subsection	SOW Section 6.18 - Project Support Services (Onshore)	Estimated Annual Hours Year 5	Onshore PSS Rates Year 5	Total Staffing Cost Year 5	Other Cost Year 5	Total Annual Cost Year 5	Estimated Annual Hours Year 6	Onshore PSS Rates Year 6	Total Staffing Cost Year 6	Other Cost Year 6	Total Annual Cost Year 6	Estimated Annual Hours Year 7	Onshore PSS Rates Year 7	Total Staffing Cost Year 7	Other Cost Year 7	Total Annual Cost Year 7	Estimated Annual Hours Year 8	Onshore PSS Rates Year 8	Total Staffing Cost Year 8	Other Cost Year 8	Total Annual Cost Year 8
33	6.18.5	CalHEERS Business Support Services																				
34		Primary Project Worksite - Security Badges & Badge Management Services Costs	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00
35		Primary Project Worksite - Daily Support Tasks Costs	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00
36		Primary Project Worksite - Daily Cleaning/Maintenance Services Costs	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00
37		Primary Project Worksite - Office Supply Services Costs	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00
38		Primary Project Worksite - Asset Management & Inventory Services Costs	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00
39		Primary Project Worksite - Emergency Evacuation Planning Participation Costs	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00
40		Primary Project Worksite - All Other CalHEERS Business Support Services Costs	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00
41	6.18.6	Facility Asset Inventory Reports																				
42		Facility Asset Inventory Reports	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00
43		Total Project Support Services (Onshore) Cost	0.0		\$0.00	\$0.00	\$0.00	0.0		\$0.00	\$0.00	\$0.00	0.0		\$0.00	\$0.00	\$0.00	0.0		\$0.00	\$0.00	\$0.00

Project Support Services - D-5.4 SDMO F.P. Onshore-PSS Costs													
1	2	3	44	45	46	47	48	49	50	51	52	53	54
			Cost for Contract Year 9					Cost for Contract Year 10					
Line #	SOW Subsection	SOW Section 6.18 - Project Support Services (Onshore)	Estimated Annual Hours Year 9	Onshore PSS Rates Year 9	Total Staffing Cost Year 9	Other Cost Year 9	Total Annual Cost Year 9	Estimated Annual Hours Year 10	Onshore PSS Rates Year 10	Total Staffing Cost Year 10	Other Cost Year 10	Total Annual Cost Year 10	Total PSS Onshore Activity Cost
33	6.18.5	CalHEERS Business Support Services											
34		Primary Project Worksite - Security Badges & Badge Management Services Costs	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
35		Primary Project Worksite - Daily Support Tasks Costs	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
36		Primary Project Worksite - Daily Cleaning/Maintenance Services Costs	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
37		Primary Project Worksite - Office Supply Services Costs	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
38		Primary Project Worksite - Asset Management & Inventory Services Costs	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
39		Primary Project Worksite - Emergency Evacuation Planning Participation Costs	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
40		Primary Project Worksite - All Other CalHEERS Business Support Services Costs	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
41	6.18.6	Facility Asset Inventory Reports											
42		Facility Asset Inventory Reports	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
43		Total Project Support Services (Onshore) Cost	0.0		\$0.00	\$0.00	\$0.00	0.0		\$0.00	\$0.00	\$0.00	\$0.00

<Vendor Name>

Project Support Services - D-5.3 SDMO F.P. Onshore-PSS (Year 1) Costs																				
1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20	21
				Year 1 / Month 1			Year 1 / Month 2			Year 1 / Month 3			Year 1 / Month 4			Year 1 / Month 5			Year 1 / Month	
Line #	SOW Subsection	SOW Section 6.18 - Project Support Services (Onshore - Year 1)	Bidder Onshroe PSS Rates (Year 1)	Estimated Hours Month 1	Other Cost Month 1	Total Cost Month 1	Estimated Hours Month 2	Other Cost Month 2	Total Cost Month 2	Estimated Hours Month 3	Other Cost Month 3	Total Cost Month 3	Estimated Hours Month 4	Other Cost Month 4	Total Cost Month 4	Estimated Hours Month 5	Other Cost Month 5	Total Cost Month 5	Estimated Hours Month 6	Other Cost Month 6
1	6.18.1	Project Worksite Maintenance Plan																		
2		Project Worksite Maintenance Plan Cost	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00
3	6.18.2	Project Worksite Maintenance Execution																		
4		Primary Project Worksite - Rent Cost	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00
5		Primary Project Worksite - Utilities Costs	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00
6		Primary Project Worksite - Leasehold Improvements Costs	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00
7		Primary Project Worksite - Insurance Costs	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00
8		Primary Project Worksite - Janitorial Services Costs	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00
9		Primary Project Worksite - Lighting Maintenance Costs	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00
10		Primary Project Worksite - Window Cleaning Costs	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00
11		Primary Project Worksite - Fire Extinguisher Checks Costs	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00
12		Primary Project Worksite - Telephone System (including Communication Lines and Service Providers) Costs	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00
13		Primary Project Worksite - LAN/WAN & Connectivity Costs	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00
14		Primary Project Worksite - Secured Wireless and Remote Access Costs	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00
15		Primary Project Worksite - Office Equipment Installation and Maintenance Costs	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00
16		Primary Project Worksite - HVAC Services and Maintenance Costs	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00
17		Primary Project Worksite - Plumbing Maintenance Costs	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00
18		Primary Project Worksite - Security Cameras and Patrol Services Costs	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00
19		Primary Project Worksite - All Other Project Worksite Requirements Costs	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00
20	6.18.3	Office Setup & Maintenance Execution																		
21		Primary Project Worksite - Furniture Install & Maintenance Costs	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00
22		Primary Project Worksite - Purchase/lease/rental, Installation & maintenance Costs, including: a. Printers b. Scanners c. Fax Machines d. High speed network scanning/printing machines	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00
23		Primary Project Worksite - Laptops w/ Current software Costs	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00
24		Primary Project Worksite - All Other Office Setup & Maintenance Costs	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00
25	6.18.4	Business Maintenance & Support Execution																		
26		Primary Project Worksite - Security Patrol Services Costs	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00
27		Primary Project Worksite - Security System & Cameras Costs	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00
28		Primary Project Worksite - Confidential Destruction Services Costs	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00
29		Primary Project Worksite - Cleaning Maintenance Services Costs	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00
30		Primary Project Worksite - Garbage and Recycling Services Costs	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00
31		Primary Project Worksite - Mail Delivery Services Costs	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00
32		Primary Project Worksite - All Other Building Maintenance & Support Costs	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00

<Vendor Name>

Project Support Services - D-5.3 SDMO F.P. Onshore-PSS (Year 1) Co																					
1	2	3	22	23	24	25	26	27	28	29	30	31	32	33	34	35	36	37	38	39	40
			6	Year 1 / Month 7			Year 1 / Month 8			Year 1 / Month 9			Year 1 / Month 10			Year 1 / Month 11			Year 1 / Month 12		
Line #	SOW Subsection	SOW Section 6.18 - Project Support Services (Onshore - Year 1)	Total Cost Month 6	Estimated Hours Month 7	Other Cost Month 7	Total Cost Month 7	Estimated Hours Month 8	Other Cost Month 8	Total Cost Month 8	Estimated Hours Month 9	Other Cost Month 9	Total Cost Month 9	Estimated Hours Month 10	Other Cost Month 10	Total Cost Month 10	Estimated Hours Month 11	Other Cost Month 11	Total Cost Month 11	Estimated Hours Month 12	Other Cost Month 12	Total Cost Month 12
1	6.18.1	Project Worksite Maintenance Plan																			
2		Project Worksite Maintenance Plan Cost	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00
3	6.18.2	Project Worksite Maintenance Execution																			
4		Primary Project Worksite - Rent Cost	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00
5		Primary Project Worksite - Utilities Costs	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00
6		Primary Project Worksite - Leasehold Improvements Costs	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00
7		Primary Project Worksite - Insurance Costs	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00
8		Primary Project Worksite - Janitorial Services Costs	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00
9		Primary Project Worksite - Lighting Maintenance Costs	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00
10		Primary Project Worksite - Window Cleaning Costs	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00
11		Primary Project Worksite - Fire Extinguisher Checks Costs	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00
12		Primary Project Worksite - Telephone System (including Communication Lines and Service Providers) Costs	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00
13		Primary Project Worksite - LAN/WAN & Connectivity Costs	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00
14		Primary Project Worksite - Secured Wireless and Remote Access Costs	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00
15		Primary Project Worksite - Office Equipment Installation and Maintenance Costs	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00
16		Primary Project Worksite - HVAC Services and Maintenance Costs	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00
17		Primary Project Worksite - Plumbing Maintenance Costs	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00
18		Primary Project Worksite - Security Cameras and Patrol Services Costs	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00
19		Primary Project Worksite - All Other Project Worksite Requirements Costs	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00
20	6.18.3	Office Setup & Maintenance Execution																			
21		Primary Project Worksite - Furniture Install & Maintenance Costs	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00
22		Primary Project Worksite - Purchase/lease/rental, Installation & maintenance Costs, including: a. Printers b. Scanners c. Fax Machines d. High speed network scanning/printing machines	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00
23		Primary Project Worksite - Laptops w/ Current software Costs	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00
24		Primary Project Worksite - All Other Office Setup & Maintenance Costs	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00
25	6.18.4	Business Maintenance & Support Execution																			
26		Primary Project Worksite - Security Patrol Services Costs	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00
27		Primary Project Worksite - Security System & Cameras Costs	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00
28		Primary Project Worksite - Confidential Destruction Services Costs	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00
29		Primary Project Worksite - Cleaning Maintenance Services Costs	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00
30		Primary Project Worksite - Garbage and Recycling Services Costs	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00
31		Primary Project Worksite - Mail Delivery Services Costs	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00
32		Primary Project Worksite - All Other Building Maintenance & Support Costs	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00

<Vendor Name>

Project Support Services - D-5.3 SDMO F.P. Onshore-PSS (Year 1) Co			
1	2	3	41
Line #	SOW Subsection	SOW Section 6.18 - Project Support Services (Onshore - Year 1)	Total Onshore Cost Year 1
1	6.18.1	Project Worksite Maintenance Plan	
2		Project Worksite Maintenance Plan Cost	\$0.00
3	6.18.2	Project Worksite Maintenance Execution	
4		Primary Project Worksite - Rent Cost	\$0.00
5		Primary Project Worksite - Utilities Costs	\$0.00
6		Primary Project Worksite - Leasehold Improvements Costs	\$0.00
7		Primary Project Worksite - Insurance Costs	\$0.00
8		Primary Project Worksite - Janitorial Services Costs	\$0.00
9		Primary Project Worksite - Lighting Maintenance Costs	\$0.00
10		Primary Project Worksite - Window Cleaning Costs	\$0.00
11		Primary Project Worksite - Fire Extinguisher Checks Costs	\$0.00
12		Primary Project Worksite - Telephone System (including Communication Lines and Service Providers) Costs	\$0.00
13		Primary Project Worksite - LAN/WAN & Connectivity Costs	\$0.00
14		Primary Project Worksite - Secured Wireless and Remote Access Costs	\$0.00
15		Primary Project Worksite - Office Equipment Installation and Maintenance Costs	\$0.00
16		Primary Project Worksite - HVAC Services and Maintenance Costs	\$0.00
17		Primary Project Worksite - Plumbing Maintenance Costs	\$0.00
18		Primary Project Worksite - Security Cameras and Patrol Services Costs	\$0.00
19		Primary Project Worksite - All Other Project Worksite Requirements Costs	\$0.00
20	6.18.3	Office Setup & Maintenance Execution	
21		Primary Project Worksite - Furniture Install & Maintenance Costs	\$0.00
22		Primary Project Worksite - Purchase/lease/rental, Installation & maintenance Costs, including: a. Printers b. Scanners c. Fax Machines d. High speed network scanning/printing machines	\$0.00
23		Primary Project Worksite - Laptops w/ Current software Costs	\$0.00
24		Primary Project Worksite - All Other Office Setup & Maintenance Costs	\$0.00
25	6.18.4	Business Maintenance & Support Execution	
26		Primary Project Worksite - Security Patrol Services Costs	\$0.00
27		Primary Project Worksite - Security System & Cameras Costs	\$0.00
28		Primary Project Worksite - Confidential Destruction Services Costs	\$0.00
29		Primary Project Worksite - Cleaning Maintenance Services Costs	\$0.00
30		Primary Project Worksite - Garbage and Recycling Services Costs	\$0.00
31		Primary Project Worksite - Mail Delivery Services Costs	\$0.00
32		Primary Project Worksite - All Other Building Maintenance & Support Costs	\$0.00

Project Support Services - D-5.3 SDMO F.P. Onshore-PSS (Year 1) Costs																				
1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20	21
				Year 1 / Month 1			Year 1 / Month 2			Year 1 / Month 3			Year 1 / Month 4			Year 1 / Month 5			Year 1 / Month	
Line #	SOW Subsection	SOW Section 6.18 - Project Support Services (Onshore - Year 1)	Bidder Onshroe PSS Rates (Year 1)	Estimated Hours Month 1	Other Cost Month 1	Total Cost Month 1	Estimated Hours Month 2	Other Cost Month 2	Total Cost Month 2	Estimated Hours Month 3	Other Cost Month 3	Total Cost Month 3	Estimated Hours Month 4	Other Cost Month 4	Total Cost Month 4	Estimated Hours Month 5	Other Cost Month 5	Total Cost Month 5	Estimated Hours Month 6	Other Cost Month 6
33	6.18.5	CalHEERS Business Support Services																		
34		Primary Project Worksite - Security Badges & Badge Management Services Costs	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00
35		Primary Project Worksite - Daily Support Tasks Costs	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00
36		Primary Project Worksite - Daily Cleaning/Maintenance Services Costs	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00
37		Primary Project Worksite - Office Supply Services Costs	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00
38		Primary Project Worksite - Asset Management & Inventory Services Costs	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00
39		Primary Project Worksite - Emergency Evacuation Planning Participation Costs	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00
40		Primary Project Worksite - All Other CalHEERS Business Support Services Costs	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00
41	6.18.6	Facility Asset Inventory Reports																		
42		Facility Asset Inventory Reports	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00
43		Total Project Support Services (Onshore - Year 1) Cost		0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00

Project Support Services - D-5.3 SDMO F.P. Onshore-PSS (Year 1) Costs																					
1	2	3	22	23	24	25	26	27	28	29	30	31	32	33	34	35	36	37	38	39	40
			6	Year 1 / Month 7			Year 1 / Month 8			Year 1 / Month 9			Year 1 / Month 10			Year 1 / Month 11			Year 1 / Month 12		
Line #	SOW Subsection	SOW Section 6.18 - Project Support Services (Onshore - Year 1)	Total Cost Month 6	Estimated Hours Month 7	Other Cost Month 7	Total Cost Month 7	Estimated Hours Month 8	Other Cost Month 8	Total Cost Month 8	Estimated Hours Month 9	Other Cost Month 9	Total Cost Month 9	Estimated Hours Month 10	Other Cost Month 10	Total Cost Month 10	Estimated Hours Month 11	Other Cost Month 11	Total Cost Month 11	Estimated Hours Month 12	Other Cost Month 12	Total Cost Month 12
33	6.18.5	CalHEERS Business Support Services																			
34		Primary Project Worksite - Security Badges & Badge Management Services Costs	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00
35		Primary Project Worksite - Daily Support Tasks Costs	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00
36		Primary Project Worksite - Daily Cleaning/Maintenance Services Costs	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00
37		Primary Project Worksite - Office Supply Services Costs	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00
38		Primary Project Worksite - Asset Management & Inventory Services Costs	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00
39		Primary Project Worksite - Emergency Evacuation Planning Participation Costs	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00
40		Primary Project Worksite - All Other CalHEERS Business Support Services Costs	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00
41	6.18.6	Facility Asset Inventory Reports																			
42		Facility Asset Inventory Reports	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00
43		Total Project Support Services (Onshore - Year 1) Cost	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00

Project Support Services - D-5.3 SDMO F.P. Onshore-PSS (Year 1) Cost			
1	2	3	41
Line #	SOW Subsection	SOW Section 6.18 - Project Support Services (Onshore - Year 1)	Total Onshore Cost Year 1
33	6.18.5	CalHEERS Business Support Services	
34		Primary Project Worksite - Security Badges & Badge Management Services Costs	\$0.00
35		Primary Project Worksite - Daily Support Tasks Costs	\$0.00
36		Primary Project Worksite - Daily Cleaning/Maintenance Services Costs	\$0.00
37		Primary Project Worksite - Office Supply Services Costs	\$0.00
38		Primary Project Worksite - Asset Management & Inventory Services Costs	\$0.00
39		Primary Project Worksite - Emergency Evacuation Planning Participation Costs	\$0.00
40		Primary Project Worksite - All Other CalHEERS Business Support Services Costs	\$0.00
41	6.18.6	Facility Asset Inventory Reports	
42		Facility Asset Inventory Reports	\$0.00
43		Total Project Support Services (Onshore - Year 1) Cost	\$0.00

<Vendor Name>

APPENDIX D-5.4, INSTRUCTIONS - SDMO FIXED PRICE OFFSHORE COSTS

Appendix D-5.4, SDMO FIXED PRICE OFFSHORE COSTS, is used to identify the bidder's offshore costs for providing the services required to maintain and operate the CalHEERS.

All Key Staff (and applicable support staff), except for the Transition Manager, are to be costed under the D-5, Fixed Price Onshore/Offshore series of worksheets. The Transition Manager (and applicable Non-Key Staff) should be costed under Appendix D-8, Transition-In Costs, and Appendix D-8.2, Transition-Out Costs.

All Deliverables, Artifacts, or Standard Operating Procedures, including any off cycle updates, are to be costed under SDMO Fixed Price Onshore or Offshore Costs, except for Deliverables developed in association with individual Releases and Change Requests or identified within the Transition-In and Transition-Out Milestones.

Column 1, Line # = No entry needed.

Column 2, SDMO Activity = No entry needed. The State has provided the name of the SDMO activity from Appendix A-4, Statement of Work.

Column 3, SOW Reference = No entry needed. The State has provided the section reference in Appendix A-4, Statement of Work.

Column 4, Estimated Annual Hours Year 1 = No entry needed. The State has provided formulas to transfer the bidder identified effort from D-5.5 into this sheet.

Columns 9, 14, 19, 24, 29, 34, 39, 44, 49 Estimated Annual Hours Year X = The bidder must provide the estimated annual hours for each service from the CalHEERS Statement of Work. The bidder is expected to meet all the Contract requirements within these hours.

Column 5, Offshore Blended Rate Year 1 = No entry needed. The State has provided a formulas to transfer the blended offshore rate for SDMO Fixed Price Offshore Costs from D-5.5 and auto-populate the rate down the column.

Columns 10, 15, 20, 25, 30, 35, 40, 45, 50 Offshore Blended Rate Year X = The bidder must enter a blended rate for SDMO Fixed Price Offshore Costs. The blended rate will be the multiplied by the annual hours to determine an annual staffing cost for each activity. The state has provided a formula to auto-populate the rate down each column.

Columns 6, 11, 16, 21, 26, 31, 36, 41, 46, 51 Total Staffing Cost Year X = No entry needed. The Total Annual Cost will be calculated for each activity by multiplying the bidder Estimated Annual Hours by the bidder identified Blended Rate.

Columns 7, 12, 17, 22, 27, 32, 37, 42, 47, 52 Other Costs Year X = Offshore costs included in these columns are specific to other non-staffing components of cost associated with the activity, including subcontracts, bid as part of the SDMO Fixed Price. Any costs identified as Other require bidders to provide supplemental cost details to include a basis of estimation, the number of units, and per unit rate. Note that all Hardware, Software, and Cloud Hosting Services used by the Prime Vendor should not be included in this worksheet, but in Appendix D-2, SDMO Hardware Costs or Appendix D-3, SDMO Software Costs, or Appendix D-4, Cloud Hosting Costs.

Columns 8, 13, 18, 23, 28, 33, 38, 43, 48, 53 Total Annual Cost Year X = No entry needed. The Total Annual Cost for each activity by year will be calculated for each service by adding the Total Staffing Cost and Other Cost together. These costs are linked to Appendix D-1, TOTAL COST SUMMARY and will be part of the bid amount.

Column 54, Total Offshore Activity Cost = No entry needed. The Total Activity Cost is the sum of Total Annual Costs for the SDMO activity for Years 1 through 10.

Lines 6, 7, 10, 11, 15, 20-23, and 27-28 = No entry required. These costs are solicited via other worksheets of the Appendix D, Cost Workbook.

Line 56, Technology Refresh = Bidders shall only include offshore staffing costs (labor hours) associated with the Tech Refresh activities listed below in this worksheet, entering those efforts within the year they are planned:

- Technology Refresh planning, management, assessment, reporting, tracking, deliverable development, workplan development/maintenance, artifact development/maintenance (e.g., Tech Refresh Roadmap).
- Implementation of State approved technology refresh recommendations.

Bidders shall NOT include Hardware, Software, Cloud Hosting Data Center Services costs associated with Technology Refresh in this tab, as they are managed in other tabs within this workbook.

Line 68, Project Support Services = No entry needed. The State has provided formulas that will pull the data from Appendix D-5.6, SDMO Fixed Price Offshore - PSS Worksheet..

Line 71, Total SDMO Fixed Price Offshore Cost - No entry required. The State has provided a formula to SUM all Total Offshore Activity Costs.

Line 72, Cost Percentage of Prior Year = The State expects the Contractor to implement process efficiencies and reduce the Total Annual Cost by at least two percent (2%) per year starting between Contract Year 2 and Contract Year 3. Any bidder that does not comply with this requirement may be deemed non-responsive.

<Vendor Name>

D-5.4: SDMO Fixed Price Offshore Costs																						
1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20	21	22	23
			Cost for Contract Year 1					Cost for Contract Year 2					Cost for Contract Year 3					Cost for Contract Year 4				
Line #	SDMO Activity (Offshore)	SOW Ref	Estimated Annual Hours Year 1	Offshore Blended Rate Year 1	Total Staffing Cost Year 1	Other Cost Year 1	Total Annual Cost Year 1	Estimated Annual Hours Year 2	Offshore Blended Rate Year 2	Total Staffing Cost Year 2	Other Cost Year 2	Total Annual Cost Year 2	Estimated Annual Hours Year 3	Offshore Blended Rate Year 3	Total Staffing Cost Year 3	Other Cost Year 3	Total Annual Cost Year 3	Estimated Annual Hours Year 4	Offshore Blended Rate Year 4	Total Staffing Cost Year 4	Other Cost Year 4	Total Annual Cost Year 4
1	Project Management Requirements	3																				
2	Project Management	3.1	-	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00
3	Schedule Management	3.2	-	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00
4	Cost/Cost Estimating Management	3.3	-	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00
5	Human Resource Management	3.4	-	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00
6	Risk and Issue Management	3.5	Onshore Only																			
7	Communication Management	3.6	Onshore Only																			
8	Document Management	3.7	-	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00
9	SOW Requirements Management	3.8	-	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00
10	Problem Escalation	3.9	Onshore Only																			
11	Quality Management	3.10	Onshore Only																			
12	Contract Management	3.11	-	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00
13	CalHEERS Proj Enterprise Tools	3.12	-	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00
14	CalHEERS Project Processes	3.13	-	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00
15	CalHEERS Project Training	3.14	Onshore Only																			
16	Strategic Planning and Management	3.15	-	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00
17	Policy & Legis Impact Analysis & Change Sup	3.16	-	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00
18	Audit Evaluation and Findings Services	3.17	-	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00
19	System Change & Enhancement Rqmts	4																				
20	System/Software Development Lifecycle (SDLC)	4.1	This SOW activity is covered as part of Tab D-7 System Changes Costs																			
21	Change Management and Configuration Management (System)	4.2	This SOW activity is covered as part of Tab D-7 System Changes Costs																			
22	Change/Refresh/Upgrade	4.3	This SOW activity is covered as part of Tab D-7 System Changes Costs																			
23	Code Development	4.4	This SOW activity is covered as part of Tab D-7 System Changes Costs																			
24	System Requirements Management	4.5	-	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00
25	Release Management	4.6	-	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00
26	Organization & Business Change Management	4.7	-	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00
27	Testing	4.8	This SOW activity is covered as part of Tab D-7 System Changes Costs																			
28	Defect Management	4.9	Onshore Only																			
29	Program Support Rqmts	5																				
30	Program Support Services	5.1	-	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00
31	Consumer Experience Services	5.2	-	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00
32	ROP Batch Services	5.3	-	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00
33	BOT Services	5.4	-	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00
34	Small Change Notices Services	5.5	-	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00
35	Salesforce Application Maintenance Services	5.6	-	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00
36	IDP Services	5.7	-	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00
37	Application Maintenance Services	5.8	-	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00
38	Usability Research Services	5.9	-	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00
39	eHIT Services	5.10	-	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00
40	Fed Reg Analysis and Imp Services	5.11	-	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00
41	State Reg Analysis and Impl Services	5.12	-	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00
42	Analytics Enhance and Sup Services	5.13	-	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00
43	Print Mail Center Support	5.14	-	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00
44	General Innovations	5.15	-	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00
45	Data Usage & Analytics Innovations	5.16	-	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00
46	Consumer Journey & Exp Innovations	5.17	-	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00
47	Artificial Intelligence Innovations	5.18	-	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00
48	Organizational Innovations	5.19	-	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00
49	Security Innovations	5.20	-	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00

<Vendor Name>

D-5.4: SDMO Fixed Price Offshore Costs																							
1	2	3	24	25	26	27	28	29	30	31	32	33	34	35	36	37	38	39	40	41	42	43	44
			Cost for Contract Year 5					Cost for Contract Year 6					Cost for Contract Year 7					Cost for Contract Year 8					
Line #	SDMO Activity (Offshore)	SOW Ref	Estimated Annual Hours Year 5	Offshore Blended Rate Year 5	Total Staffing Cost Year 5	Other Cost Year 5	Total Annual Cost Year 5	Estimated Annual Hours Year 6	Offshore Blended Rate Year 6	Total Staffing Cost Year 6	Other Cost Year 6	Total Annual Cost Year 6	Estimated Annual Hours Year 7	Offshore Blended Rate Year 7	Total Staffing Cost Year 7	Other Cost Year 7	Total Annual Cost Year 7	Estimated Annual Hours Year 8	Offshore Blended Rate Year 8	Total Staffing Cost Year 8	Other Cost Year 8	Total Annual Cost Year 8	Estimated Annual Hours Year 9
1	Project Management Requirements	3																					
2	Project Management	3.1	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0
3	Schedule Management	3.2	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0
4	Cost/Cost Estimating Management	3.3	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0
5	Human Resource Management	3.4	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0
6	Risk and Issue Management	3.5																					
7	Communication Management	3.6																					
8	Document Management	3.7	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0
9	SOW Requirements Management	3.8	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0
10	Problem Escalation	3.9																					
11	Quality Management	3.10																					
12	Contract Management	3.11	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0
13	CalHEERS Proj Enterprise Tools	3.12	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0
14	CalHEERS Project Processes	3.13	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0
15	CalHEERS Project Training	3.14																					
16	Strategic Planning and Management	3.15	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0
17	Policy & Legis Impact Analysis & Change Sup	3.16	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0
18	Audit Evaluation and Findings Services	3.17	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0
19	System Change & Enhancement Rqmts	4																					
20	System/Software Development Lifecycle (SDLC)	4.1																					
21	Change Management and Configuration Management (System)	4.2																					
22	Change/Refresh/Upgrade	4.3																					
23	Code Development	4.4																					
24	System Requirements Management	4.5	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0
25	Release Management	4.6	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0
26	Organization & Business Change Management	4.7	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0
27	Testing	4.8																					
28	Defect Management	4.9																					
29	Program Support Rqmts	5																					
30	Program Support Services	5.1	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0
31	Consumer Experience Services	5.2	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0
32	ROP Batch Services	5.3	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0
33	BOT Services	5.4	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0
34	Small Change Notices Services	5.5	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0
35	Salesforce Application Maintenance Services	5.6	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0
36	IDP Services	5.7	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0
37	Application Maintenance Services	5.8	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0
38	Usability Research Services	5.9	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0
39	eHIT Services	5.10	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0
40	Fed Reg Analysis and Imp Services	5.11	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0
41	State Reg Analysis and Impl Services	5.12	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0
42	Analytics Enhance and Sup Services	5.13	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0
43	Print Mail Center Support	5.14	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0
44	General Innovations	5.15	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0
45	Data Usage & Analytics Innovations	5.16	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0
46	Consumer Journey & Exp Innovations	5.17	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0
47	Artificial Intelligence Innovations	5.18	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0
48	Organizational Innovations	5.19	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0
49	Security Innovations	5.20	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0

<Vendor Name>

D-5.4: SDMO Fixed Price Offshore Costs												
1	2	3	45	46	47	48	49	50	51	52	53	54
			Cost for Contract Year 9				Cost for Contract Year 10					
Line #	SDMO Activity (Offshore)	SOW Ref	Offshore Blended Rate Year 9	Total Staffing Cost Year 9	Other Cost Year 9	Total Annual Cost Year 9	Estimated Annual Hours Year 10	Offshore Blended Rate Year 10	Total Staffing Cost Year 10	Other Cost Year 10	Total Annual Cost Year 10	Total Offshore Activity Cost
1	Project Management Requirements	3										
2	Project Management	3.1	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
3	Schedule Management	3.2	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
4	Cost/Cost Estimating Management	3.3	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
5	Human Resource Management	3.4	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
6	Risk and Issue Management	3.5										
7	Communication Management	3.6										
8	Document Management	3.7	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
9	SOW Requirements Management	3.8	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
10	Problem Escalation	3.9										
11	Quality Management	3.10										
12	Contract Management	3.11	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
13	CalHEERS Proj Enterprise Tools	3.12	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
14	CalHEERS Project Processes	3.13	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
15	CalHEERS Project Training	3.14										
16	Strategic Planning and Management	3.15	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
17	Policy & Legis Impact Analysis & Change Sup	3.16	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
18	Audit Evaluation and Findings Services	3.17	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
19	System Change & Enhancement Rqmts	4										
20	System/Software Development Lifecycle (SDLC)	4.1										
21	Change Management and Configuration Management (System)	4.2										
22	Change/Refresh/Upgrade	4.3										
23	Code Development	4.4										
24	System Requirements Management	4.5	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
25	Release Management	4.6	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
26	Organization & Business Change Management	4.7	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
27	Testing	4.8										
28	Defect Management	4.9										
29	Program Support Rqmts	5										
30	Program Support Services	5.1	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
31	Consumer Experience Services	5.2	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
32	ROP Batch Services	5.3	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
33	BOT Services	5.4	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
34	Small Change Notices Services	5.5	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
35	Salesforce Application Maintenance Services	5.6	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
36	IDP Services	5.7	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
37	Application Maintenance Services	5.8	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
38	Usability Research Services	5.9	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
39	eHIT Services	5.10	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
40	Fed Reg Analysis and Imp Services	5.11	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
41	State Reg Analysis and Impl Services	5.12	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
42	Analytics Enhance and Sup Services	5.13	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
43	Print Mail Center Support	5.14	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
44	General Innovations	5.15	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
45	Data Usage & Analytics Innovations	5.16	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
46	Consumer Journey & Exp Innovations	5.17	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
47	Artificial Intelligence Innovations	5.18	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
48	Organizational Innovations	5.19	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
49	Security Innovations	5.20	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00

D-5.4: SDMO Fixed Price Offshore Costs																						
1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20	21	22	23
			Cost for Contract Year 1					Cost for Contract Year 2					Cost for Contract Year 3					Cost for Contract Year 4				
Line #	SDMO Activity (Offshore)	SOW Ref	Estimated Annual Hours Year 1	Offshore Blended Rate Year 1	Total Staffing Cost Year 1	Other Cost Year 1	Total Annual Cost Year 1	Estimated Annual Hours Year 2	Offshore Blended Rate Year 2	Total Staffing Cost Year 2	Other Cost Year 2	Total Annual Cost Year 2	Estimated Annual Hours Year 3	Offshore Blended Rate Year 3	Total Staffing Cost Year 3	Other Cost Year 3	Total Annual Cost Year 3	Estimated Annual Hours Year 4	Offshore Blended Rate Year 4	Total Staffing Cost Year 4	Other Cost Year 4	Total Annual Cost Year 4
50	Operation Requirements	6																				
51	Operations Planning and Management	6.1	-	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00
52	Operations Manual	6.2	-	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00
53	Operations Reporting, Data, and Analytics	6.3	-	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00
54	Operations Maintenance	6.4	-	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00
55	Interface Support	6.5	-	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00
56	Technology Refresh	6.6	-	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00
57	System Security	6.7	-	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00
58	Data Retention, Backup and Recovery	6.8	-	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00
59	Data Management	6.9	-	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00
60	Technology Recovery	6.10	-	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00
61	Business Continuity	6.11	-	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00
62	System Environments	6.12	-	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00
63	System Performance	6.13	-	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00
64	System Hardware/Cloud Services/Software	6.14	-	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00
65	Problem Management	6.15	-	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00
66	Help Desk Services	6.16	-	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00
67	Hosting Services	6.17	-	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00
68	Project Support Services	6.18			\$0.00	\$0.00	\$0.00			\$0.00	\$0.00	\$0.00			\$0.00	\$0.00	\$0.00			\$0.00	\$0.00	\$0.00
69	Service Center Services	6.19	-	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00
70	Website Management	6.20	-	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00
71	Total SDMO Fixed Price Offshore Cost		0	\$0.00	\$0.00	\$0.00	\$0.00	0		\$0.00	\$0.00	\$0.00	0		\$0.00	\$0.00	\$0.00	0		\$0.00	\$0.00	\$0.00
72	Cost Percentage of Prior Year																0%					0%

D-5.4: SDMO Fixed Price Offshore Costs																							
1	2	3	24	25	26	27	28	29	30	31	32	33	34	35	36	37	38	39	40	41	42	43	44
			Cost for Contract Year 5					Cost for Contract Year 6					Cost for Contract Year 7					Cost for Contract Year 8					
Line #	SDMO Activity (Offshore)	SOW Ref	Estimated Annual Hours Year 5	Offshore Blended Rate Year 5	Total Staffing Cost Year 5	Other Cost Year 5	Total Annual Cost Year 5	Estimated Annual Hours Year 6	Offshore Blended Rate Year 6	Total Staffing Cost Year 6	Other Cost Year 6	Total Annual Cost Year 6	Estimated Annual Hours Year 7	Offshore Blended Rate Year 7	Total Staffing Cost Year 7	Other Cost Year 7	Total Annual Cost Year 7	Estimated Annual Hours Year 8	Offshore Blended Rate Year 8	Total Staffing Cost Year 8	Other Cost Year 8	Total Annual Cost Year 8	Estimated Annual Hours Year 9
50	Operation Requirements	6																					
51	Operations Planning and Management	6.1	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0
52	Operations Manual	6.2	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0
53	Operations Reporting, Data, and Analytics	6.3	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0
54	Operations Maintenance	6.4	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0
55	Interface Support	6.5	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0
56	Technology Refresh	6.6	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0
57	System Security	6.7	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0
58	Data Retention, Backup and Recovery	6.8	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0
59	Data Management	6.9	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0
60	Technology Recovery	6.10	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0
61	Business Continuity	6.11	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0
62	System Environments	6.12	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0
63	System Performance	6.13	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0
64	System Hardware/Cloud Services/Software	6.14	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0
65	Problem Management	6.15	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0
66	Help Desk Services	6.16	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0
67	Hosting Services	6.17	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0
68	Project Support Services	6.18			\$0.00	\$0.00	\$0.00			\$0.00	\$0.00	\$0.00			\$0.00	\$0.00	\$0.00			\$0.00	\$0.00	\$0.00	
69	Service Center Services	6.19	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0
70	Website Management	6.20	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0
71	Total SDMO Fixed Price Offshore Cost		0		\$0.00	\$0.00	\$0.00	0		\$0.00	\$0.00	\$0.00	0		\$0.00	\$0.00	\$0.00	0		\$0.00	\$0.00	\$0.00	0
72	Cost Percentage of Prior Year						0%					0.00%					0%					0%	

D-5.4: SDMO Fixed Price Offshore Costs												
1	2	3	45	46	47	48	49	50	51	52	53	54
			Cost for Contract Year 9				Cost for Contract Year 10					
Line #	SDMO Activity (Offshore)	SOW Ref	Offshore Blended Rate Year 9	Total Staffing Cost Year 9	Other Cost Year 9	Total Annual Cost Year 9	Estimated Annual Hours Year 10	Offshore Blended Rate Year 10	Total Staffing Cost Year 10	Other Cost Year 10	Total Annual Cost Year 10	Total Offshore Activity Cost
50	Operation Requirements	6										
51	Operations Planning and Management	6.1	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
52	Operations Manual	6.2	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
53	Operations Reporting, Data, and Analytics	6.3	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
54	Operations Maintenance	6.4	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
55	Interface Support	6.5	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
56	Technology Refresh	6.6	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
57	System Security	6.7	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
58	Data Retention, Backup and Recovery	6.8	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
59	Data Management	6.9	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
60	Technology Recovery	6.10	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
61	Business Continuity	6.11	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
62	System Environments	6.12	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
63	System Performance	6.13	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
64	System Hardware/Cloud Services/Software	6.14	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
65	Problem Management	6.15	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
66	Help Desk Services	6.16	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
67	Hosting Services	6.17	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
68	Project Support Services	6.18		\$0.00	\$0.00	\$0.00			\$0.00	\$0.00	\$0.00	\$0.00
69	Service Center Services	6.19	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
70	Website Management	6.20	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
71	Total SDMO Fixed Price Offshore Cost			\$0.00	\$0.00	\$0.00	0		\$0.00	\$0.00	\$0.00	\$0.00
72	Cost Percentage of Prior Year					0%					0%	

<Vendor Name>

APPENDIX D-5.5, INSTRUCTIONS - SDMO FIXED PRICE OFFSHORE (YEAR 1) COSTS

Appendix D-5.5, SDMO FIXED PRICE OFFSHORE (YEAR 1), is used to identify the bidder’s offshore costs for providing the services required to maintain and operate the CalHEERS within Year 1.

All Key Staff (and applicable support staff), except for the Transition Manager, and all Deliverables (except those identified by the State as Transition-In or Transition-Out Milestones) are to be costed under the D-5, Fixed Price Onshore/Offshore series of worksheets. The Transition Manager (and applicable Non-Key Staff) and the Transition-In and Transition-Out Milestone related Deliverables are to be costed under Appendix D-8 Transition-In Costs, and Appendix D-8.2, Transition-Out Costs.

All Deliverables, Artifacts, or Standard Operating Procedures, including any offcycle updates, are to be costed under SDMO Fixed Price Onshore or Offshore Costs, except for those Deliverables identified within the Transition-In and Transition-Out Milestones.

Column 1, Line # = No entry needed.

Column 2, SDMO Activity (Offshore) = No entry needed. The State has provided the name of the SDMO activity from the Appendix A-4, Statement of Work.

Column 3, SOW Reference = No entry needed. The State has provided the section reference associated with the Appendix A-4, Statement of Work.

Column 4, Line #2, Bidder Offshore Blended Rate Year 1 = The bidder must enter a blended rate for SDMO Fixed Price Offshore Costs (Year 1). The blended rate will be auto-populated for each SDMO activity and will be multiplied by the bidder identified Estimated Hours Month X to determine the monthly and annual staffing cost for each activity within (Year 1).

Column 5, 8, 11, 14, 17, 20, 23, 26, 29, 32, 35, 38, Estimated Hours Month X = Bidders are to enter the estimated offshore effort (in total hours) related to each SDMO Activity in each month of Year 1. Please note the following:

- 1) The bidder takes full responsibility for all aspects of the SDMO Activity within the first month where the bidder identifies effort in D-5.5.
- 2) The effort entered within D-5.5 must align with the bidder's plan for Transition-In.
- 3) The bidder is expected to meet all the Contract requirements within the hours identified. Any additional hours needed to perform these activities must be provided to the State at no cost.
- 4) The total effort/cost within Year 1, can not be greater than the highest yearly effort/cost within Years 2-10.

Columns 7, 10, 13, 16, 19, 22, 25, 28, 31, 34, 37, 40, Total Cost Month X = No entry needed. The State has provided a formula to multiply the Bidder Offshore Blended Rate Year 1 by the bidder estimated hours for each Year 1 month, then adds any bidder identified costs in the Other Costs Month X column, resulting in the total cost for each month within Year 1.

Column 41, Total Offshore Cost Year 1 = No entry needed, The State has provided a SUM formula to collect the monthly cost totals.

Lines 6, 7, 10, 11, 15, 20-23, and 27-28 = No entry required. These costs are solicited via other worksheets of the Appendix D, Cost Workbook.

Line 68, Project Support Services = No entry needed. The State has provided formulas that will pull the data from D-5.7.

Line 71 - No entry needed. The State has provided SUM formulas to provide both monthly effort and cost subtotals, as well as, the Total SDMO Fixed Price Offshore Cost Year 1.

<Vendor Name>

D-5.5: SDMO Fixed Price Offshore (Year 1) Costs																					
1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20	21	22
				Year 1 / Month 1			Year 1 / Month 2			Year 1 / Month 3			Year 1 / Month 4			Year 1 / Month 5			Year 1 / Month 6		
Line #	SDMO Activity (Offshore)	SOW Ref	Bidder Offshore Blended Rate Year 1	Estimated Hours Month 1	Other Costs Month 1	Total Cost Month 1	Estimated Hours Month 2	Other Costs Month 2	Total Cost Month 2	Estimated Hours Month 3	Other Costs Month 3	Total Cost Month 3	Estimated Hours Month 4	Other Costs Month 4	Total Cost Month 4	Estimated Hours Month 5	Other Costs Month 5	Total Cost Month 5	Estimated Hours Month 6	Other Costs Month 6	Total Cost Month 6
1	Project Management Requirements	3																			
2	Project Management	3.1	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00
3	Schedule Management	3.2	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00
4	Cost/Cost Estimating Management	3.3	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00
5	Human Resource Management	3.4	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00
6	Risk and Issue Management	3.5	Onshore Only																		
7	Communication Management	3.6	Onshore Only																		
8	Document Management	3.7	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00
9	SOW Requirements Management	3.8	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00
10	Problem Escalation	3.9	Onshore Only																		
11	Quality Management	3.10	Onshore Only																		
12	Contract Management	3.11	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00
13	CalHEERS Proj Enterprise Tools	3.12	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00
14	CalHEERS Project Processes	3.13	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00
15	CalHEERS Project Training	3.14	Onshore Only																		
16	Strategic Planning and Management	3.15	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00
17	Policy & Legis Impact Analysis & Change Sup	3.16	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00
18	Audit Evaluation and Findings Services	3.17	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00
19	System Change & Enhancement Rqmts	4																			
20	System/Software Development Lifecycle (SDLC)	4.1	This SOW activity is covered as part of Tab D-7 System Changes Costs																		
21	Change Management and Configuration Management (System)	4.2	This SOW activity is covered as part of Tab D-7 System Changes Costs																		
22	Change/Refresh/Upgrade	4.3	This SOW activity is covered as part of Tab D-7 System Changes Costs																		
23	Code Development	4.4	This SOW activity is covered as part of Tab D-7 System Changes Costs																		
24	System Requirements Management	4.5	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00
25	Release Management	4.6	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00
26	Organization & Business Change Management	4.7	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00
27	Testing	4.8	This SOW activity is covered as part of Tab D-7 System Changes Costs																		
28	Defect Management	4.9	Onshore Only																		
29	Program Support Rqmts	5																			
30	Program Support Services	5.1	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00
31	Consumer Experience Services	5.2	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00
32	ROP Batch Services	5.3	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00
33	BOT Services	5.4	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00
34	Small Change Notices Services	5.5	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00
35	Salesforce Application Maintenance Services	5.6	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00
36	IDP Services	5.7	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00
37	Application Maintenance Services	5.8	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00
38	Usability Research Services	5.9	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00
39	eHIT Services	5.10	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00
40	Fed Reg Analysis and Imp Services	5.11	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00
41	State Reg Analysis and Impl Services	5.12	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00
42	Data & Analytics Support Services	5.13	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00
43	Print Mail Center Support	5.14	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00
44	General Innovations	5.15	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00
45	Data Usage & Analytics Innovations	5.16	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00
46	Consumer Journey & Exp Innovations	5.17	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00
47	Artificial Intelligence Innovations	5.18	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00
48	Organizational Innovations	5.19	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00
49	Security Innovations	5.20	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00

<Vendor Name>

D-5.5: SDMO Fixed Price Offshore (Year 1) Costs																					
1	2	3	23	24	25	26	27	28	29	30	31	32	33	34	35	36	37	38	39	40	41
			Year 1 / Month 7			Year 1 / Month 8			Year 1 / Month 9			Year 1 / Month 10			Year 1 / Month 11			Year 1 / Month 12			
Line #	SDMO Activity (Offshore)	SOW Ref	Estimated Hours Month 7	Other Costs Month 7	Total Cost Month 7	Estimated Hours Month 8	Other Costs Month 8	Total Cost Month 8	Estimated Hours Month 9	Other Costs Month 9	Total Cost Month 9	Estimated Hours Month 10	Other Costs Month 10	Total Cost Month 10	Estimated Hours Month 11	Other Costs Month 11	Total Cost Month 11	Estimated Hours Month 12	Other Costs Month 12	Total Cost Month 12	Total Offshore Cost Year 1
1	Project Management Requirements	3																			
2	Project Management	3.1	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	\$0.00
3	Schedule Management	3.2	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	\$0.00
4	Cost/Cost Estimating Management	3.3	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	\$0.00
5	Human Resource Management	3.4	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	\$0.00
6	Risk and Issue Management	3.5																			
7	Communication Management	3.6																			
8	Document Management	3.7	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	\$0.00
9	SOW Requirements Management	3.8	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	\$0.00
10	Problem Escalation	3.9																			
11	Quality Management	3.10																			
12	Contract Management	3.11	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	\$0.00
13	CalHEERS Proj Enterprise Tools	3.12	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	\$0.00
14	CalHEERS Project Processes	3.13	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	\$0.00
15	CalHEERS Project Training	3.14																			
16	Strategic Planning and Management	3.15	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	\$0.00
17	Policy & Legis Impact Analysis & Change Sup	3.16	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	\$0.00
18	Audit Evaluation and Findings Services	3.17	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	\$0.00
19	System Change & Enhancement Rqmts	4																			
20	System/Software Development Lifecycle (SDLC)	4.1																			
21	Change Management and Configuration Management (System)	4.2																			
22	Change/Refresh/Upgrade	4.3																			
23	Code Development	4.4																			
24	System Requirements Management	4.5	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	\$0.00
25	Release Management	4.6	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	\$0.00
26	Organization & Business Change Management	4.7	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	\$0.00
27	Testing	4.8																			
28	Defect Management	4.9																			
29	Program Support Rqmts	5																			
30	Program Support Services	5.1	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	\$0.00
31	Consumer Experience Services	5.2	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	\$0.00
32	ROP Batch Services	5.3	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	\$0.00
33	BOT Services	5.4	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	\$0.00
34	Small Change Notices Services	5.5	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	\$0.00
35	Salesforce Application Maintenance Services	5.6	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	\$0.00
36	IDP Services	5.7	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	\$0.00
37	Application Maintenance Services	5.8	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	\$0.00
38	Usability Research Services	5.9	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	\$0.00
39	eHIT Services	5.10	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	\$0.00
40	Fed Reg Analysis and Imp Services	5.11	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	\$0.00
41	State Reg Analysis and Impl Services	5.12	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	\$0.00
42	Data & Analytics Support Services	5.13	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	\$0.00
43	Print Mail Center Support	5.14	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	\$0.00
44	General Innovations	5.15	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	\$0.00
45	Data Usage & Analytics Innovations	5.16	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	\$0.00
46	Consumer Journey & Exp Innovations	5.17	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	\$0.00
47	Artificial Intelligence Innovations	5.18	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	\$0.00
48	Organizational Innovations	5.19	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	\$0.00
49	Security Innovations	5.20	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	\$0.00

D-5.5: SDMO Fixed Price Offshore (Year 1) Costs																					
1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20	21	22
				Year 1 / Month 1			Year 1 / Month 2			Year 1 / Month 3			Year 1 / Month 4			Year 1 / Month 5			Year 1 / Month 6		
Line #	SDMO Activity (Offshore)	SOW Ref	Bidder Offshore Blended Rate Year 1	Estimated Hours Month 1	Other Costs Month 1	Total Cost Month 1	Estimated Hours Month 2	Other Costs Month 2	Total Cost Month 2	Estimated Hours Month 3	Other Costs Month 3	Total Cost Month 3	Estimated Hours Month 4	Other Costs Month 4	Total Cost Month 4	Estimated Hours Month 5	Other Costs Month 5	Total Cost Month 5	Estimated Hours Month 6	Other Costs Month 6	Total Cost Month 6
50	Operation Requirements	6																			
51	Operations Planning and Management	6.1	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00
52	Operations Manual	6.2	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00
53	Operations Reporting, Data, And Analytics	6.3	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00
54	Operations Maintenance	6.4	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00
55	Interface Support	6.5	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00
56	Technology Refresh	6.6	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00
57	System Security	6.7	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00
58	Data Retention, Backup and Recovery	6.8	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00
59	Data Management	6.9	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00
60	Technology Recovery	6.10	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00
61	Business Continuity	6.11	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00
62	System Environments	6.12	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00
63	System Performance	6.13	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00
64	System Hardware/Cloud Services/Software	6.14	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00
65	Problem Management	6.15	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00
66	Help Desk Services	6.16	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00
67	Hosting Services	6.17	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00
68	Project Support Services	6.18				\$0.00			\$0.00			\$0.00			\$0.00			\$0.00			\$0.00
69	Service Center Services	6.19	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00
70	Website Management	6.20	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00
71	Total SDMO Fixed Price Offshore (Year 1) Cost			0.0	0.0	\$0.00	0.0	0.0	\$0.00	0.0	0.0	\$0.00	0.0	0.0	\$0.00	0.0	0.0	\$0.00	0.0	0.0	\$0.00

D-5.5: SDMO Fixed Price Offshore (Year 1) Costs																					
1	2	3	23	24	25	26	27	28	29	30	31	32	33	34	35	36	37	38	39	40	41
			Year 1 / Month 7			Year 1 / Month 8			Year 1 / Month 9			Year 1 / Month 10			Year 1 / Month 11			Year 1 / Month 12			
Line #	SDMO Activity (Offshore)	SOW Ref	Estimated Hours Month 7	Other Costs Month 7	Total Cost Month 7	Estimated Hours Month 8	Other Costs Month 8	Total Cost Month 8	Estimated Hours Month 9	Other Costs Month 9	Total Cost Month 9	Estimated Hours Month 10	Other Costs Month 10	Total Cost Month 10	Estimated Hours Month 11	Other Costs Month 11	Total Cost Month 11	Estimated Hours Month 12	Other Costs Month 12	Total Cost Month 12	Total Offshore Cost Year 1
50	Operation Requirements	6																			
51	Operations Planning and Management	6.1	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	\$0.00
52	Operations Manual	6.2	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	\$0.00
53	Operations Reporting, Data, And Analytics	6.3	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	\$0.00
54	Operations Maintenance	6.4	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	\$0.00
55	Interface Support	6.5	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	\$0.00
56	Technology Refresh	6.6	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	\$0.00
57	System Security	6.7	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	\$0.00
58	Data Retention, Backup and Recovery	6.8	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	\$0.00
59	Data Management	6.9	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	\$0.00
60	Technology Recovery	6.10	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	\$0.00
61	Business Continuity	6.11	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	\$0.00
62	System Environments	6.12	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	\$0.00
63	System Performance	6.13	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	\$0.00
64	System Hardware/Cloud Services/Software	6.14	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	\$0.00
65	Problem Management	6.15	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	\$0.00
66	Help Desk Services	6.16	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	\$0.00
67	Hosting Services	6.17	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	\$0.00
68	Project Support Services	6.18			\$0.00			\$0.00			\$0.00			\$0.00			\$0.00			\$0.00	\$0.00
69	Service Center Services	6.19	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	\$0.00
70	Website Management	6.20	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	\$0.00
71	Total SDMO Fixed Price Offshore (Year 1) Cost		0.0	0.0	\$0.00	0.0	0.0	\$0.00	0.0	0.0	\$0.00	0.0	0.0	\$0.00	0.0	0.0	\$0.00	0.0	0.0	\$0.00	\$0.00

<Vendor Name>

D-5.6 Project Support Services - Detailed Cost Breakdown Instructions

The Purpose of the Project Support Services Tabs (D-5.6 & D-5.7) is to provide the State with a detailed cost breakdown of the bidder's Offshore Project Support Services costs for CalHEERS.

Tab "(D-5.6) SDMO F.P. Offshore-PSS" Cost Breakdown Instructions:

This tab correlates with **Appendix D-5.4 SDMO Fixed Price Offshore**

Column 2, SOW Subsection = Identifies the subsections within SOW Section 6.18 (provided to the bidder).

Column 3, SOW Section 6.18 - Project Support Services (Offshore) = Provides a breakout of certain Project Support Services activities the State requires additional cost details for.

Column 4, Estimated Annual Hours Year 1 = No entry needed. The State has provided formulas to transfer the bidder identified effort from tab (D-5.7) SDMO F.P. Off-PSS(Yr 1) into this sheet.

Columns 9, 14, 19, 24, 29, 34, 39, 44, 49 Estimated Annual Hours Year X = The bidder is required to provide the estimated annual hours for the Offshore Project Support Services activities from the SOW Section 6.18. The bidder is expected to meet all the Contract requirements within these hours.

Columns 5, Offshore PSS Rates Year 1 = No entry needed. The State has provided formulas to transfer this data from tab (D-5.7) SDMO F.P. Off-PSS(Yr 1) into tab (D-5.6) SDMO F.P. Offshore-PSS.

Columns 10, 15, 20, 25, 30, 35, 40, 45, 50 Offshore PSS Rates Year X = Bidders are required to provide a yearly Offshore Hourly Rate for each Offshore Project Support Services activity.

Columns 6, 11, 16, 21, 26, 31, 36, 41, 46, 51 Total Staffing Cost Year X = No entry needed. The Total Annual Cost will be calculated for each within each year, the bidder provided Offshore Hourly Rate will be multiplied by the bidder identified Estimated Annual Hours Year X, to determine the annual Total Staffing Cost for each activity.

Column 7, Other Costs Year 1 = No entry needed. The State has provided a formula to transfer the bidder identified other costs from the (D-5.7) SDMO F.P. Off-PSS(Yr 1) tab.

Column 12, 17, 22, 27, 32, 37, 42, 47, 52 Other Costs Year X = The bidder is required to provide the Other Costs for contract years 2-8. Offshore costs included in these columns are specific to other non-staffing components of cost associated with the activity, including subcontracts, bid as part of the SDMO Fixed Price. Any costs identified as Other require bidders to provide supplemental cost details to include a basis of estimation, the number of units, and per unit rate. Note that all Hardware and all Software used by the Prime Vendor should not be included in this worksheet, but in Appendix D-2, SDMO Hardware Costs or Appendix D-3, SDMO Software costs.

Columns 8, 13, 18, 23, 28, 33, 38, 43, 48, 53 Total Annual Cost Year X = No entry needed. The Total Annual Cost will be calculated for each activity, by year, by adding the Total Staffing Cost and Other Cost.

Column 54, Total PSS Offshore Activity Cost = No entry needed. The Total Project Support Services activity Cost is the sum of Total Annual Costs for the PSS activity for Years 1 through 10.

Total Project Support Services (Offshore) Cost - No entry required. The State has provided a formula to SUM all Total Offshore PSS Activity Costs.

The State has provided formulas to transfer the Total Staffing Cost, Other Cost, and Total Annual Cost data (by Year) from tab (D-5.6) SDMO F.P. Offshore-PSS, into line #68 of the associated year within tab (D-5.4) SDMO Fixed Price Offshore.

Tab "(D-5.7) SDMO F.P. Off-PSS(Year 1)" Cost Breakdown Instructions:

This tab correlates with **Appendix D-5.5 SDMO F.P. Offshore(Yr 1)**

All Key Staff (and applicable support staff), except for the Transition Manager, and all Deliverables (except those identified by the State as Transition-In or Transition-Out Milestones) are to be costed under the D-5, Fixed Price Onshore/Offshore series of worksheets. The Transition Manager (and applicable Non-Key Staff) and the Transition-In and Transition-Out Milestone related Deliverables are to be costed under Appendix D-8, Transition-In Costs, and Appendix D-8.2, Transition-Out Costs.

Column 2, SOW Subsection = Identifies the subsections within SOW Section 6.18 (provided to the bidder).

Column 3, SOW Section 6.18 - Project Support Services (Onshore - Year 1) = Provides a breakout of certain Project Support Services activities the State requires additional cost details for.

Column 4, Bidder Offshore PSS Rates (Year 1) [highlighted Blue] = Bidders are required to provide an onshore hourly rate for each Project Support Services activity. The rate provided for each activity will be multiplied by the bidder identified Estimated Hours Month X, from the associated activity, to determine the monthly and annual staffing cost for each Project Support Services activities within (Year 1).

Column 5, 8, 11, 14, 17, 20, 23, 26, 29, 32, 35, 38, Estimated Hours Month X = Bidders are to enter the estimated onshore effort (in total hours) related to each Project Support Services activity in each month of Year 1. Please note the following:

- 1) The bidder takes full responsibility for all aspects of the Project Support Services activity within the first month where the bidder identifies effort in (D-5.5).
- 2) The effort entered within (D-5.7) must align with the bidder's plan for Transition-In.
- 3) The bidder is expected to meet all the Contract requirements within the hours identified. Any additional hours needed to perform these activities must be provided to the State at no cost.

Column 6, 9, 12, 15, 18, 21, 24, 27, 30, 33, 36, 39, Other Costs Year 1/Month X = The bidder is required to provide the Other Costs for Year 1/Month X. Onshore costs included in these columns are specific to other non-staffing components of cost associated with the activity, including subcontracts, bid as part of the SDMO Fixed Price. Any costs identified as Other require bidders to provide supplemental cost details to include a basis of estimation, the number of units, and per unit rate. Note that all Hardware and all Software used by the Prime Vendor should not be included in this worksheet, but in Appendix D-2, SDMO Hardware Costs or Appendix D-3, SDMO Software Costs.

Columns 7, 10, 13, 16, 19, 22, 25, 28, 31, 34, 37, 40, Total Cost Month X = No entry needed. The State has provided a formula to multiply the Bidder Offshore PSS Rates Year 1 by the bidder estimated hours for each Project Support Service activity, for Year 1/Month X, then adds any bidder identified costs in the Other Costs Month X column, resulting in the total cost for each Project Support Service activity within Year 1/Month X.

Column 41, Total Offshore Cost Year 1 = No entry needed, The State has provided formulas to collect the monthly cost totals by Project Support Service activity.

Total Project Support Services (Offshore - Year 1) Cost - No entry needed. The State has provided SUM formulas to provide both monthly effort and cost subtotals.

The State has provided formulas to transfer the Total Cost data (by Month) from tab (D-5.7) SDMO F.P. Off-PSS(Yr 1), into line #68 of the associated month within tab (D-5.5) SDMO F.P. Offshore(Yr 1).

<Vendor Name>

Project Support Services - D-5.4 SDMO F.P. Offshore-PSS Costs																	
1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18
			Cost for Contract Year 1					Cost for Contract Year 2					Cost for Contract Year 3				
Line #	SOW Subsection	SOW Section 6.18 - Project Support Services (Offshore)	Estimated Annual Hours Year 1	Offshore PSS Rates Year 1	Total Staffing Cost Year 1	Other Cost Year 1	Total Annual Cost Year 1	Estimated Annual Hours Year 2	Offshore PSS Rates Year 2	Total Staffing Cost Year 2	Other Cost Year 2	Total Annual Cost Year 2	Estimated Annual Hours Year 3	Offshore PSS Rates Year 3	Total Staffing Cost Year 3	Other Cost Year 3	Total Annual Cost Year 3
1	6.18.1	Project Worksite Maintenance Plan															
2		Project Worksite Maintenance Plan Cost	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00
3	6.18.2	Project Worksite Maintenance Execution															
4		Primary Project Worksite - Rent Cost	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00
5		Primary Project Worksite - Utilities Costs	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00
6		Primary Project Worksite - Leasehold Improvements Costs	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00
7		Primary Project Worksite - Insurance Costs	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00
8		Primary Project Worksite - Janitorial Services Costs	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00
9		Primary Project Worksite - Lighting Maintenance Costs	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00
10		Primary Project Worksite - Window Cleaning Costs	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00
11		Primary Project Worksite - Fire Extinguisher Checks Costs	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00
12		Primary Project Worksite - Telephone System (including Communication Lines and Service Providers) Costs	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00
13		Primary Project Worksite - LAN/WAN & Connectivity Costs	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00
14		Primary Project Worksite - Secured Wireless and Remote Access Costs	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00
15		Primary Project Worksite - Office Equipment Installation and Maintenance Costs	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00
16		Primary Project Worksite - HVAC Services and Maintenance Costs	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00
17		Primary Project Worksite - Plumbing Maintenance Costs	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00
18		Primary Project Worksite - Security Cameras and Patrol Services Costs	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00
19		Primary Project Worksite - All Other Project Worksite Requirements Costs	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00
20	6.18.3	Office Setup & Maintenance Execution															
21		Primary Project Worksite - Furniture Install & Maintenance Costs	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00
22		Primary Project Worksite - Purchase/lease/rental, Installation & maintenance Costs, including: a. Printers b. Scanners c. Fax Machines d. High speed network scanning/printing machines	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00
23		Primary Project Worksite - Laptops w/ Current software Costs	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00
24		Primary Project Worksite - All Other Office Setup & Maintenance Costs	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00
25	6.18.4	Building Maintenance & Support Execution															
26		Primary Project Worksite - Security Patrol Services Costs	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00
27		Primary Project Worksite - Security System & Cameras Costs	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00
28		Primary Project Worksite - Confidential Destruction Services Costs	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00
29		Primary Project Worksite - Cleaning Maintenance Services Costs	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00
30		Primary Project Worksite - Garbage and Recycling Services Costs	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00
31		Primary Project Worksite - Mail Delivery Services Costs	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00
32		Primary Project Worksite - All Other Building Maintenance & Support Costs	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00
33	6.18.5	CalHEERS Business Support Services															
34		Primary Project Worksite - Security Badges & Badge Management Services Costs	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00
35		Primary Project Worksite - Daily Support Tasks Costs	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00
36		Primary Project Worksite - Daily Cleaning/Maintenance Services Costs	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00
37		Primary Project Worksite - Office Supply Services Costs	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00
38		Primary Project Worksite - Asset Management & Inventory Services Costs	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00
39		Primary Project Worksite - Emergency Evacuation Planning Participation Costs	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00
40		Primary Project Worksite - All Other CalHEERS Business Support Services Costs	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00
41	6.18.6	Facility Asset Inventory Reports															
42		Facility Asset Inventory Reports	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00
43		Total Project Support Services (Offshore) Cost	0.0		\$0.00	\$0.00	\$0.00	0.0		\$0.00	\$0.00	\$0.00	0.0		\$0.00	\$0.00	\$0.00

<Vendor Name>

Project Support Services - D-5.4 SDMO F.P. Offshore-PSS Costs			19	20	21	22	23	24	25	26	27	28	29	30	31	32	33	34	35	36	37
1	2	3	Cost for Contract Year 4					Cost for Contract Year 5					Cost for Contract Year 6					Cost for Contract Year 7			
Line #	SOW Subsection	SOW Section 6.18 - Project Support Services (Offshore)	Estimated Annual Hours Year 4	Offshore PSS Rates Year 4	Total Staffing Cost Year 4	Other Cost Year 4	Total Annual Cost Year 4	Estimated Annual Hours Year 5	Offshore PSS Rates Year 5	Total Staffing Cost Year 5	Other Cost Year 5	Total Annual Cost Year 5	Estimated Annual Hours Year 6	Offshore PSS Rates Year 6	Total Staffing Cost Year 6	Other Cost Year 6	Total Annual Cost Year 6	Estimated Annual Hours Year 7	Offshore PSS Rates Year 7	Total Staffing Cost Year 7	Other Cost Year 7
1	6.18.1	Project Worksite Maintenance Plan																			
2		Project Worksite Maintenance Plan Cost	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00
3	6.18.2	Project Worksite Maintenance Execution																			
4		Primary Project Worksite - Rent Cost	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00
5		Primary Project Worksite - Utilities Costs	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00
6		Primary Project Worksite - Leasehold Improvements Costs	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00
7		Primary Project Worksite - Insurance Costs	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00
8		Primary Project Worksite - Janitorial Services Costs	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00
9		Primary Project Worksite - Lighting Maintenance Costs	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00
10		Primary Project Worksite - Window Cleaning Costs	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00
11		Primary Project Worksite - Fire Extinguisher Checks Costs	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00
12		Primary Project Worksite - Telephone System (including Communication Lines and Service Providers) Costs	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00
13		Primary Project Worksite - LAN/WAN & Connectivity Costs	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00
14		Primary Project Worksite - Secured Wireless and Remote Access Costs	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00
15		Primary Project Worksite - Office Equipment Installation and Maintenance Costs	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00
16		Primary Project Worksite - HVAC Services and Maintenance Costs	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00
17		Primary Project Worksite - Plumbing Maintenance Costs	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00
18		Primary Project Worksite - Security Cameras and Patrol Services Costs	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00
19		Primary Project Worksite - All Other Project Worksite Requirements Costs	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00
20	6.18.3	Office Setup & Maintenance Execution																			
21		Primary Project Worksite - Furniture Install & Maintenance Costs	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00
22		Primary Project Worksite - Purchase/lease/rental, Installation & maintenance Costs, including: a. Printers b. Scanners c. Fax Machines d. High speed network scanning/printing machines	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00
23		Primary Project Worksite - Laptops w/ Current software Costs	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00
24		Primary Project Worksite - All Other Office Setup & Maintenance Costs	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00
25	6.18.4	Building Maintenance & Support Execution																			
26		Primary Project Worksite - Security Patrol Services Costs	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00
27		Primary Project Worksite - Security System & Cameras Costs	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00
28		Primary Project Worksite - Confidential Destruction Services Costs	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00
29		Primary Project Worksite - Cleaning Maintenance Services Costs	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00
30		Primary Project Worksite - Garbage and Recycling Services Costs	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00
31		Primary Project Worksite - Mail Delivery Services Costs	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00
32		Primary Project Worksite - All Other Building Maintenance & Support Costs	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00
33	6.18.5	CalHEERS Business Support Services																			
34		Primary Project Worksite - Security Badges & Badge Management Services Costs	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00
35		Primary Project Worksite - Daily Support Tasks Costs	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00
36		Primary Project Worksite - Daily Cleaning/Maintenance Services Costs	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00
37		Primary Project Worksite - Office Supply Services Costs	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00
38		Primary Project Worksite - Asset Management & Inventory Services Costs	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00
39		Primary Project Worksite - Emergency Evacuation Planning Participation Costs	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00
40		Primary Project Worksite - All Other CalHEERS Business Support Services Costs	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00
41	6.18.6	Facility Asset Inventory Reports																			
42		Facility Asset Inventory Reports	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00
43		Total Project Support Services (Offshore) Cost	0.0		\$0.00	\$0.00	\$0.00	0.0		\$0.00	\$0.00	\$0.00	0.0		\$0.00	\$0.00	\$0.00	0.0		\$0.00	\$0.00

<Vendor Name>

Project Support Services - D-5.4 SDMO F.P. Offshore-PSS Costs			
1	2	3	38
Line #	SOW Subsection	SOW Section 6.18 - Project Support Services (Offshore)	Total Annual Cost Year 7
1	6.18.1	Project Worksite Maintenance Plan	
2		Project Worksite Maintenance Plan Cost	\$0.00
3	6.18.2	Project Worksite Maintenance Execution	
4		Primary Project Worksite - Rent Cost	\$0.00
5		Primary Project Worksite - Utilities Costs	\$0.00
6		Primary Project Worksite - Leasehold Improvements Costs	\$0.00
7		Primary Project Worksite - Insurance Costs	\$0.00
8		Primary Project Worksite - Janitorial Services Costs	\$0.00
9		Primary Project Worksite - Lighting Maintenance Costs	\$0.00
10		Primary Project Worksite - Window Cleaning Costs	\$0.00
11		Primary Project Worksite - Fire Extinguisher Checks Costs	\$0.00
12		Primary Project Worksite - Telephone System (including Communication Lines and Service Providers) Costs	\$0.00
13		Primary Project Worksite - LAN/WAN & Connectivity Costs	\$0.00
14		Primary Project Worksite - Secured Wireless and Remote Access Costs	\$0.00
15		Primary Project Worksite - Office Equipment Installation and Maintenance Costs	\$0.00
16		Primary Project Worksite - HVAC Services and Maintenance Costs	\$0.00
17		Primary Project Worksite - Plumbing Maintenance Costs	\$0.00
18		Primary Project Worksite - Security Cameras and Patrol Services Costs	\$0.00
19		Primary Project Worksite - All Other Project Worksite Requirements Costs	\$0.00
20	6.18.3	Office Setup & Maintenance Execution	
21		Primary Project Worksite - Furniture Install & Maintenance Costs	\$0.00
22		Primary Project Worksite - Purchase/lease/rental, Installation & maintenance Costs, including: a. Printers b. Scanners c. Fax Machines d. High speed network scanning/printing machines	\$0.00
23		Primary Project Worksite - Laptops w/ Current software Costs	\$0.00
24		Primary Project Worksite - All Other Office Setup & Maintenance Costs	\$0.00
25	6.18.4	Building Maintenance & Support Execution	
26		Primary Project Worksite - Security Patrol Services Costs	\$0.00
27		Primary Project Worksite - Security System & Cameras Costs	\$0.00
28		Primary Project Worksite - Confidential Destruction Services Costs	\$0.00
29		Primary Project Worksite - Cleaning Maintenance Services Costs	\$0.00
30		Primary Project Worksite - Garbage and Recycling Services Costs	\$0.00
31		Primary Project Worksite - Mail Delivery Services Costs	\$0.00
32		Primary Project Worksite - All Other Building Maintenance & Support Costs	\$0.00
33	6.18.5	CalHEERS Business Support Services	
34		Primary Project Worksite - Security Badges & Badge Management Services Costs	\$0.00
35		Primary Project Worksite - Daily Support Tasks Costs	\$0.00
36		Primary Project Worksite - Daily Cleaning/Maintenance Services Costs	\$0.00
37		Primary Project Worksite - Office Supply Services Costs	\$0.00
38		Primary Project Worksite - Asset Management & Inventory Services Costs	\$0.00
39		Primary Project Worksite - Emergency Evacuation Planning Participation Costs	\$0.00
40		Primary Project Worksite - All Other CalHEERS Business Support Services Costs	\$0.00
41	6.18.6	Facility Asset Inventory Reports	
42		Facility Asset Inventory Reports	\$0.00
43		Total Project Support Services (Offshore) Cost	\$0.00

<Vendor Name>

Project Support Services - D-5.4 SDMO F.P. Offshore-PSS Costs																		
1	2	3	39	40	41	42	43	44	45	46	47	48	49	50	51	52	53	54
			Cost for Contract Year 8					Cost for Contract Year 9					Cost for Contract Year 10					
Line #	SOW Subsection	SOW Section 6.18 - Project Support Services (Offshore)	Estimated Annual Hours Year 8	Offshore PSS Rates Year 8	Total Staffing Cost Year 8	Other Cost Year 8	Total Annual Cost Year 8	Estimated Annual Hours Year 9	Offshore PSS Rates Year 9	Total Staffing Cost Year 9	Other Cost Year 9	Total Annual Cost Year 9	Estimated Annual Hours Year 10	Offshore PSS Rates Year 10	Total Staffing Cost Year 10	Other Cost Year 10	Total Annual Cost Year 10	Total PSS Offshore Activity Cost
1	6.18.1	Project Worksite Maintenance Plan																
2		Project Worksite Maintenance Plan Cost	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
3	6.18.2	Project Worksite Maintenance Execution																
4		Primary Project Worksite - Rent Cost	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
5		Primary Project Worksite - Utilities Costs	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
6		Primary Project Worksite - Leasehold Improvements Costs	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
7		Primary Project Worksite - Insurance Costs	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
8		Primary Project Worksite - Janitorial Services Costs	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
9		Primary Project Worksite - Lighting Maintenance Costs	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
10		Primary Project Worksite - Window Cleaning Costs	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
11		Primary Project Worksite - Fire Extinguisher Checks Costs	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
12		Primary Project Worksite - Telephone System (including Communication Lines and Service Providers) Costs	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
13		Primary Project Worksite - LAN/WAN & Connectivity Costs	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
14		Primary Project Worksite - Secured Wireless and Remote Access Costs	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
15		Primary Project Worksite - Office Equipment Installation and Maintenance Costs	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
16		Primary Project Worksite - HVAC Services and Maintenance Costs	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
17		Primary Project Worksite - Plumbing Maintenance Costs	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
18		Primary Project Worksite - Security Cameras and Patrol Services Costs	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
19		Primary Project Worksite - All Other Project Worksite Requirements Costs	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
20	6.18.3	Office Setup & Maintenance Execution																
21		Primary Project Worksite - Furniture Install & Maintenance Costs	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
22		Primary Project Worksite - Purchase/lease/rental, Installation & maintenance Costs, including: a. Printers b. Scanners c. Fax Machines d. High speed network scanning/printing machines	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
23		Primary Project Worksite - Laptops w/ Current software Costs	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
24		Primary Project Worksite - All Other Office Setup & Maintenance Costs	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
25	6.18.4	Building Maintenance & Support Execution																
26		Primary Project Worksite - Security Patrol Services Costs	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
27		Primary Project Worksite - Security System & Cameras Costs	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
28		Primary Project Worksite - Confidential Destruction Services Costs	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
29		Primary Project Worksite - Cleaning Maintenance Services Costs	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
30		Primary Project Worksite - Garbage and Recycling Services Costs	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
31		Primary Project Worksite - Mail Delivery Services Costs	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
32		Primary Project Worksite - All Other Building Maintenance & Support Costs	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
33	6.18.5	CalHEERS Business Support Services																
34		Primary Project Worksite - Security Badges & Badge Management Services Costs	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
35		Primary Project Worksite - Daily Support Tasks Costs	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
36		Primary Project Worksite - Daily Cleaning/Maintenance Services Costs	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
37		Primary Project Worksite - Office Supply Services Costs	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
38		Primary Project Worksite - Asset Management & Inventory Services Costs	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
39		Primary Project Worksite - Emergency Evacuation Planning Participation Costs	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
40		Primary Project Worksite - All Other CalHEERS Business Support Services Costs	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
41	6.18.6	Facility Asset Inventory Reports																
42		Facility Asset Inventory Reports	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	0.0	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
43		Total Project Support Services (Offshore) Cost	0.0		\$0.00	\$0.00	\$0.00	0.0		\$0.00	\$0.00	\$0.00	0.0		\$0.00	\$0.00	\$0.00	\$0.00

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Project Support Services - D-5.7 SDMO F.P. Offshore-PSS (Year 1) Costs																		
1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19
				Year 1 / Month 1			Year 1 / Month 2			Year 1 / Month 3			Year 1 / Month 4			Year 1 / Month 5		
Line #	SOW Subsection	SOW Section 6.18 - Project Support Services (Offshore - Year 1)	Bidder Offshore PSS Rates (Year 1)	Estimated Hours Month 1	Other Cost Month 1	Total Cost Month 1	Estimated Hours Month 2	Other Cost Month 2	Total Cost Month 2	Estimated Hours Month 3	Other Cost Month 3	Total Cost Month 3	Estimated Hours Month 4	Other Cost Month 4	Total Cost Month 4	Estimated Hours Month 5	Other Cost Month 5	Total Cost Month 5
1	6.18.1	Project Worksite Maintenance Plan																
2		Project Worksite Maintenance Plan Cost	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00
3	6.18.2	Project Worksite Execution																
4		Primary Project Worksite - Rent Cost	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00
5		Primary Project Worksite - Utilities Costs	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00
6		Primary Project Worksite - Leasehold Improvements Costs	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00
7		Primary Project Worksite - Insurance Costs	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00
8		Primary Project Worksite - Janitorial Services Costs	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00
9		Primary Project Worksite - Lighting Maintenance Costs	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00
10		Primary Project Worksite - Window Cleaning Costs	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00
11		Primary Project Worksite - Fire Extinguisher Checks Costs	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00
12		Primary Project Worksite - Telephone System (including Communication Lines and Service Providers) Costs	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00
13		Primary Project Worksite - LAN/WAN & Connectivity Costs	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00
14		Primary Project Worksite - Secured Wireless and Remote Access Costs	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00
15		Primary Project Worksite - Office Equipment Installation and Maintenance Costs	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00
16		Primary Project Worksite - HVAC Services and Maintenance Costs	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00
17		Primary Project Worksite - Plumbing Maintenance Costs	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00
18		Primary Project Worksite - Security Cameras and Patrol Services Costs	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00
19		Primary Project Worksite - All Other Project Worksite Requirements Costs	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00
20	6.18.3	Office Setup & Maintenance Execution																
21		Primary Project Worksite - Furniture Install & Maintenance Costs	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00
22		Primary Project Worksite - Purchase/lease/rental, Installation & maintenance Costs, including: a. Printers b. Scanners c. Fax Machines d. High speed network scanning/printing machines	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00
23		Primary Project Worksite - Laptops w/ Current software Costs	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00
24		Primary Project Worksite - All Other Office Setup & Maintenance Costs	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00

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Project Support Services - D-5.7 SDMO F.P. Offshore-PSS (Year 1) Costs																			
1	2	3	20	21	22	23	24	25	26	27	28	29	30	31	32	33	34	35	36
			Year 1 / Month 6			Year 1 / Month 7			Year 1 / Month 8			Year 1 / Month 9			Year 1 / Month 10			Year 1 / Month	
Line #	SOW Subsection	SOW Section 6.18 - Project Support Services (Offshore - Year 1)	Estimated Hours Month 6	Other Cost Month 6	Total Cost Month 6	Estimated Hours Month 7	Other Cost Month 7	Total Cost Month 7	Estimated Hours Month 8	Other Cost Month 8	Total Cost Month 8	Estimated Hours Month 9	Other Cost Month 9	Total Cost Month 9	Estimated Hours Month 10	Other Cost Month 10	Total Cost Month 10	Estimated Hours Month 11	Other Cost Month 11
1	6.18.1	Project Worksite Maintenance Plan																	
2		Project Worksite Maintenance Plan Cost	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00
3	6.18.2	Project Worksite Execution																	
4		Primary Project Worksite - Rent Cost	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00
5		Primary Project Worksite - Utilities Costs	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00
6		Primary Project Worksite - Leasehold Improvements Costs	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00
7		Primary Project Worksite - Insurance Costs	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00
8		Primary Project Worksite - Janitorial Services Costs	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00
9		Primary Project Worksite - Lighting Maintenance Costs	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00
10		Primary Project Worksite - Window Cleaning Costs	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00
11		Primary Project Worksite - Fire Extinguisher Checks Costs	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00
12		Primary Project Worksite - Telephone System (including Communication Lines and Service Providers) Costs	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00
13		Primary Project Worksite - LAN/WAN & Connectivity Costs	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00
14		Primary Project Worksite - Secured Wireless and Remote Access Costs	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00
15		Primary Project Worksite - Office Equipment Installation and Maintenance Costs	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00
16		Primary Project Worksite - HVAC Services and Maintenance Costs	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00
17		Primary Project Worksite - Plumbing Maintenance Costs	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00
18		Primary Project Worksite - Security Cameras and Patrol Services Costs	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00
19		Primary Project Worksite - All Other Project Worksite Requirements Costs	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00
20	6.18.3	Office Setup & Maintenance Execution																	
21		Primary Project Worksite - Furniture Install & Maintenance Costs	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00
22		Primary Project Worksite - Purchase/lease/rental, Installation & maintenance Costs, including: a. Printers b. Scanners c. Fax Machines d. High speed network scanning/printing machines	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00
23		Primary Project Worksite - Laptops w/ Current software Costs	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00
24		Primary Project Worksite - All Other Office Setup & Maintenance Costs	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00

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Project Support Services - D-5.7 SDMO F.P. Offshore-PSS (Year 1) Costs							
1	2	3	37	38	39	40	41
			11	Year 1 / Month 12			
Line #	SOW Subsection	SOW Section 6.18 - Project Support Services (Offshore - Year 1)	Total Cost Month 11	Estimated Hours Month 12	Other Cost Month 12	Total Cost Month 12	Total Offshore Cost Year 1
1	6.18.1	Project Worksite Maintenance Plan					
2		Project Worksite Maintenance Plan Cost	\$0.00	0	\$0.00	\$0.00	\$0.00
3	6.18.2	Project Worksite Execution					
4		Primary Project Worksite - Rent Cost	\$0.00	0	\$0.00	\$0.00	\$0.00
5		Primary Project Worksite - Utilities Costs	\$0.00	0	\$0.00	\$0.00	\$0.00
6		Primary Project Worksite - Leasehold Improvements Costs	\$0.00	0	\$0.00	\$0.00	\$0.00
7		Primary Project Worksite - Insurance Costs	\$0.00	0	\$0.00	\$0.00	\$0.00
8		Primary Project Worksite - Janitorial Services Costs	\$0.00	0	\$0.00	\$0.00	\$0.00
9		Primary Project Worksite - Lighting Maintenance Costs	\$0.00	0	\$0.00	\$0.00	\$0.00
10		Primary Project Worksite - Window Cleaning Costs	\$0.00	0	\$0.00	\$0.00	\$0.00
11		Primary Project Worksite - Fire Extinguisher Checks Costs	\$0.00	0	\$0.00	\$0.00	\$0.00
12		Primary Project Worksite - Telephone System (including Communication Lines and Service Providers) Costs	\$0.00	0	\$0.00	\$0.00	\$0.00
13		Primary Project Worksite - LAN/WAN & Connectivity Costs	\$0.00	0	\$0.00	\$0.00	\$0.00
14		Primary Project Worksite - Secured Wireless and Remote Access Costs	\$0.00	0	\$0.00	\$0.00	\$0.00
15		Primary Project Worksite - Office Equipment Installation and Maintenance Costs	\$0.00	0	\$0.00	\$0.00	\$0.00
16		Primary Project Worksite - HVAC Services and Maintenance Costs	\$0.00	0	\$0.00	\$0.00	\$0.00
17		Primary Project Worksite - Plumbing Maintenance Costs	\$0.00	0	\$0.00	\$0.00	\$0.00
18		Primary Project Worksite - Security Cameras and Patrol Services Costs	\$0.00	0	\$0.00	\$0.00	\$0.00
19		Primary Project Worksite - All Other Project Worksite Requirements Costs	\$0.00	0	\$0.00	\$0.00	\$0.00
20	6.18.3	Office Setup & Maintenance Execution					
21		Primary Project Worksite - Furniture Install & Maintenance Costs	\$0.00	0	\$0.00	\$0.00	\$0.00
22		Primary Project Worksite - Purchase/lease/rental, Installation & maintenance Costs, including: a. Printers b. Scanners c. Fax Machines d. High speed network scanning/printing machines	\$0.00	0	\$0.00	\$0.00	\$0.00
23		Primary Project Worksite - Laptops w/ Current software Costs	\$0.00	0	\$0.00	\$0.00	\$0.00
24		Primary Project Worksite - All Other Office Setup & Maintenance Costs	\$0.00	0	\$0.00	\$0.00	\$0.00

Project Support Services - D-5.7 SDMO F.P. Offshore-PSS (Year 1) Costs																		
1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19
				Year 1 / Month 1			Year 1 / Month 2			Year 1 / Month 3			Year 1 / Month 4			Year 1 / Month 5		
Line #	SOW Subsection	SOW Section 6.18 - Project Support Services (Offshore - Year 1)	Bidder Offshore PSS Rates (Year 1)	Estimated Hours Month 1	Other Cost Month 1	Total Cost Month 1	Estimated Hours Month 2	Other Cost Month 2	Total Cost Month 2	Estimated Hours Month 3	Other Cost Month 3	Total Cost Month 3	Estimated Hours Month 4	Other Cost Month 4	Total Cost Month 4	Estimated Hours Month 5	Other Cost Month 5	Total Cost Month 5
25	6.18.4	Building Maintenance & Support																
26		Primary Project Worksite - Security Patrol Services Costs	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00
27		Primary Project Worksite - Security System & Cameras Costs	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00
28		Primary Project Worksite - Confidential Destruction Services Costs	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00
29		Primary Project Worksite - Cleaning Maintenance Services Costs	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00
30		Primary Project Worksite - Garbage and Recycling Services Costs	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00
31		Primary Project Worksite - Mail Delivery Services Costs	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00
32		Primary Project Worksite - All Other Building Maintenance & Support Costs	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00
33	6.18.5	CalHEERS Business Support Services																
34		Primary Project Worksite - Security Badges & Badge Management Services Costs	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00
35		Primary Project Worksite - Daily Support Tasks Costs	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00
36		Primary Project Worksite - Daily Cleaning/Maintenance Services Costs	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00
37		Primary Project Worksite - Office Supply Services Costs	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00
38		Primary Project Worksite - Asset Management & Inventory Services Costs	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00
39		Primary Project Worksite - Emergency Evacuation Planning Participation Costs	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00
40		Primary Project Worksite - All Other CalHEERS Business Support Services Costs	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00
41	6.18.6	Facility Asset Inventory Reports																
42		Facility Asset Inventory Reports	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00
43		Total Project Support Services (Offshore - Year 1) Cost		0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00

Project Support Services - D-5.7 SDMO F.P. Offshore-PSS (Year 1) Costs																			
1	2	3	20	21	22	23	24	25	26	27	28	29	30	31	32	33	34	35	36
			Year 1 / Month 6			Year 1 / Month 7			Year 1 / Month 8			Year 1 / Month 9			Year 1 / Month 10			Year 1 / Month 11	
Line #	SOW Subsection	SOW Section 6.18 - Project Support Services (Offshore - Year 1)	Estimated Hours Month 6	Other Cost Month 6	Total Cost Month 6	Estimated Hours Month 7	Other Cost Month 7	Total Cost Month 7	Estimated Hours Month 8	Other Cost Month 8	Total Cost Month 8	Estimated Hours Month 9	Other Cost Month 9	Total Cost Month 9	Estimated Hours Month 10	Other Cost Month 10	Total Cost Month 10	Estimated Hours Month 11	Other Cost Month 11
25	6.18.4	Building Maintenance & Support																	
26		Primary Project Worksite - Security Patrol Services Costs	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00
27		Primary Project Worksite - Security System & Cameras Costs	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00
28		Primary Project Worksite - Confidential Destruction Services Costs	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00
29		Primary Project Worksite - Cleaning Maintenance Services Costs	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00
30		Primary Project Worksite - Garbage and Recycling Services Costs	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00
31		Primary Project Worksite - Mail Delivery Services Costs	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00
32		Primary Project Worksite - All Other Building Maintenance & Support Costs	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00
33	6.18.5	CalHEERS Business Support Services																	
34		Primary Project Worksite - Security Badges & Badge Management Services Costs	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00
35		Primary Project Worksite - Daily Support Tasks Costs	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00
36		Primary Project Worksite - Daily Cleaning/Maintenance Services Costs	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00
37		Primary Project Worksite - Office Supply Services Costs	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00
38		Primary Project Worksite - Asset Management & Inventory Services Costs	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00
39		Primary Project Worksite - Emergency Evacuation Planning Participation Costs	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00
40		Primary Project Worksite - All Other CalHEERS Business Support Services Costs	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00
41	6.18.6	Facility Asset Inventory Reports																	
42		Facility Asset Inventory Reports	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00
43		Total Project Support Services (Offshore - Year 1) Cost	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00	0	\$0.00

Project Support Services - D-5.7 SDMO F.P. Offshore-PSS (Year 1) Costs							
1	2	3	37	38	39	40	41
			11	Year 1 / Month 12			
Line #	SOW Subsection	SOW Section 6.18 - Project Support Services (Offshore - Year 1)	Total Cost Month 11	Estimated Hours Month 12	Other Cost Month 12	Total Cost Month 12	Total Offshore Cost Year 1
25	6.18.4	Building Maintenance & Support					
26		Primary Project Worksite - Security Patrol Services Costs	\$0.00	0	\$0.00	\$0.00	\$0.00
27		Primary Project Worksite - Security System & Cameras Costs	\$0.00	0	\$0.00	\$0.00	\$0.00
28		Primary Project Worksite - Confidential Destruction Services Costs	\$0.00	0	\$0.00	\$0.00	\$0.00
29		Primary Project Worksite - Cleaning Maintenance Services Costs	\$0.00	0	\$0.00	\$0.00	\$0.00
30		Primary Project Worksite - Garbage and Recycling Services Costs	\$0.00	0	\$0.00	\$0.00	\$0.00
31		Primary Project Worksite - Mail Delivery Services Costs	\$0.00	0	\$0.00	\$0.00	\$0.00
32		Primary Project Worksite - All Other Building Maintenance & Support Costs	\$0.00	0	\$0.00	\$0.00	\$0.00
33	6.18.5	CalHEERS Business Support Services					
34		Primary Project Worksite - Security Badges & Badge Management Services Costs	\$0.00	0	\$0.00	\$0.00	\$0.00
35		Primary Project Worksite - Daily Support Tasks Costs	\$0.00	0	\$0.00	\$0.00	\$0.00
36		Primary Project Worksite - Daily Cleaning/Maintenance Services Costs	\$0.00	0	\$0.00	\$0.00	\$0.00
37		Primary Project Worksite - Office Supply Services Costs	\$0.00	0	\$0.00	\$0.00	\$0.00
38		Primary Project Worksite - Asset Management & Inventory Services Costs	\$0.00	0	\$0.00	\$0.00	\$0.00
39		Primary Project Worksite - Emergency Evacuation Planning Participation Costs	\$0.00	0	\$0.00	\$0.00	\$0.00
40		Primary Project Worksite - All Other CalHEERS Business Support Services Costs	\$0.00	0	\$0.00	\$0.00	\$0.00
41	6.18.6	Facility Asset Inventory Reports					
42		Facility Asset Inventory Reports	\$0.00	0	\$0.00	\$0.00	\$0.00
43		Total Project Support Services (Offshore - Year 1) Cost	\$0.00	0	\$0.00	\$0.00	\$0.00

<Vendor Name>
APPENDIX D-6, TRANSACTION-BASED COSTS

Appendix D-6, Transaction-Based Costs, is used to identify the Bidder’s cost for processing CalHEERS transactional activities on a per transaction basis.

Column 2, Transaction Type = The State has provided the Transactional Types that occur on the current contract.

Column 3, Unit (Per) = The State has defined the units associated with each Transaction.

Column 4, Average # of Units (Monthly) = The State has provided the average number of Units that are processed on a monthly basis for associated transaction types. The numbers presented are based on historical processing levels.

Column 5, Average # of Units (Annually) = The State has provided the average number of Units that are processed on an annual basis for associated transaction types. The numbers presented are based on historical processing levels, and are typically a one-time annual effort.

Column 6, Cost Per Unit = The Bidder must provide the cost per unit for each transaction type.

Column 7, Monthly Cost = Formula-driven. The State has calculated the monthly cost for each transaction type, for use in calculating other columns in the tab.

Column 8, # of Processing Months in Year 1 = Bidders must identify the number of months, within contract Year 1, for which they plan on processing each transaction type taking into consideration their plan for Transition-In.

Column 9, Year 1 = Formula-driven. The formula in this column multiplies the figures in the "Monthly Cost" column by the figures in the "# of Processing Months in Year 1" column for each Transaction Type. The transaction-based costs for Year 1 are not evaluated or scored.

Column 10 through 18, Year 2 through 10 = Formula-driven. The formula in these columns multiplies the numbers in the "Monthly Cost" column by 12 (months in a year) for each Transaction Type.

Column 19, Total Cost = Formula-driven. The formulas in this column sums the transaction-based costs for each transaction type over the term of the contract, and sums at Line 35 providing the total transaction-based cost for the term of the Contract.

D-6: Transaction-based Activities												
1	2	3	4	5	6	7	8	9	10	11	12	13
Line #	Transaction Type	Unit (Per)	Average # of Units (Monthly)	Average # of Units (Annually)	Cost Per Unit	Monthly Cost	# of Processing Months in Year 1	Year 1	Year 2	Year 3	Year 4	Year 5
1	Mail/Print Services											
2	Inbound Document Processing	Page	105,308		\$0.00	\$0.00	0	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
3	Outgoing Mail Processing*	Page	8,076,139		\$0.00	\$0.00	0	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
4	Color Copy Per Page	Page	127,498		\$0.00	\$0.00	0	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
5	Automated Insert	Piece of Mail	1,014,264		\$0.00	\$0.00	0	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
6	Presort Fee	Piece of Mail	1,049,695		\$0.00	\$0.00	0	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
7	Move Update Service	Envelope	53,520		\$0.00	\$0.00	0	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
8	Returned Mail	Envelope	32,704		\$0.00	\$0.00	0	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
9	Manual Processing	Human Hour	33		\$0.00	\$0.00	0	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
10	Inserting - Flat size 9x12 or larger	Human Hour	35,431		\$0.00	\$0.00	0	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
11	Alternate Fromats											
12	Monthly Minimum Charge	Monthly	0		\$0.00	\$0.00	0	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
13	Braille	Page	10		\$0.00	\$0.00	0	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
14	Large Print	Page	2,114		\$0.00	\$0.00	0	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
15	Audio - English & Spanish, password-protected	Page	192		\$0.00	\$0.00	0	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
16	Audio - Other languages, password-protected	Per Notice	2		\$0.00	\$0.00	0	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
17	Data	Page	0		\$0.00	\$0.00	0	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
18	Handling (includes cost of boxing, box, or envelope)	Per Mail	494		\$0.00	\$0.00	0	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
19	Unencrypted version of any alternate format, returned for purposes or attaching to the record	Per Mail	0		\$0.00	\$0.00	0	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
20	WCAG compliance	Human Hour	0		\$0.00	\$0.00	0	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
21	Media/Hardware	Per Notice	234		\$0.00	\$0.00	0	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
22	Encryption Fee	Per Notice	53		\$0.00	\$0.00	0	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
23	Operational Manual Cost	Human Hour	150		\$0.00	\$0.00	0	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
24	Envelopes											
25	#10 STD DBL WDO Envelope	Envelope		8,270,973	\$0.00	\$0.00	0	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
26	6x9 DBL WDO Envelope*	Envelope		10,031	\$0.00	\$0.00	0	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
27	Green DBL WDO Envelope - Renewal	Envelope		875,969	\$0.00	\$0.00	0	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
28	#10 DBL WDO Tax Envelope w/tint*	Envelope		3,486,989	\$0.00	\$0.00	0	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
29	9x12 Color Envelope	Envelope		389,740	\$0.00	\$0.00	0	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
30	Box Storage											
31	Secure Document Destruction/Transfer Fee	Box		11	\$0.00	\$0.00	0	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
32	6 Month or less Document Storage	Box		31,746	\$0.00	\$0.00	0	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
33	More than 6 Month Document Storage	Box		43,735	\$0.00	\$0.00	0	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00

14	15	16	17	18	19
Year 6	Year 7	Year 8	Year 9	Year 10	Total Cost
\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00

34	Postage											
35	Postage, billed in arrears (actuals)	Piece of Mail		12,898,550	\$0.00	\$0.00	0	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
36	* Unit cost includes 8.25% tax based on tax rates as of March 2023							Annual Transaction-Based Costs	\$0.00	\$0.00	\$0.00	\$0.00

\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00

<Vendor Name>

APPENDIX D-7, INSTRUCTIONS - ONSHORE SYSTEM CHANGES COSTS

DO NOT MAKE ANY CHANGES TO THIS WORKSHEET. IT IS FORMULA-DRIVEN AND PULLS COST DATA FROM THE OTHER WORKSHEETS IN THIS WORKBOOK.

The hours identified for Onshore System Changes is estimated for the proposal evaluation. The actual number of onshore hours per release and year varies depending on the CalHEERS business needs.

Key Staff are excluded from being costed in this worksheet, as they are costed under the D-5, Fixed Price Onshore/Offshore series and D-8/D-8.2, D-8.3, Transition In/Out series of worksheets. Key Staff are not permitted to bill for any work completed in the System Change work steam over the term of the contract.

All Deliverables, Artifacts, or Standard Operating Procedures, including any off cycle updates, developed in association with individual Releases and Change Requests are to be considered in the costs identified within this worksheet.

The Bidder shall warrant all work for the term the Contract and that work shall be incorporated within the elements of this worksheet. The State will not permit the bidder to identify warranty costs otherwise.

Warranty costs shall be incorporated into the staffing rate sheet for all enhancements.

The hours estimated for Year 1 and 10 are lower due to Transition In/Out.

The defined effort assumes that the Contractor will start the first development cycle based on the timeframes specified in SOW Section 7, TRANSITION REQUIREMENTS.

Column 2, System Change Staffing (Onshore) = The State has provided the onshore staffing structure for CalHEERS system changes.

Column 3, (Lines 1 - 33), Total Hours = The State has provided the estimated total onshore hours allotted for each staffing type.

Columns 4, 7, 10, 13, 16, 19, 22, 25, 28, 31 Hours Year # = The State has provided the estimated onshore hours for each staff role for each year.

Columns 5, 8, 11, 14, 17, 20, 23, 26, 29, 32 Labor Rates = The staffing rates will auto-populate, via formula, from Appendix D-7.1, ONSHORE SYSTEM CHANGES STAFFING RATES.

Columns 6, 9, 12, 15, 18, 21, 24, 27, 30, 33 Total Cost Year # = The total year system change costs are calculated by multiplying the estimated onshore system change hours by the associated onshore staffing labor rates. These costs will be linked to Appendix D-1, TOTAL COST SUMMARY, and will be part of the bid amount.

<Vendor Name>

D-7: Onshore System Changes Costs																							
1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20	21	22	23	24
Line #	System Change Staffing (Onshore)	Total Hours	Contract Year 1			Contract Year 2			Contract Year 3			Contract Year 4			Contract Year 5			Contract Year 6			Contract Year 7		
			Hours Year 1	Rates Year 1	Total Year 1	Hours Year 2	Rates Year 2	Total Year 2	Hours Year 3	Rates Year 3	Total Year 3	Hours Year 4	Rates Year 4	Total Year 4	Hours Year 5	Rates Year 5	Total Year 5	Hours Year 6	Rates Year 6	Total Year 6	Hours Year 7	Rates Year 7	Total Year 7
1	System Architect/Engineer	313,524	15,676	\$0.00	\$0.00	31,352	\$0.00	\$0.00	34,488	\$0.00	\$0.00	34,488	\$0.00	\$0.00	34,488	\$0.00	\$0.00	34,488	\$0.00	\$0.00	34,488	\$0.00	\$0.00
2	Usability Expert	217,057	10,853	\$0.00	\$0.00	21,706	\$0.00	\$0.00	23,876	\$0.00	\$0.00	23,876	\$0.00	\$0.00	23,876	\$0.00	\$0.00	23,876	\$0.00	\$0.00	23,876	\$0.00	\$0.00
3	Security Analyst	217,057	10,853	\$0.00	\$0.00	21,706	\$0.00	\$0.00	23,876	\$0.00	\$0.00	23,876	\$0.00	\$0.00	23,876	\$0.00	\$0.00	23,876	\$0.00	\$0.00	23,876	\$0.00	\$0.00
4	Senior Programmer/ Developer	217,057	10,853	\$0.00	\$0.00	21,706	\$0.00	\$0.00	23,876	\$0.00	\$0.00	23,876	\$0.00	\$0.00	23,876	\$0.00	\$0.00	23,876	\$0.00	\$0.00	23,876	\$0.00	\$0.00
5	Programmer/Developer	313,524	15,676	\$0.00	\$0.00	31,352	\$0.00	\$0.00	34,488	\$0.00	\$0.00	34,488	\$0.00	\$0.00	34,488	\$0.00	\$0.00	34,488	\$0.00	\$0.00	34,488	\$0.00	\$0.00
6	Senior System Administrator	265,291	13,265	\$0.00	\$0.00	26,529	\$0.00	\$0.00	29,182	\$0.00	\$0.00	29,182	\$0.00	\$0.00	29,182	\$0.00	\$0.00	29,182	\$0.00	\$0.00	29,182	\$0.00	\$0.00
7	System Administrator	313,524	15,676	\$0.00	\$0.00	31,352	\$0.00	\$0.00	34,488	\$0.00	\$0.00	34,488	\$0.00	\$0.00	34,488	\$0.00	\$0.00	34,488	\$0.00	\$0.00	34,488	\$0.00	\$0.00
8	Senior Database Administrator	217,057	10,853	\$0.00	\$0.00	21,706	\$0.00	\$0.00	23,876	\$0.00	\$0.00	23,876	\$0.00	\$0.00	23,876	\$0.00	\$0.00	23,876	\$0.00	\$0.00	23,876	\$0.00	\$0.00
9	Database Administrator	313,524	15,676	\$0.00	\$0.00	31,352	\$0.00	\$0.00	34,488	\$0.00	\$0.00	34,488	\$0.00	\$0.00	34,488	\$0.00	\$0.00	34,488	\$0.00	\$0.00	34,488	\$0.00	\$0.00
10	Senior Database Analyst	217,057	10,853	\$0.00	\$0.00	21,706	\$0.00	\$0.00	23,876	\$0.00	\$0.00	23,876	\$0.00	\$0.00	23,876	\$0.00	\$0.00	23,876	\$0.00	\$0.00	23,876	\$0.00	\$0.00
11	Database Analyst	313,524	15,676	\$0.00	\$0.00	31,352	\$0.00	\$0.00	34,488	\$0.00	\$0.00	34,488	\$0.00	\$0.00	34,488	\$0.00	\$0.00	34,488	\$0.00	\$0.00	34,488	\$0.00	\$0.00
12	Senior System Tester	265,291	13,265	\$0.00	\$0.00	26,529	\$0.00	\$0.00	29,182	\$0.00	\$0.00	29,182	\$0.00	\$0.00	29,182	\$0.00	\$0.00	29,182	\$0.00	\$0.00	29,182	\$0.00	\$0.00
13	System Tester	361,757	18,088	\$0.00	\$0.00	36,176	\$0.00	\$0.00	39,793	\$0.00	\$0.00	39,793	\$0.00	\$0.00	39,793	\$0.00	\$0.00	39,793	\$0.00	\$0.00	39,793	\$0.00	\$0.00
14	Senior Trainer	217,057	10,853	\$0.00	\$0.00	21,706	\$0.00	\$0.00	23,876	\$0.00	\$0.00	23,876	\$0.00	\$0.00	23,876	\$0.00	\$0.00	23,876	\$0.00	\$0.00	23,876	\$0.00	\$0.00
15	Trainer	265,291	13,265	\$0.00	\$0.00	26,529	\$0.00	\$0.00	29,182	\$0.00	\$0.00	29,182	\$0.00	\$0.00	29,182	\$0.00	\$0.00	29,182	\$0.00	\$0.00	29,182	\$0.00	\$0.00
16	Senior Technical Analyst	217,057	10,853	\$0.00	\$0.00	21,706	\$0.00	\$0.00	23,876	\$0.00	\$0.00	23,876	\$0.00	\$0.00	23,876	\$0.00	\$0.00	23,876	\$0.00	\$0.00	23,876	\$0.00	\$0.00
17	Technical Analyst	313,524	15,676	\$0.00	\$0.00	31,352	\$0.00	\$0.00	34,488	\$0.00	\$0.00	34,488	\$0.00	\$0.00	34,488	\$0.00	\$0.00	34,488	\$0.00	\$0.00	34,488	\$0.00	\$0.00
18	Senior Business Analyst	168,819	8,441	\$0.00	\$0.00	16,882	\$0.00	\$0.00	18,570	\$0.00	\$0.00	18,570	\$0.00	\$0.00	18,570	\$0.00	\$0.00	18,570	\$0.00	\$0.00	18,570	\$0.00	\$0.00
19	Business Analyst	313,524	15,676	\$0.00	\$0.00	31,352	\$0.00	\$0.00	34,488	\$0.00	\$0.00	34,488	\$0.00	\$0.00	34,488	\$0.00	\$0.00	34,488	\$0.00	\$0.00	34,488	\$0.00	\$0.00
20	Senior Technical Writer	168,819	8,441	\$0.00	\$0.00	16,882	\$0.00	\$0.00	18,570	\$0.00	\$0.00	18,570	\$0.00	\$0.00	18,570	\$0.00	\$0.00	18,570	\$0.00	\$0.00	18,570	\$0.00	\$0.00
21	Technical Writer	168,819	8,441	\$0.00	\$0.00	16,882	\$0.00	\$0.00	18,570	\$0.00	\$0.00	18,570	\$0.00	\$0.00	18,570	\$0.00	\$0.00	18,570	\$0.00	\$0.00	18,570	\$0.00	\$0.00
22	Reports Developer	265,291	13,265	\$0.00	\$0.00	26,529	\$0.00	\$0.00	29,182	\$0.00	\$0.00	29,182	\$0.00	\$0.00	29,182	\$0.00	\$0.00	29,182	\$0.00	\$0.00	29,182	\$0.00	\$0.00
23	Senior Scrum Master	217,057	10,853	\$0.00	\$0.00	21,706	\$0.00	\$0.00	23,876	\$0.00	\$0.00	23,876	\$0.00	\$0.00	23,876	\$0.00	\$0.00	23,876	\$0.00	\$0.00	23,876	\$0.00	\$0.00
24	Scrum Master	217,057	10,853	\$0.00	\$0.00	21,706	\$0.00	\$0.00	23,876	\$0.00	\$0.00	23,876	\$0.00	\$0.00	23,876	\$0.00	\$0.00	23,876	\$0.00	\$0.00	23,876	\$0.00	\$0.00
25	Joint Application Development (JAD) Facilitator	313,524	15,676	\$0.00	\$0.00	31,352	\$0.00	\$0.00	34,488	\$0.00	\$0.00	34,488	\$0.00	\$0.00	34,488	\$0.00	\$0.00	34,488	\$0.00	\$0.00	34,488	\$0.00	\$0.00
26	Data Analytics Architect	168,819	8,441	\$0.00	\$0.00	16,882	\$0.00	\$0.00	18,570	\$0.00	\$0.00	18,570	\$0.00	\$0.00	18,570	\$0.00	\$0.00	18,570	\$0.00	\$0.00	18,570	\$0.00	\$0.00
27	Data Analytics Scientist	168,819	8,441	\$0.00	\$0.00	16,882	\$0.00	\$0.00	18,570	\$0.00	\$0.00	18,570	\$0.00	\$0.00	18,570	\$0.00	\$0.00	18,570	\$0.00	\$0.00	18,570	\$0.00	\$0.00
28	Data Analyst and Visualization Expert	168,819	8,441	\$0.00	\$0.00	16,882	\$0.00	\$0.00	18,570	\$0.00	\$0.00	18,570	\$0.00	\$0.00	18,570	\$0.00	\$0.00	18,570	\$0.00	\$0.00	18,570	\$0.00	\$0.00

<Vendor Name>

D-7: Onshore System Changes Costs											
1	2	3	25	26	27	28	29	30	31	32	33
Line #	System Change Staffing (Onshore)	Total Hours	Contract Year 8			Contract Year 9			Contract Year 10		
			Hours Year 8	Rates Year 8	Total Year 8	Hours Year 9	Rates Year 9	Total Year 9	Hours Year 10	Rates Year 10	Total Year 10
1	System Architect/Engineer	313,524	31,352	\$0.00	\$0.00	31,352	\$0.00	\$0.00	31,352	\$0.00	\$0.00
2	Usability Expert	217,057	21,706	\$0.00	\$0.00	21,706	\$0.00	\$0.00	21,706	\$0.00	\$0.00
3	Security Analyst	217,057	21,706	\$0.00	\$0.00	21,706	\$0.00	\$0.00	21,706	\$0.00	\$0.00
4	Senior Programmer/ Developer	217,057	21,706	\$0.00	\$0.00	21,706	\$0.00	\$0.00	21,706	\$0.00	\$0.00
5	Programmer/Developer	313,524	31,352	\$0.00	\$0.00	31,352	\$0.00	\$0.00	31,352	\$0.00	\$0.00
6	Senior System Administrator	265,291	26,529	\$0.00	\$0.00	26,529	\$0.00	\$0.00	26,529	\$0.00	\$0.00
7	System Administrator	313,524	31,352	\$0.00	\$0.00	31,352	\$0.00	\$0.00	31,352	\$0.00	\$0.00
8	Senior Database Administrator	217,057	21,706	\$0.00	\$0.00	21,706	\$0.00	\$0.00	21,706	\$0.00	\$0.00
9	Database Administrator	313,524	31,352	\$0.00	\$0.00	31,352	\$0.00	\$0.00	31,352	\$0.00	\$0.00
10	Senior Database Analyst	217,057	21,706	\$0.00	\$0.00	21,706	\$0.00	\$0.00	21,706	\$0.00	\$0.00
11	Database Analyst	313,524	31,352	\$0.00	\$0.00	31,352	\$0.00	\$0.00	31,352	\$0.00	\$0.00
12	Senior System Tester	265,291	26,529	\$0.00	\$0.00	26,529	\$0.00	\$0.00	26,529	\$0.00	\$0.00
13	System Tester	361,757	36,176	\$0.00	\$0.00	36,176	\$0.00	\$0.00	36,176	\$0.00	\$0.00
14	Senior Trainer	217,057	21,706	\$0.00	\$0.00	21,706	\$0.00	\$0.00	21,706	\$0.00	\$0.00
15	Trainer	265,291	26,529	\$0.00	\$0.00	26,529	\$0.00	\$0.00	26,529	\$0.00	\$0.00
16	Senior Technical Analyst	217,057	21,706	\$0.00	\$0.00	21,706	\$0.00	\$0.00	21,706	\$0.00	\$0.00
17	Technical Analyst	313,524	31,352	\$0.00	\$0.00	31,352	\$0.00	\$0.00	31,352	\$0.00	\$0.00
18	Senior Business Analyst	168,819	16,882	\$0.00	\$0.00	16,882	\$0.00	\$0.00	16,882	\$0.00	\$0.00
19	Business Analyst	313,524	31,352	\$0.00	\$0.00	31,352	\$0.00	\$0.00	31,352	\$0.00	\$0.00
20	Senior Technical Writer	168,819	16,882	\$0.00	\$0.00	16,882	\$0.00	\$0.00	16,882	\$0.00	\$0.00
21	Technical Writer	168,819	16,882	\$0.00	\$0.00	16,882	\$0.00	\$0.00	16,882	\$0.00	\$0.00
22	Reports Developer	265,291	26,529	\$0.00	\$0.00	26,529	\$0.00	\$0.00	26,529	\$0.00	\$0.00
23	Senior Scrum Master	217,057	21,706	\$0.00	\$0.00	21,706	\$0.00	\$0.00	21,706	\$0.00	\$0.00
24	Scrum Master	217,057	21,706	\$0.00	\$0.00	21,706	\$0.00	\$0.00	21,706	\$0.00	\$0.00
25	Joint Application Development (JAD) Facilitator	313,524	31,352	\$0.00	\$0.00	31,352	\$0.00	\$0.00	31,352	\$0.00	\$0.00
26	Data Analytics Architect	168,819	16,882	\$0.00	\$0.00	16,882	\$0.00	\$0.00	16,882	\$0.00	\$0.00
27	Data Analytics Scientist	168,819	16,882	\$0.00	\$0.00	16,882	\$0.00	\$0.00	16,882	\$0.00	\$0.00
28	Data Analyst and Visualization Expert	168,819	16,882	\$0.00	\$0.00	16,882	\$0.00	\$0.00	16,882	\$0.00	\$0.00

<Vendor Name>

D-7: Onshore System Changes Costs																							
1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20	21	22	23	24
Line #	System Change Staffing (Onshore)	Total Hours	Contract Year 1			Contract Year 2			Contract Year 3			Contract Year 4			Contract Year 5			Contract Year 6			Contract Year 7		
			Hours Year 1	Rates Year 1	Total Year 1	Hours Year 2	Rates Year 2	Total Year 2	Hours Year 3	Rates Year 3	Total Year 3	Hours Year 4	Rates Year 4	Total Year 4	Hours Year 5	Rates Year 5	Total Year 5	Hours Year 6	Rates Year 6	Total Year 6	Hours Year 7	Rates Year 7	Total Year 7
29	Senior Data Warehouse Developer	168,819	8,441	\$0.00	\$0.00	16,882	\$0.00	\$0.00	18,570	\$0.00	\$0.00	18,570	\$0.00	\$0.00	18,570	\$0.00	\$0.00	18,570	\$0.00	\$0.00	18,570	\$0.00	\$0.00
30	Data Warehouse Developer	217,057	10,853	\$0.00	\$0.00	21,706	\$0.00	\$0.00	23,876	\$0.00	\$0.00	23,876	\$0.00	\$0.00	23,876	\$0.00	\$0.00	23,876	\$0.00	\$0.00	23,876	\$0.00	\$0.00
31	GenAI Analyst / Specialist	168,819	8,441	\$0.00	\$0.00	16,882	\$0.00	\$0.00	18,570	\$0.00	\$0.00	18,570	\$0.00	\$0.00	18,570	\$0.00	\$0.00	18,570	\$0.00	\$0.00	18,570	\$0.00	\$0.00
32	GenAI Data Analyst	217,057	10,853	\$0.00	\$0.00	21,706	\$0.00	\$0.00	23,876	\$0.00	\$0.00	23,876	\$0.00	\$0.00	23,876	\$0.00	\$0.00	23,876	\$0.00	\$0.00	23,876	\$0.00	\$0.00
33	GenAI User Researcher	168,819	8,441	\$0.00	\$0.00	16,882	\$0.00	\$0.00	18,570	\$0.00	\$0.00	18,570	\$0.00	\$0.00	18,570	\$0.00	\$0.00	18,570	\$0.00	\$0.00	18,570	\$0.00	\$0.00
34	GenAI Program Lead	168,819	8,441	\$0.00	\$0.00	16,882	\$0.00	\$0.00	18,570	\$0.00	\$0.00	18,570	\$0.00	\$0.00	18,570	\$0.00	\$0.00	18,570	\$0.00	\$0.00	18,570	\$0.00	\$0.00
35	GenAI Engineer	217,057	10,853	\$0.00	\$0.00	21,706	\$0.00	\$0.00	23,876	\$0.00	\$0.00	23,876	\$0.00	\$0.00	23,876	\$0.00	\$0.00	23,876	\$0.00	\$0.00	23,876	\$0.00	\$0.00
36	GenAI Equity Officer / Executive	168,819	8,441	\$0.00	\$0.00	16,882	\$0.00	\$0.00	18,570	\$0.00	\$0.00	18,570	\$0.00	\$0.00	18,570	\$0.00	\$0.00	18,570	\$0.00	\$0.00	18,570	\$0.00	\$0.00
37	GenAI Data Scientist	168,819	8,441	\$0.00	\$0.00	16,882	\$0.00	\$0.00	18,570	\$0.00	\$0.00	18,570	\$0.00	\$0.00	18,570	\$0.00	\$0.00	18,570	\$0.00	\$0.00	18,570	\$0.00	\$0.00
38	EDI Specialist	168,819	8,441	\$0.00	\$0.00	16,882	\$0.00	\$0.00	18,570	\$0.00	\$0.00	18,570	\$0.00	\$0.00	18,570	\$0.00	\$0.00	18,570	\$0.00	\$0.00	18,570	\$0.00	\$0.00
39	Google Analytics & Tagging Specialist	168,819	8,441	\$0.00	\$0.00	16,882	\$0.00	\$0.00	18,570	\$0.00	\$0.00	18,570	\$0.00	\$0.00	18,570	\$0.00	\$0.00	18,570	\$0.00	\$0.00	18,570	\$0.00	\$0.00
40	Total System Change Costs (Onshore)	8,899,263	444,966		\$0.00	889,928		\$0.00	978,917		\$0.00	978,917		\$0.00	978,917		\$0.00	978,917		\$0.00	978,917		\$0.00

<Vendor Name>

D-7: Onshore System Changes Costs											
1	2	3	25	26	27	28	29	30	31	32	33
Line #	System Change Staffing (Onshore)	Total Hours	Contract Year 8			Contract Year 9			Contract Year 10		
			Hours Year 8	Rates Year 8	Total Year 8	Hours Year 9	Rates Year 9	Total Year 9	Hours Year 10	Rates Year 10	Total Year 10
29	Senior Data Warehouse Developer	168,819	16,882	\$0.00	\$0.00	16,882	\$0.00	\$0.00	16,882	\$0.00	\$0.00
30	Data Warehouse Developer	217,057	21,706	\$0.00	\$0.00	21,706	\$0.00	\$0.00	21,706	\$0.00	\$0.00
31	GenAI Analyst / Specialist	168,819	16,882	\$0.00	\$0.00	16,882	\$0.00	\$0.00	16,882	\$0.00	\$0.00
32	GenAI Data Analyst	217,057	21,706	\$0.00	\$0.00	21,706	\$0.00	\$0.00	21,706	\$0.00	\$0.00
33	GenAI User Researcher	168,819	16,882	\$0.00	\$0.00	16,882	\$0.00	\$0.00	16,882	\$0.00	\$0.00
34	GenAI Program Lead	168,819	16,882	\$0.00	\$0.00	16,882	\$0.00	\$0.00	16,882	\$0.00	\$0.00
35	GenAI Engineer	217,057	21,706	\$0.00	\$0.00	21,706	\$0.00	\$0.00	21,706	\$0.00	\$0.00
36	GenAI Equity Officer / Executive	168,819	16,882	\$0.00	\$0.00	16,882	\$0.00	\$0.00	16,882	\$0.00	\$0.00
37	GenAI Data Scientist	168,819	16,882	\$0.00	\$0.00	16,882	\$0.00	\$0.00	16,882	\$0.00	\$0.00
38	EDI Specialist	168,819	16,882	\$0.00	\$0.00	16,882	\$0.00	\$0.00	16,882	\$0.00	\$0.00
39	Google Analytics & Tagging Specialist	168,819	16,882	\$0.00	\$0.00	16,882	\$0.00	\$0.00	16,882	\$0.00	\$0.00
40	Total System Change Costs (Onshore)	8,899,263	889,928		\$0.00	889,928		\$0.00	889,928		\$0.00

<Vendor Name>

APPENDIX D-7.1, INSTRUCTIONS - ONSHORE SYSTEM CHANGES STAFFING RATES

Bidders must use this worksheet to identify the planned onshore costs associated with adhering to System Changes requirements as defined in the following SOW Section 4, SYSTEM CHANGE & ENHANCEMENTS REQUIREMENTS, subsections:

- SOW Section 4.1, SYSTEM/SOFTWARE DEVELOPMENT LIFECYCLE (SDLC)
- SOW Section 4.2, CHANGE MANAGEMENT AND CONFIGURATION MANAGEMENT (SYSTEM)
- SOW Section 4.3, CHANGE/REFRESH/UPGRADES
- SOW Section 4.4, CODE DEVELOPMENT
- SOW Section 4.8, TESTING

Work performed in association with the following SOW Section 4, SYSTEM CHANGE & ENHANCEMENTS REQUIREMENTS are not to be included when completing this worksheet.

These activities are already covered under the M&O FIXED PRICE worksheets:

- SOW Section 4.5, SYSTEM REQUIREMENTS MANAGEMENT
- SOW Section 4.6, RELEASE MANAGEMENT
- SOW Section 4.7, ORGANIZATION & BUSINESS CHANGE MANAGEMENT
- SOW Section 4.9, DEFECT MANAGEMENT

Column 2, Onshore Position = No entry needed. The State has provided the staffing positions anticipated for CalHEERS system changes.

Columns 3-12, Hourly Rates Year X = The bidder must provide onshore hourly labor rates for each position for Year 1 through Year 10. The State identifies that the Bidder provided rates are the maximum rates to be charged for the position. These rates will be linked to Appendix D-7, ONSHORE SYSTEM CHANGES COSTS, where formulas will caculate the Total System Change Costs (onshore) bid amount.

D-7.1: Onshore System Changes Staffing Rates											
1	2	3	4	5	6	7	8	9	10	11	12
Line #	Onshore Position	Hourly Rate Year 1	Hourly Rate Year 2	Hourly Rate Year 3	Hourly Rate Year 4	Hourly Rate Year 5	Hourly Rate Year 6 (Option Year 1)	Hourly Rate Year 7 (Option Year 2)	Hourly Rate Year 8 (Option Year 3)	Hourly Rate Year 9 (Option Year 4)	Hourly Rate Year 10 (Option Year 5)
1	System Architect/Engineer	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
2	Usability Expert	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
3	Security Analyst	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
4	Senior Programmer/ Developer	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
5	Programmer/Developer	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
6	Senior System Administrator	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
7	System Administrator	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
8	Senior Database Administrator	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
9	Database Administrator	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
10	Senior Database Analyst	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
11	Database Analyst	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
12	Senior System Tester	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
13	System Tester	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
14	Senior Trainer	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
15	Trainer	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
16	Senior Technical Analyst	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
17	Technical Analyst	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
18	Senior Business Analyst	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
19	Business Analyst	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
20	Senior Technical Writer	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
21	Technical Writer	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
22	Reports Developer	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
23	Senior Scrum Master	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
24	Scrum Master	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
25	Joint Application Development (JAD) Facilitator	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
26	Data Analytics Architect	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
27	Data Analytics Analyst	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
28	Data Analyst and Visualization Expert	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
29	Senior Data Warehouse Developer	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
30	Data Warehouse Developer	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
31	GenAI Analyst / Specialist	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
32	GenAI Data Analyst	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
33	GenAI User Researcher	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
34	GenAI Program Lead	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
35	GenAI Engineer	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
36	GenAI Equity Officer / Executive	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
37	GenAI Data Scientist	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
38	EDI Scientist	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
39	Google Analytics & Tagging Specialist	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00

<Vendor Name>

APPENDIX D-7.2, INSTRUCTIONS - OFFSHORE SYSTEM CHANGES COSTS

DO NOT MAKE ANY CHANGES TO THIS WORKSHEET. IT IS FORMULA-DRIVEN AND PULLS COST DATA FROM THE OTHER WORKSHEETS IN THIS WORKBOOK.

The hours identified for Offshore System Changes are estimated for the proposal evaluation. The actual number of hours per release and year varies depending on the CalHEERS business needs.

Defined effort assumes that the Contractor will start the first development cycle based on the timeframes specified in SOW Section 7, TRANSITION REQUIREMENTS.

The hours estimated for Year 1 and 10 are lower due to Transition In/Out.

Key Staff are excluded from being costed in this worksheet, as they are costed under the D-5, Fixed Price Onshore/Offshore series and D-8 & D-8.2, Transition In/Out series of worksheets. Key Staff are not permitted to bill for any work completed in the System Change work stream over the term of the contract.

All Deliverables, Artifacts, or Standard Operating Procedures, including any off cycle updates, developed in association with individual Releases and Change Requests are to be considered in the costs identified within this worksheet.

The Bidder shall warrant all work for the term the Contract and that work shall be incorporated within the elements of this worksheet. The State will not permit the bidder to identify warranty costs otherwise.

Warranty costs shall be incorporated into the staffing rate sheet for all enhancements.

These costs will be linked to Appendix D-1, TOTAL COST SUMMARY, and will be part of the bid amount.

Column 2, System Change Staffing (Offshore) = The State has provided the offshore staffing structure for CalHEERS system changes.

Column 3, (Lines 1-38) Total Hours = The State has provided the total offshore hours allotted for each staffing type.

Columns 4, 7, 10, 13, 16, 19, 22, 25, 28, 31 Hours Year # = The State has provided the estimated offshore hours for each staff role for each year.

Columns 5, 8, 11, 14, 17, 20, 23, 26, 29, 32 Labor Rates = The staffing rates will auto-populate, via formula, from Appendix D-7.3, OFFSHORE SYSTEM CHANGES STAFFING RATES.

Columns 6, 9, 12, 15, 18, 21, 24, 27, 30, 33 Total Cost Year # = The total year system change costs are calculated by multiplying the estimated offshore system change hours by the associated offshore staffing labor rates. These costs are linked to Appendix D-1, TOTAL COST SUMMARY, and will be part of the bid amount.

<Vendor Name>

D-7.2: Offshore System Changes Costs																				
1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20	21
Line #	System Change Staffing (Offshore)	Total Hours	Contract Year 1			Contract Year 2			Contract Year 3			Contract Year 4			Contract Year 5			Contract Year 6		
			Hours Year 1	Rates Year 1	Total Cost Year 1	Hours Year 2	Rates Year 2	Total Cost Year 2	Hours Year 3	Rates Year 3	Total Cost Year 3	Hours Year 4	Rates Year 4	Total Cost Year 4	Hours Year 5	Rates Year 5	Total Cost Year 5	Hours Year 6	Rates Year 6	Total Cost Year 6
1	Offshore System Architect/Engineer	122,157	6,108	\$0.00	\$0.00	12,216	\$0.00	\$0.00	13,437	\$0.00	\$0.00	13,437	\$0.00	\$0.00	13,437	\$0.00	\$0.00	13,437	\$0.00	\$0.00
2	Offshore Usability Expert	97,729	4,887	\$0.00	\$0.00	9,773	\$0.00	\$0.00	10,750	\$0.00	\$0.00	10,750	\$0.00	\$0.00	10,750	\$0.00	\$0.00	10,750	\$0.00	\$0.00
3	Offshore Security Analyst	97,729	4,887	\$0.00	\$0.00	9,773	\$0.00	\$0.00	10,750	\$0.00	\$0.00	10,750	\$0.00	\$0.00	10,750	\$0.00	\$0.00	10,750	\$0.00	\$0.00
4	Offshore Senior Programmer/ Developer	122,157	6,108	\$0.00	\$0.00	12,216	\$0.00	\$0.00	13,437	\$0.00	\$0.00	13,437	\$0.00	\$0.00	13,437	\$0.00	\$0.00	13,437	\$0.00	\$0.00
5	Offshore Programmer/Developer	171,019	8,551	\$0.00	\$0.00	17,102	\$0.00	\$0.00	18,812	\$0.00	\$0.00	18,812	\$0.00	\$0.00	18,812	\$0.00	\$0.00	18,812	\$0.00	\$0.00
6	Offshore Senior System Administrator	122,157	6,108	\$0.00	\$0.00	12,216	\$0.00	\$0.00	13,437	\$0.00	\$0.00	13,437	\$0.00	\$0.00	13,437	\$0.00	\$0.00	13,437	\$0.00	\$0.00
7	Offshore System Administrator	122,157	6,108	\$0.00	\$0.00	12,216	\$0.00	\$0.00	13,437	\$0.00	\$0.00	13,437	\$0.00	\$0.00	13,437	\$0.00	\$0.00	13,437	\$0.00	\$0.00
8	Offshore Senior Database Administrator	146,591	7,330	\$0.00	\$0.00	14,659	\$0.00	\$0.00	16,125	\$0.00	\$0.00	16,125	\$0.00	\$0.00	16,125	\$0.00	\$0.00	16,125	\$0.00	\$0.00
9	Offshore Database Administrator	171,019	8,551	\$0.00	\$0.00	17,102	\$0.00	\$0.00	18,812	\$0.00	\$0.00	18,812	\$0.00	\$0.00	18,812	\$0.00	\$0.00	18,812	\$0.00	\$0.00
10	Offshore Senior Database Analyst	122,157	6,108	\$0.00	\$0.00	12,216	\$0.00	\$0.00	13,437	\$0.00	\$0.00	13,437	\$0.00	\$0.00	13,437	\$0.00	\$0.00	13,437	\$0.00	\$0.00
11	Offshore Database Analyst	146,591	7,330	\$0.00	\$0.00	14,659	\$0.00	\$0.00	16,125	\$0.00	\$0.00	16,125	\$0.00	\$0.00	16,125	\$0.00	\$0.00	16,125	\$0.00	\$0.00
12	Offshore Senior System Tester	171,019	8,551	\$0.00	\$0.00	17,102	\$0.00	\$0.00	18,812	\$0.00	\$0.00	18,812	\$0.00	\$0.00	18,812	\$0.00	\$0.00	18,812	\$0.00	\$0.00
13	Offshore System Tester	171,019	8,551	\$0.00	\$0.00	17,102	\$0.00	\$0.00	18,812	\$0.00	\$0.00	18,812	\$0.00	\$0.00	18,812	\$0.00	\$0.00	18,812	\$0.00	\$0.00
14	Offshore Senior Trainer	146,591	7,330	\$0.00	\$0.00	14,659	\$0.00	\$0.00	16,125	\$0.00	\$0.00	16,125	\$0.00	\$0.00	16,125	\$0.00	\$0.00	16,125	\$0.00	\$0.00
15	Offshore Trainer	146,591	7,330	\$0.00	\$0.00	14,659	\$0.00	\$0.00	16,125	\$0.00	\$0.00	16,125	\$0.00	\$0.00	16,125	\$0.00	\$0.00	16,125	\$0.00	\$0.00
16	Offshore Senior Technical Analyst	171,019	8,551	\$0.00	\$0.00	17,102	\$0.00	\$0.00	18,812	\$0.00	\$0.00	18,812	\$0.00	\$0.00	18,812	\$0.00	\$0.00	18,812	\$0.00	\$0.00
17	Offshore Technical Analyst	195,448	9,773	\$0.00	\$0.00	19,545	\$0.00	\$0.00	21,499	\$0.00	\$0.00	21,499	\$0.00	\$0.00	21,499	\$0.00	\$0.00	21,499	\$0.00	\$0.00
18	Offshore Senior Business Analyst	122,157	6,108	\$0.00	\$0.00	12,216	\$0.00	\$0.00	13,437	\$0.00	\$0.00	13,437	\$0.00	\$0.00	13,437	\$0.00	\$0.00	13,437	\$0.00	\$0.00
19	Offshore Business Analyst	171,019	8,551	\$0.00	\$0.00	17,102	\$0.00	\$0.00	18,812	\$0.00	\$0.00	18,812	\$0.00	\$0.00	18,812	\$0.00	\$0.00	18,812	\$0.00	\$0.00
20	Offshore Senior Technical Writer	97,729	4,887	\$0.00	\$0.00	9,773	\$0.00	\$0.00	10,750	\$0.00	\$0.00	10,750	\$0.00	\$0.00	10,750	\$0.00	\$0.00	10,750	\$0.00	\$0.00
21	Offshore Technical Writer	97,729	4,887	\$0.00	\$0.00	9,773	\$0.00	\$0.00	10,750	\$0.00	\$0.00	10,750	\$0.00	\$0.00	10,750	\$0.00	\$0.00	10,750	\$0.00	\$0.00
22	Offshore Reports Developer	219,881	10,994	\$0.00	\$0.00	21,988	\$0.00	\$0.00	24,187	\$0.00	\$0.00	24,187	\$0.00	\$0.00	24,187	\$0.00	\$0.00	24,187	\$0.00	\$0.00
23	Offshore Senior Scrum Master	97,729	4,887	\$0.00	\$0.00	9,773	\$0.00	\$0.00	10,750	\$0.00	\$0.00	10,750	\$0.00	\$0.00	10,750	\$0.00	\$0.00	10,750	\$0.00	\$0.00
24	Offshore Scrum Master	97,729	4,887	\$0.00	\$0.00	9,773	\$0.00	\$0.00	10,750	\$0.00	\$0.00	10,750	\$0.00	\$0.00	10,750	\$0.00	\$0.00	10,750	\$0.00	\$0.00
25	Offshore Joint Application Development (JAD) Facilitator	97,729	4,887	\$0.00	\$0.00	9,773	\$0.00	\$0.00	10,750	\$0.00	\$0.00	10,750	\$0.00	\$0.00	10,750	\$0.00	\$0.00	10,750	\$0.00	\$0.00
26	Offshore Data Analytics Architect	97,729	4,887	\$0.00	\$0.00	9,773	\$0.00	\$0.00	10,750	\$0.00	\$0.00	10,750	\$0.00	\$0.00	10,750	\$0.00	\$0.00	10,750	\$0.00	\$0.00
27	Offshore Data Analytics Scientist	97,729	4,887	\$0.00	\$0.00	9,773	\$0.00	\$0.00	10,750	\$0.00	\$0.00	10,750	\$0.00	\$0.00	10,750	\$0.00	\$0.00	10,750	\$0.00	\$0.00
28	Offshore Data Analyst and Visualization Expert	97,729	4,887	\$0.00	\$0.00	9,773	\$0.00	\$0.00	10,750	\$0.00	\$0.00	10,750	\$0.00	\$0.00	10,750	\$0.00	\$0.00	10,750	\$0.00	\$0.00
29	Offshore Senior Data Warehouse Developer	97,729	4,887	\$0.00	\$0.00	9,773	\$0.00	\$0.00	10,750	\$0.00	\$0.00	10,750	\$0.00	\$0.00	10,750	\$0.00	\$0.00	10,750	\$0.00	\$0.00
30	Offshore Data Warehouse Developer	97,729	4,887	\$0.00	\$0.00	9,773	\$0.00	\$0.00	10,750	\$0.00	\$0.00	10,750	\$0.00	\$0.00	10,750	\$0.00	\$0.00	10,750	\$0.00	\$0.00
31	Offshore GenAI Analyst / Specialist	97,729	4,887	\$0.00	\$0.00	9,773	\$0.00	\$0.00	10,750	\$0.00	\$0.00	10,750	\$0.00	\$0.00	10,750	\$0.00	\$0.00	10,750	\$0.00	\$0.00
32	Offshore GenAI Data Analyst	97,729	4,887	\$0.00	\$0.00	9,773	\$0.00	\$0.00	10,750	\$0.00	\$0.00	10,750	\$0.00	\$0.00	10,750	\$0.00	\$0.00	10,750	\$0.00	\$0.00
33	Offshore GenAI User Researcher	97,729	4,887	\$0.00	\$0.00	9,773	\$0.00	\$0.00	10,750	\$0.00	\$0.00	10,750	\$0.00	\$0.00	10,750	\$0.00	\$0.00	10,750	\$0.00	\$0.00
34	Offshore GenAI Program Lead	97,729	4,887	\$0.00	\$0.00	9,773	\$0.00	\$0.00	10,750	\$0.00	\$0.00	10,750	\$0.00	\$0.00	10,750	\$0.00	\$0.00	10,750	\$0.00	\$0.00
35	Offshore GenAI Engineer	97,729	4,887	\$0.00	\$0.00	9,773	\$0.00	\$0.00	10,750	\$0.00	\$0.00	10,750	\$0.00	\$0.00	10,750	\$0.00	\$0.00	10,750	\$0.00	\$0.00
36	Offshore GenAI Equity Officer / Executive	97,729	4,887	\$0.00	\$0.00	9,773	\$0.00	\$0.00	10,750	\$0.00	\$0.00	10,750	\$0.00	\$0.00	10,750	\$0.00	\$0.00	10,750	\$0.00	\$0.00
37	Offshore GenAI Data Scientist	97,729	4,887	\$0.00	\$0.00	9,773	\$0.00	\$0.00	10,750	\$0.00	\$0.00	10,750	\$0.00	\$0.00	10,750	\$0.00	\$0.00	10,750	\$0.00	\$0.00
38	Offshore EDI Scientist	97,729	4,887	\$0.00	\$0.00	9,773	\$0.00	\$0.00	10,750	\$0.00	\$0.00	10,750	\$0.00	\$0.00	10,750	\$0.00	\$0.00	10,750	\$0.00	\$0.00
39	Google Analytics & Tagging Specialist	97,739	4,888	\$0.00	\$0.00	9,774	\$0.00	\$0.00	10,751	\$0.00	\$0.00	10,751	\$0.00	\$0.00	10,751	\$0.00	\$0.00	10,751	\$0.00	\$0.00
40	Total System Change Costs (Offshore)	4,813,068	240,669		\$0.00	481,311		\$0.00	529,431		\$0.00	529,431		\$0.00	529,431		\$0.00	529,431		\$0.00

<Vendor Name>

D-7.2: Offshore System Changes Costs														
1	2	3	22	23	24	25	26	27	28	29	30	31	32	33
Line #	System Change Staffing (Offshore)	Total Hours	Contract Year 7			Contract Year 8			Contract Year 9			Contract Year 10		
			Hours Year 7	Rates Year 7	Total Cost Year 7	Hours Year 8	Rates Year 8	Total Cost Year 8	Hours Year 9	Rates Year 9	Total Cost Year 9	Hours Year 10	Rates Year 10	Total Cost Year 10
1	Offshore System Architect/Engineer	122,157	13,437	\$0.00	\$0.00	12,216	\$0.00	\$0.00	12,216	\$0.00	\$0.00	12,216	\$0.00	\$0.00
2	Offshore Usability Expert	97,729	10,750	\$0.00	\$0.00	9,773	\$0.00	\$0.00	9,773	\$0.00	\$0.00	9,773	\$0.00	\$0.00
3	Offshore Security Analyst	97,729	10,750	\$0.00	\$0.00	9,773	\$0.00	\$0.00	9,773	\$0.00	\$0.00	9,773	\$0.00	\$0.00
4	Offshore Senior Programmer/ Developer	122,157	13,437	\$0.00	\$0.00	12,216	\$0.00	\$0.00	12,216	\$0.00	\$0.00	12,216	\$0.00	\$0.00
5	Offshore Programmer/Developer	171,019	18,812	\$0.00	\$0.00	17,102	\$0.00	\$0.00	17,102	\$0.00	\$0.00	17,102	\$0.00	\$0.00
6	Offshore Senior System Administrator	122,157	13,437	\$0.00	\$0.00	12,216	\$0.00	\$0.00	12,216	\$0.00	\$0.00	12,216	\$0.00	\$0.00
7	Offshore System Administrator	122,157	13,437	\$0.00	\$0.00	12,216	\$0.00	\$0.00	12,216	\$0.00	\$0.00	12,216	\$0.00	\$0.00
8	Offshore Senior Database Administrator	146,591	16,125	\$0.00	\$0.00	14,659	\$0.00	\$0.00	14,659	\$0.00	\$0.00	14,659	\$0.00	\$0.00
9	Offshore Database Administrator	171,019	18,812	\$0.00	\$0.00	17,102	\$0.00	\$0.00	17,102	\$0.00	\$0.00	17,102	\$0.00	\$0.00
10	Offshore Senior Database Analyst	122,157	13,437	\$0.00	\$0.00	12,216	\$0.00	\$0.00	12,216	\$0.00	\$0.00	12,216	\$0.00	\$0.00
11	Offshore Database Analyst	146,591	16,125	\$0.00	\$0.00	14,659	\$0.00	\$0.00	14,659	\$0.00	\$0.00	14,659	\$0.00	\$0.00
12	Offshore Senior System Tester	171,019	18,812	\$0.00	\$0.00	17,102	\$0.00	\$0.00	17,102	\$0.00	\$0.00	17,102	\$0.00	\$0.00
13	Offshore System Tester	171,019	18,812	\$0.00	\$0.00	17,102	\$0.00	\$0.00	17,102	\$0.00	\$0.00	17,102	\$0.00	\$0.00
14	Offshore Senior Trainer	146,591	16,125	\$0.00	\$0.00	14,659	\$0.00	\$0.00	14,659	\$0.00	\$0.00	14,659	\$0.00	\$0.00
15	Offshore Trainer	146,591	16,125	\$0.00	\$0.00	14,659	\$0.00	\$0.00	14,659	\$0.00	\$0.00	14,659	\$0.00	\$0.00
16	Offshore Senior Technical Analyst	171,019	18,812	\$0.00	\$0.00	17,102	\$0.00	\$0.00	17,102	\$0.00	\$0.00	17,102	\$0.00	\$0.00
17	Offshore Technical Analyst	195,448	21,499	\$0.00	\$0.00	19,545	\$0.00	\$0.00	19,545	\$0.00	\$0.00	19,545	\$0.00	\$0.00
18	Offshore Senior Business Analyst	122,157	13,437	\$0.00	\$0.00	12,216	\$0.00	\$0.00	12,216	\$0.00	\$0.00	12,216	\$0.00	\$0.00
19	Offshore Business Analyst	171,019	18,812	\$0.00	\$0.00	17,102	\$0.00	\$0.00	17,102	\$0.00	\$0.00	17,102	\$0.00	\$0.00
20	Offshore Senior Technical Writer	97,729	10,750	\$0.00	\$0.00	9,773	\$0.00	\$0.00	9,773	\$0.00	\$0.00	9,773	\$0.00	\$0.00
21	Offshore Technical Writer	97,729	10,750	\$0.00	\$0.00	9,773	\$0.00	\$0.00	9,773	\$0.00	\$0.00	9,773	\$0.00	\$0.00
22	Offshore Reports Developer	219,881	24,187	\$0.00	\$0.00	21,988	\$0.00	\$0.00	21,988	\$0.00	\$0.00	21,988	\$0.00	\$0.00
23	Offshore Senior Scrum Master	97,729	10,750	\$0.00	\$0.00	9,773	\$0.00	\$0.00	9,773	\$0.00	\$0.00	9,773	\$0.00	\$0.00
24	Offshore Scrum Master	97,729	10,750	\$0.00	\$0.00	9,773	\$0.00	\$0.00	9,773	\$0.00	\$0.00	9,773	\$0.00	\$0.00
25	Offshore Joint Application Development (JAD) Facilitator	97,729	10,750	\$0.00	\$0.00	9,773	\$0.00	\$0.00	9,773	\$0.00	\$0.00	9,773	\$0.00	\$0.00
26	Offshore Data Analytics Architect	97,729	10,750	\$0.00	\$0.00	9,773	\$0.00	\$0.00	9,773	\$0.00	\$0.00	9,773	\$0.00	\$0.00
27	Offshore Data Analytics Scientist	97,729	10,750	\$0.00	\$0.00	9,773	\$0.00	\$0.00	9,773	\$0.00	\$0.00	9,773	\$0.00	\$0.00
28	Offshore Data Analyst and Visualization Expert	97,729	10,750	\$0.00	\$0.00	9,773	\$0.00	\$0.00	9,773	\$0.00	\$0.00	9,773	\$0.00	\$0.00
29	Offshore Senior Data Warehouse Developer	97,729	10,750	\$0.00	\$0.00	9,773	\$0.00	\$0.00	9,773	\$0.00	\$0.00	9,773	\$0.00	\$0.00
30	Offshore Data Warehouse Developer	97,729	10,750	\$0.00	\$0.00	9,773	\$0.00	\$0.00	9,773	\$0.00	\$0.00	9,773	\$0.00	\$0.00
31	Offshore GenAI Analyst / Specialist	97,729	10,750	\$0.00	\$0.00	9,773	\$0.00	\$0.00	9,773	\$0.00	\$0.00	9,773	\$0.00	\$0.00
32	Offshore GenAI Data Analyst	97,729	10,750	\$0.00	\$0.00	9,773	\$0.00	\$0.00	9,773	\$0.00	\$0.00	9,773	\$0.00	\$0.00
33	Offshore GenAI User Researcher	97,729	10,750	\$0.00	\$0.00	9,773	\$0.00	\$0.00	9,773	\$0.00	\$0.00	9,773	\$0.00	\$0.00
34	Offshore GenAI Program Lead	97,729	10,750	\$0.00	\$0.00	9,773	\$0.00	\$0.00	9,773	\$0.00	\$0.00	9,773	\$0.00	\$0.00
35	Offshore GenAI Engineer	97,729	10,750	\$0.00	\$0.00	9,773	\$0.00	\$0.00	9,773	\$0.00	\$0.00	9,773	\$0.00	\$0.00
36	Offshore GenAI Equity Officer / Executive	97,729	10,750	\$0.00	\$0.00	9,773	\$0.00	\$0.00	9,773	\$0.00	\$0.00	9,773	\$0.00	\$0.00
37	Offshore GenAI Data Scientist	97,729	10,750	\$0.00	\$0.00	9,773	\$0.00	\$0.00	9,773	\$0.00	\$0.00	9,773	\$0.00	\$0.00
38	Offshore EDI Scientist	97,729	10,750	\$0.00	\$0.00	9,773	\$0.00	\$0.00	9,773	\$0.00	\$0.00	9,773	\$0.00	\$0.00
39	Google Analytics & Tagging Specialist	97,739	10,751	\$0.00	\$0.00	9,774	\$0.00	\$0.00	9,774	\$0.00	\$0.00	9,774	\$0.00	\$0.00
40	Total System Change Costs (Offshore)	4,813,068	529,431		\$0.00	481,311		\$0.00	481,311		\$0.00	481,311		\$0.00

<Vendor Name>

APPENDIX D-7.3, INSTRUCTIONS - OFFSHORE SYSTEM CHANGES STAFFING RATES

Bidders must use this worksheet to identify the planned offshore costs associated with adhering to System Changes requirements as defined in the following SOW Section 4, SYSTEM CHANGE & ENHANCEMENTS REQUIREMENTS, subsections:

- SOW Section 4.1, SYSTEM/SOFTWARE DEVELOPMENT LIFECYCLE (SDLC)
- SOW Section 4.2, CHANGE MANAGEMENT AND CONFIGURATION MANAGEMENT (SYSTEM)
- SOW Section 4.3, CHANGE/REFRESH/UPGRADES
- SOW Section 4.4, CODE DEVELOPMENT
- SOW Section 4.8, TESTING

Work performed in association with the following SOW Section 4, SYSTEM CHANGE & ENHANCEMENTS REQUIREMENTS are not to be included when completing this worksheet.

These activities are already covered under the M&O FIXED PRICE worksheets:

- SOW Section 4.5, SYSTEM REQUIREMENTS MANAGEMENT
- SOW Section 4.6, RELEASE MANAGEMENT
- SOW Section 4.7, ORGANIZATION & BUSINESS CHANGE MANAGEMENT
- SOW Section 4.9, DEFECT MANAGEMENT

Column 2, Offshore Position = No entry needed. The State has provided the staffing positions anticipated for CalHEERS system changes.

Columns 3-12, Bidder Staffing Labor Rates = The bidder must provide hourly labor rate for each position for Year 1 through Year 10. The State identifies that the Bidder provided rates are the maximum rates to be charged for the position. These rates will be linked to Appendix D-7.2, OFFSHORE SYSTEM CHANGES COSTS, where formulas will caculate the Total System Change Costs (offshore) bid amount.

D-7.3: Offshore System Changes Staffing Rates											
1	2	3	4	5	6	7	8	9	10	11	12
Line #	Offshore Position	Hourly Rate Year 1	Hourly Rate Year 2	Hourly Rate Year 3	Hourly Rate Year 4	Hourly Rate Year 5	Hourly Rate Year 6 (Option Year 1)	Hourly Rate Year 7 (Option Year 2)	Hourly Rate Year 8 (Option Year 3)	Hourly Rate Year 9 (Option Year 4)	Hourly Rate Year 10 (Option Year 5)
1	Offshore System Architect/Engineer	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
2	Offshore Usability Expert	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
3	Offshore Security Analyst	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
4	Offshore Senior Programmer/ Developer	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
5	Offshore Programmer/Developer	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
6	Offshore Senior System Administrator	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
7	Offshore System Administrator	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
8	Offshore Senior Database Administrator	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
9	Offshore Database Administrator	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
10	Offshore Senior Database Analyst	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
11	Offshore Database Analyst	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
12	Offshore Senior System Tester	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
13	Offshore System Tester	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
14	Offshore Senior Trainer	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
15	Offshore Trainer	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
16	Offshore Senior Technical Analyst	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
17	Offshore Technical Analyst	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
18	Offshore Senior Business Analyst	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
19	Offshore Business Analyst	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
20	Offshore Senior Technical Writer	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
21	Offshore Technical Writer	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
22	Offshore Reports Developer	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
23	Offshore Senior Scrum Master	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
24	Offshore Scrum Master	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
25	Offshore Joint Application Development (JAD) Facilitator	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
26	Offshore Data Analytics Architect	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
27	Offshore Data Analytics Scientist	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
28	Offshore Data Analyst and Visualization Expert	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
29	Offshore Senior Data Warehouse Developer	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
30	Offshore Data Warehouse Developer	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
31	Offshore GenAI Analyst / Specialist	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
32	Offshore GenAI Data Analyst	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
33	Offshore GenAI User Researcher	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
34	Offshore GenAI Program Lead	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
35	Offshore GenAI Engineer	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
36	Offshore GenAI Equity Officer / Executive	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
37	Offshore GenAI Data Scientist	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
38	Offshore EDI Scientist	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
39	Google Analytics & Tagging Specialist	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00

<Vendor Name>
APPENDIX D-8, INSTRUCTIONS - TRANSITION-IN (TIP1 & TIP2) COSTS

This worksheet is used to capture the bidder’s costs for Transition-In (TIP1) activities from the current Contract to the new Contract, as well as the Transformation (TIP2) activities which will begin in parallel and thereafter.

The State expects the Transition-In activities to be completed within the first twelve (12) months of Contract start. The State Expects the Transformation activities to be completed by the twenty-fourth (24) month of Contract start.

All Deliverables, Artifacts, or Standard Operating Procedures, including any offcycle updates, identified within the Transition-In or Transformation Milestones are to be considered in the costs defined within this worksheet.

Bidders should also include the Transition Manager costs, associated with the Transition-In activities, within this worksheet.

Column 2, Transition-In or Transformation Activities = No entry needed. The State has provided a list of Transition-In and Transformation activities from SOW Section 7.1, TRANSITION-IN PHASE 1 (TIP1) TAKEOVER, and SOW Section 7.2. TRANSITION-IN PHASE 2 (TIP2) TRANSFORMATION.

Column 3, SOW Ref = No entry needed. The State has provided a reference to each appropriate SOW section.

Columns 4-27, Month # = Bidders must provide all allowable Transition-In and Transformation costs. These costs will be linked to Appendix D-1, TOTAL COST SUMMARY, and will be part of the bid amount.

Column 28, Total Cost = No entry needed, formula-driven. Provides the subtotal costs for each activity, as well as, the Total Transition-In Costs (in Line 13) and Total Transformation Costs (in Line 24) These costs will be linked to Appendix D-1, TOTAL COST SUMMARY, and will be part of the bid amount.

Line 25, Performance Bond Costs = Bidders must enter the amount of the Performance Bond Costs. The Performance Bond costs will not be evaluated or awarded any points.

D-8: Transition-In (TIP1 & TIP2) Costs														
1	2	3	4	5	6	7	8	9	10	11	12	13	14	15
Line #	Transition-In or Transformation Activities	SOW Ref	Month 1	Month 2	Month 3	Month 4	Month 5	Month 6	Month 7	Month 8	Month 9	Month 10	Month 11	Month 12
1	Transition-In Master Plan (TIMP)	7.1.1	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
2	TIP1 Execution	7.1.2	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
3	TIP1 Meetings, Agendas, and Minutes	7.1.3	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
4	TIP1 Sunrise Agreement	7.1.4	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
5	TIP1 Sunset Agreement	7.1.5	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
6	TIP1 Final Review	7.1.6	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
7	TIP1 Work Plan (Schedule)	7.1.7	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
8	TIP1 Transition Components Worksheet (TCW)	7.1.8	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
9	TIP1 Service and Function Migration	7.1.9	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
10	TIP1 Training and Knowledge Transfer	7.1.10	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
11	TIP1 Readiness Reviews	7.1.11	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
12	TIP1 Test and Validation	7.1.12	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
13	Total Transition-In Costs	7.1	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
14	TIP2 Transition-In Master Plan (TIMP) Updates	7.2.1	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
15	TIP2 Meetings, Agendas, and Minutes	7.2.2	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
16	TIP2 Final Review	7.2.3	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
17	TIP2 Project Work Plan Updates	7.2.4	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
18	TIP2 Transformation Short-Term Staffing	7.2.5	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
19	TIP2 Transformation Execution	7.2.6	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
20	TIP2 Design Document True-up Report	7.2.7	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
21	TIP2 CalHEERS Deliverables Transformation Planning	7.2.8	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
22	TIP2 State Designated Transformation Innovation	7.2.9	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
23	TIP2 Mandatory Optional Scope	7.2.10	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
24	Total Transformation Costs	7.2	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
25	Performance Bond Costs	RFP 5.4.6	\$0.00											

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art of the bid amount.

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<Vendor Name>

APPENDIX D-8.1, TRANSITION-IN (TIP1 &TIP2) PAYMENT MILESTONES

DO NOT MAKE ANY CHANGES TO THIS WORKSHEET. IT IS FORMULA-DRIVEN FROM THE OTHER WORKSHEETS IN THIS WORKBOOK.

The State expects the Takeover activities to be performed within the first twelve (12) months of the Contract.
The State expects the Transformation activities to be performed within the first twentyfour (24) months of the Contract.
Column 2, Transition-In Payment Milestones = The State has provided a list of Transition-In Milestones from SOW Section 7, TRANSITION REQUIREMENTS.
Column 4, Percentage of Transition In Costs = The State has provided the percentage of costs that will result in the contractor payments.
Column 5, Transition In Costs = These costs will be calculated based on the percentages in column 4.
Column 6, Holdback 10% = This column shows the amount of holdback for each payment.
Column 7, Contractor Milestone Payments = This column shows the amount that will be paid to the contractor for reaching each payment milestone.

D-8.1: Transition-In (TIP1 & TIP2) Payment Milestones						
1	2	3	4	5	6	7
Line #	Transition-In Payment Milestones	Payment Milestone Number	Percentage of Transition-In or Transformation Costs	Transition-In or Transformation Costs	Holdback 10%	Contractor Milestone Payments
1	Takeover Planning Activities	M1	15%	\$0.00	\$0.00	\$0.00
2	Takeover Execution (Part 1) Activities	M2	20%	\$0.00	\$0.00	\$0.00
3	Takeover Execution (Part 2) Activities	M3	20%	\$0.00	\$0.00	\$0.00
4	Takeover Verification Activities	M4	25%	\$0.00	\$0.00	\$0.00
5	Takeover Cutover, Initial Ops, and Final Review Activities	M5	20%	\$0.00	\$0.00	\$0.00
6	Transition-In Takeover Holdback Payment	M6			\$0.00	\$0.00
7	Transition-In Takeover Costs/Payments					\$0.00
8	Transformation Rqmt Package 1 (180 rqmts)	M7	10%	\$0.00	\$0.00	\$0.00
9	Transformation Rqmt Package 2 (180 rqmts)	M8	10%	\$0.00	\$0.00	\$0.00
10	Transformation Rqmt Package 3 (180 rqmts)	M9	20%	\$0.00	\$0.00	\$0.00
11	Transformation Rqmt Package 4 (180 rqmts)	M10	20%	\$0.00	\$0.00	\$0.00
12	Transformation Rqmt Package 5 (180 rqmts)	M11	20%	\$0.00	\$0.00	\$0.00
13	Transformation Rqmt Package 6 (Balance rqmts)	M12	20%	\$0.00	\$0.00	\$0.00
14	Transition-In Transformation Holdback Payment	M13			\$0.00	\$0.00
15	Transition-In Transformation Costs/Payments					\$0.00
16	Total Transition-In Takeover & Transformation Costs/Payments					\$0.00

<Vendor Name>

APPENDIX D-8.2, INSTRUCTIONS - TRANSITION-OUT COSTS

This worksheet is used to capture the Bidder's costs for Transition-Out activities.
The State expects these activities to be completed within the final twelve (12) months of the Contract.
All Deliverables, Artifacts, or Standard Operating Procedures, including any offcycle updates, identified within the Transition-Out Milestones are to be considered in the costs defined within this worksheet.
Bidders should also include the Transition Manager costs associated with the Transition-Out activities within Appendix D-8.2.
Column 2, Transition-Out Activities = No entry needed. The State has provided a list of Transition-Out activities from the SOW Section 7.3, TRANSITION-OUT.
Column 3, SOW Ref = No entry needed. The State has provided a reference to each appropriate SOW section.
Columns 4 through 15, Month # = The bidder must provide all allowable Transition-Out costs in monthly increments.
Column 16, Total Cost = No entry needed, formula-driven. These costs are linked to Appendix D-1, TOTAL COST SUMMARY, and will be part of the bid amount.

D-8.2: Transition Out Costs															
1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16
Line #	Transition-Out Activities	SOW Ref	Month 1	Month 2	Month 3	Month 4	Month 5	Month 6	Month 7	Month 8	Month 9	Month 10	Month 11	Month 12	Total Cost
1	Transition-Out Plan (TOP)	7.3.1	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
2	Transition-Out Walkthrough Tours	7.3.2	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
3	Transition-Out Work Plan (Schedule)	7.3.3	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
4	Transition-Out Meeting Agendas/Minutes and Status Reports	7.3.4	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
5	Transition-Out Training and Training Materials	7.3.5	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
6	Transition-Out Component Worksheet Updates	7.3.6	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
7	Transition-Out Execution Activities	7.3.7	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
8	Transition-Out Completion Reports	7.3.8	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
9	Total Transition-Out Costs		\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00

<Vendor Name>

APPENDIX D-8.3, TRANSITION-OUT PAYMENT MILESTONES

DO NOT MAKE ANY CHANGES TO THIS WORKSHEET. IT IS FORMULA-DRIVEN FROM THE OTHER WORKSHEETS IN THIS WORKBOOK.

The State expects these activities to be performed within the final twelve (12) months of the Contract.

Column 2, Transition-Out Payment Milestones = No entry needed. The State has provided a list of Transition-Out milestones from the SOW Section 7.4, TRANSITION PAYMENTS.

Column 4, Percentage of Transition-Out Costs = The State has provided the percentage of costs that will result in the contractor payment.

Column 5, Transition-Out Costs = These costs will be calculated based on the percentages in column 4.

Column 6, Holdback 10% = No entry needed. This column shows the amount of holdback for each milestone payment, which sums in Milestone 18 on Line 5.

Column 7, Contractor Milestone Payments = This column shows the amount that will be paid to the contractor for reaching each payment milestone.

D-8.4: Transition-Out Payment						
1	2	3	4	5	6	7
Line #	Transition-Out Payment Milestones	Payment Milestone Number	Percentage of Transition-Out Costs	Transition-Out Costs	Holdback 10%	Contractor Milestone Payments
1	Transition-Out Planning Deliverables	M14	5%	\$0.00	\$0.00	\$0.00
2	Transition-Out Deliverables (refer to SOW Section 8.13)	M15	10%	\$0.00	\$0.00	\$0.00
3	Successful Cutover of Transition-Out Components	M16	50%	\$0.00	\$0.00	\$0.00
4	Completion of All Transition-Out Work Plan Activities	M17	35%	\$0.00	\$0.00	\$0.00
5	Holdback Payment	M18				\$0.00
6	Total Transition-Out Costs/Payments			\$0.00		\$0.00