




## **Design Document**

SCR CA-204420 – SAR 7 Texting Campaign



	DOCUMENT APPROVAL HISTORY	
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8/28/2019	2.0	Content Revision 1 – Added example for SAR 7 Sent/Reminder, Updated SAR 7 Incomplete, Rescind/Restoration, Processed, and Not Received Updated Text message character limit	Michael Barillas



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# 1 OVERVIEW

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The number of CalFresh discontinuances for SAR 7 continues to increase since July 2017 in Los Angeles County. This is impacting the overall CalFresh Participation Rate. Many customers expressed they would like to be informed about their case by either phone, call, or text. LRS will implement SAR 7 text campaigns for 'Sent/Reminder', 'Received', 'Incomplete', 'Rescind/Restoration', 'Not Received', and 'Processed'.

## 1.1 Current Design

LRS sends a monthly outbound text for customer report status updates 'Not Received' when a participant has either a 'SAR 7', 'SAR 72', or 'SAR 73', the periodic report has the status of 'Not Received' and is due that month.

## 1.2 Requests

LRS will implement SAR 7 outbound text campaigns for customer report status updates; 'Sent/Reminder', 'Received', 'Incomplete', 'Rescind/Restoration', 'Not Received', and 'Processed'.

## 1.3 Overview of Recommendations

LRS will implement new outbound SAR 7 campaigns for; 'Sent/Reminder', 'Received', 'Incomplete', 'Rescind/Restoration', and 'Processed'. Update existing outbound SAR7 campaign 'Not Received'. Update existing outbound text campaign 'Upload Verification(Text)' as not to duplicate texts from 'SAR7 Received' campaign.

## 1.4 Assumptions

All new outbound SAR 7 campaigns will match existing SAR 7 campaign format.

SAR 7 text message verbiage will be updated with the implementation of the customers' ability to opt-out (SCR CA-208925). Verbiage to be added to outbound text campaigns 'Text END to stop texts'.



## 2 RECOMMENDATIONS

LRS will only send the latest SAR 7 campaign status if there are multiple campaigns triggered for the same participant within the same business day.

LRS will implement new outbound SAR 7 campaigns for;

- SAR7 Sent/Reminder
- SAR7 Received
- SAR7 Incomplete
- SAR7 Rescind/Restoration
- SAR7 Processed

LRS will modify existing outbound campaigns

- Upload Verification (Text)
- SAR7 Not Received

All new Outbound text campaign File Format should match existing SAR 7 Outbound campaign Not Received

FIELD NAME	FIELD DESCRIPTION	TYPE	POSITION	LENGTH	REQUIRED
<b>Phone 1</b>	The Message/Cell phone number of the participant	Alpha Numeric		10	Y
<b>Text Message</b>	Message given to the participant	Alpha Numeric		139	Y
<b>First name</b>	First Name of the participant	Alpha Numeric		50	Y
<b>Last name</b>	Last Name of the participant	Alpha Numeric		50	Y
<b>Account Number</b>	The account# field is the set of element data concatenated into one field will a max character count of 30	Alpha Numeric		30	Y

FIELD NAME	FIELD DESCRIPTION	TYPE	POSITION	LENGTH	REQUIRED
<b>Language</b>	The primary language of the person	Alpha Numeric		2	Y
<b>District</b>	District to which file for this case is assigned	Alpha Numeric		3	Y



<b>EW File</b>	Eligibility Worker File Number	Alpha Numeric		4	Y
<b>Case Number</b>	Case Number of the participant	Alpha Numeric		7	Y
<b>Appt Date</b>	Appointment Date	Alpha Numeric		8	Y
<b>Appt Time</b>	Appointment Time	Alpha Numeric		4	Y

Language	Code
English	01
Spanish	02
Chinese	03
Vietnamese	04
Cambodian	05
Armenian	06
Farsi	07
Korean	08
Russian	09
Tagalog	10

## 2.1 Outbound Campaign SAR7 Sent/Reminder

### 2.1.1 Overview

LRS will create an outbound text campaign for all participants (excluding Domestic Violence cases) for which a SAR 7 was sent.

### 2.1.2 Description of Change

Create a new 'SAR7 Sent/Reminder' outbound text campaign for all participants (excluding Domestic Violence cases) for which a SAR 7 was sent and is due that month.  
Schedule the 'SAR7 Sent/Reminder' campaign to run monthly on the last business day of each month.

Example: For a SAR 7 due in Feb; SAR 7 Sent/Reminder will run on the last business day of the month (Jan 31); ITD will text the participant the next business day (Feb 1)

Campaign Name: SAR7 Sent/Reminder  
Campaign Number: 237  
Campaign File Name: 237SAR7SentSMS.csv



FTP Location: \\172.19.230.210\FTPROOT\PSSOBLRS

**English Verbiage Before:**

Your SAR 7 is due by the 5<sup>th</sup> of this month. You may complete your SAR 7 at [yourbenefits.laclrs.org](http://yourbenefits.laclrs.org)

**English Verbiage After:**

Your SAR 7 is due by the 5<sup>th</sup> of this month. Complete your SAR 7 at [yourbenefits.laclrs.org](http://yourbenefits.laclrs.org) or call (866) 613-3777.

### **2.1.3 Execution Frequency**

Monthly – Last business day

### **2.1.4 Key Scheduling Dependencies**

N/A

### **2.1.5 Counties Impacted**

19 – Los Angeles

### **2.1.6 Data Volume/Performance**

N/A

### **2.1.7 Interface Partner**

ITD

### **2.1.8 Failure Procedure/Operational Instructions**

Batch Support Operations staff will evaluate transmission errors and failures and determine the appropriate resolution (i.e., manually retrieving the file from the directory and contacting the external partner if there is an account or password issue, etc...)

## **2.2 Outbound Campaign SAR7 Received (SAR7 Confirm Receipt)**

### **2.2.1 Overview**

LRS will create an outbound text campaign for all participants whose SAR 7 was received.



### **2.2.2 Description of Change**

Create an outbound text campaign for all participants whose SAR 7 is marked as status 'Received'.

Campaign Name: SAR7 Received

Campaign Number: 220

Campaign File Name: 220SAR7ReceivedSMS.csv

FTP Location: \\172.19.230.210\FTPROOT\PSSOBLRS

English Verbiage:

DPSS received your SAR 7. Visit [yourbenefits.laclrs.org](http://yourbenefits.laclrs.org) to get more info on your case.

Questions (866) 613-3777

### **2.2.3 Execution Frequency**

Daily – Except Sundays and Holidays

### **2.2.4 Key Scheduling Dependencies**

No Change

### **2.2.5 Counties Impacted**

19 – Los Angeles

### **2.2.6 Data Volume/Performance**

No Change

### **2.2.7 Interface Partner**

ITD

### **2.2.8 Failure Procedure/Operational Instructions**

Batch Support Operations staff will evaluate transmission errors and failures and determine the appropriate resolution (i.e., manually retrieving the file from the directory and contacting the external partner if there is an account or password issue, etc...)



## 2.3 Outbound Campaign SAR7 Incomplete

### 2.3.1 Overview

LRS will create an outbound text campaign for all participants (excluding Domestic Violence cases) whose SAR 7 report is marked as incomplete.

### 2.3.2 Description of Change

Create a new SAR 7 Incomplete outbound text campaign for all participants (excluding Domestic Violence cases) whose SAR 7 report is marked as Incomplete and either 'NA 960Y' or 'SAR90' form generated and the SAR 7 is due in the due/submit month.

Campaign Name: SAR7 Incomplete

Campaign Number: 226

Campaign File Name: 226SAR7inCMTSMS.csv

FTP Location: \\172.19.230.210\FTPROOT\PSSOBLRS

#### English Verbiage Before:

DPSS received your incomplete SAR 7. Go to [yourbenefits.laclrs.org](http://yourbenefits.laclrs.org) to view your notice. Questions (866) 613-3777

#### English Verbiage After:

DPSS received your incomplete SAR 7. Go to [yourbenefits.laclrs.org](http://yourbenefits.laclrs.org) to view your notice or call 866-613-3777

### 2.3.3 Execution Frequency

Daily – Except Sundays Holidays

### 2.3.4 Key Scheduling Dependencies

Predecessor: PB19P200 (PrintCentralBatch)

### 2.3.5 Counties Impacted

19 – Los Angeles

### 2.3.6 Data Volume/Performance

N/A



### 2.3.7 Interface Partner

ITD

### 2.3.8 Failure Procedure/Operational Instructions

Batch Support Operations staff will evaluate transmission errors and failures and determine the appropriate resolution (i.e., manually retrieving the file from the directory and contacting the external partner if there is an account or password issue, etc...)

## 2.4 Outbound Campaign SAR7 Rescind/Restoration

### 2.4.1 Overview

LRS will create an outbound text campaign for all participants (excluding Domestic Violence cases) who were discontinued by the SAR 7 discontinuance job.

### 2.4.2 Description of Change

Create a new SAR 7 Rescind/Restoration outbound text campaign for all participants (excluding Domestic Violence cases) who were discontinued by the SAR 7 discontinuance job.

Campaign Name: SAR7 Rescind/Restoration

Campaign Number: 238

Campaign File Name: 238SAR7RescindSMS.csv

FTP Location: \\172.19.230.210\FTPROOT\PSSOBLRS

#### English Verbiage Before:

DPSS has not received your SAR 7 and your benefits are stopping. Submit a complete SAR 7 at [yourbenefits.laclrs.org](http://yourbenefits.laclrs.org) Questions (866)613-3777

#### English Verbiage After:

DPSS is stopping your benefits. Submit a complete SAR 7 to restore your benefits at [yourbenefits.laclrs.org](http://yourbenefits.laclrs.org) or call 866-613-3777.

### 2.4.3 Execution Frequency

Monthly – Business Day after PB00E140 – 'SAR 7 Discontinuance Job'



#### **2.4.4 Key Scheduling Dependencies**

Predecessor: 'SAR 7 Discontinuance Job'

#### **2.4.5 Counties Impacted**

19 – Los Angeles

#### **2.4.6 Data Volume/Performance**

N/A

#### **2.4.7 Interface Partner**

ITD

#### **2.4.8 Failure Procedure/Operational Instructions**

Batch Support Operations staff will evaluate transmission errors and failures and determine the appropriate resolution (i.e., manually retrieving the file from the directory and contacting the external partner if there is an account or password issue, etc...)

### **2.5 Outbound Campaign SAR7 Processed**

#### **2.5.1 Overview**

LRS will create an outbound text campaign for all participants whose SAR 7 report is marked as complete and EDBC for the benefit month for certification approval.

#### **2.5.2 Description of Change**

Create a new 'SAR7 Processed' outbound text campaign for all participants whose SAR 7 report is marked as 'Complete-EDBC Accepted'.

Campaign Name: SAR7 Processed

Campaign Number: 239

Campaign File Name: 239SAR7ProcessedSMS.csv

FTP Location: \\172.19.230.210\FTPROOT\PSSOBLRS

English Verbiage:

Your SAR 7 is complete. Visit [yourbenefits.laclrs.org](http://yourbenefits.laclrs.org) for more info about your DPSS benefits. Questions (866) 613-3777



### **2.5.3 Execution Frequency**

Daily

### **2.5.4 Key Scheduling Dependencies**

Predecessor: 'Batch EDBC'

### **2.5.5 Counties Impacted**

19 – Los Angeles

### **2.5.6 Data Volume/Performance**

N/A

### **2.5.7 Interface Partner**

ITD

### **2.5.8 Failure Procedure/Operational Instructions**

Batch Support Operations staff will evaluate transmission errors and failures and determine the appropriate resolution (i.e., manually retrieving the file from the directory and contacting the external partner if there is an account or password issue, etc...)

## **2.6 Modify Outbound Campaign SAR7 Not Received**

### **2.6.1 Overview**

LRS will modify existing outbound text campaign SAR 7 Not Received.

### **2.6.2 Description of Change**

Modify 'SAR7 Not Received' (259) outbound text campaign to only send message if the SAR 7 is due in the submit/due month.

Modify 'SAR7 Not Received' outbound text campaign to exclude 'Domestic Violence' cases and no longer check if SAR 72 or SAR 73 is marked as Incomplete.

Update campaign 259 Execution Frequency to be Monthly on the 12<sup>th</sup> day or next business day if the 12<sup>th</sup> is a non-business day.

(Before) Update campaign 259 English Verbiage to:



DPSS has not received your SAR 7. Submit at [yourbenefits.laclrs.org](http://yourbenefits.laclrs.org) if you did not turn it in. Questions (866)613-3777

**(After) Update campaign 259 English Verbiage to:**

DPSS has not received your SAR7. Submit at [yourbenefits.laclrs.org](http://yourbenefits.laclrs.org) or call 866-613-3777.

### **2.6.3 Execution Frequency**

Monthly – 12<sup>th</sup> Day

### **2.6.4 Key Scheduling Dependencies**

No Change

### **2.6.5 Counties Impacted**

19 – Los Angeles

### **2.6.6 Data Volume/Performance**

N/A

### **2.6.7 Interface Partner**

ITD

### **2.6.8 Failure Procedure/Operational Instructions**

Batch Support Operations staff will evaluate transmission errors and failures and determine the appropriate resolution (i.e., manually retrieving the file from the directory and contacting the external partner if there is an account or password issue, etc...)

## **2.7 Modify Outbound Campaign Upload Verification**

### **2.7.1 Overview**

LRS will modify existing campaign 'Upload Verification (Text)' to remove SAR 7 participants as not to duplicate texts from 'SAR7 Received' campaign.



### **2.7.2 Description of Change**

Modify existing outbound campaign 'Upload Verification (Text)' driving query to exclude SAR 7/SAR 72/SAR 73 document types so that SAR 7 participants do not receive duplicate texts from the 'SAR7 Received' campaign.

### **2.7.3 Execution Frequency**

Daily – No Change

### **2.7.4 Key Scheduling Dependencies**

No Change

### **2.7.5 Counties Impacted**

19 – Los Angeles

### **2.7.6 Data Volume/Performance**

N/A

### **2.7.7 Interface Partner**

ITD

### **2.7.8 Failure Procedure/Operational Instructions**

Batch Support Operations staff will evaluate transmission errors and failures and determine the appropriate resolution (i.e., manually retrieving the file from the directory and contacting the external partner if there is an account or password issue, etc...)

## **3 REQUIREMENTS**

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Customers expressed they would like to be informed about their case by either phone, call, or text. LRS will be implementing text campaigns for SAR7 SentReminder, Received, Not Received, Incomplete, Rescind/Restoration, and Processed.



### 3.1 Project Requirements

REQ #	REQUIREMENT TEXT	How Requirement Met
2.20.1.12	The LRS shall alert COUNTY-Specified Users of all automated actions taken by the LRS as a result of LRS data received through an interface	LRS will send participants messages via text to inform them of any SAR 7 Status changes.

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## **Design Document**

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CA-208374/CIV 104094 - Update Electronic Theft  
Replacement and Reporting



	DOCUMENT APPROVAL HISTORY	
	Prepared By	Greg Deogracia, Eric Wu
	Reviewed By	Justin Dobbs Jyothirmayi Chavata Kapil Santosh Madhuri Salunkhe Sheryl Eppler Gloria Williams Ravneet Bhatia

DATE	DOCUMENT VERSION	REVISION DESCRIPTION	AUTHOR
08/06/2019	1.0	Initial Draft of the Design Document Containing Report Requirements.	Greg Deogracia
09/18/2019	1.1	Update report column and line descriptions for TCVAP input per LRS implementation capabilities. Mockup URL corrections.	Greg Deogracia
		Updates recommended by Build team and Committee	Eric Wu



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# 1 OVERVIEW

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This document describes the requirement changes to Update Electronic Theft Replacement and Reporting per CFL 18/19-79.

## 1.1 Current Design

On the Issuance Detail page, County staff can replace Cash Benefits that are lost due to Electronic Theft by clicking the [Replace] button. The system automatically populates the Status Reason field as "EBT Theft - AB 2035". All replacements are reported on the monthly 'Temp 2035' Report (Scheduled / State) in the C-IV system. The 'TEMP 2035' Report does not exist in the LRS system.

## 1.2 Request

The request for reporting is to create two reports based on CFL 18/19-79 requirements that instructs counties to now report Electronic Theft replacements due to Skimming (AB 2035) and Electronic Theft replacements due to Scams (AB 2313) separately.

## 1.3 Overview of Recommendations

- 1) Update Issuance Detail Page when the [Replace] button is clicked:
  - a. Update Status Reason of 'EBT Theft-AB 2035' to 'EBT Theft'.
  - b. Add new drop-down field 'Electronic Theft Type' with options of Select (no value), 'AB 2035 - Skimming', and 'AB 2313 - Scam'. This field is required when replacing cash benefit because of electronic theft and will be used to separate replacements due to skimming from scams on reports.
- 2) The existing 'Temp 2035' report will be discontinued with historical records remaining accessible. The 'Temp 2035' will then be replaced with a 'TEMP 2035 EBT THEFT - Skimming' and 'TEMP 2313 EBT THEFT- Scam' report. The new reports will be based on the design of the original 'TEMP 2035' report.

**Note:** The existing EBT Replacement Report is running correctly to capture all other **NON-EBT SCAM OR SKIMMING** cash replacements, for example the GR and CF issuance replacements.

## 1.4 Assumptions

- No Impact to other Fiscal Reports
- The data set size of any one report worksheet will not exceed 65,500 rows.



- Additionally, as noted in COUNTY FISCAL LETTER (CFL) NO. 18/19-79, such reimbursements are limited to once in any thirty-six-month period.
- This design doesn't change CalFresh Policy on electronic theft and has no impact on CalFresh Program policy or procedures.

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## 2 RECOMMENDATIONS

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This section will outline the specific recommendations to implement two reports;

- TEMP 2035 EBT THEF T - Skimming
- TEMP 2313 EBT THEFT - Scam' Reports

### 2.1 Issuance Detail

#### 2.1.1 Overview

- a. The Issuance Detail Page allows users to create a cash benefit replacement by clicking [Replace] when the original issuance is lost due to electronic theft. Replacements due to electronic theft will have status reason 'EBT Theft-AB 2035'.
- b. However, a status reason varies depending on status in the system. For example, an electronic theft replacement begins with status 'Pending Deputy Approval' and status reason 'EBT Theft-AB 2035' then can go through following stages:
  - i. When the replacement is approved, status is 'Ready For Issuance', and no status reason.
  - ii. When the replacement is submitted to be issued, status is 'Submitted', and status reason is 'System'.
  - iii. When the replacement is issued, status is 'Issued', and status reason is 'System'.
- c. Therefore, status reason is not an optimal indicator for reporting purpose. This SCR is to add a new field 'Electronic Theft Type' for counties to identify skimming or scam for CFL 18/19-79 report requirements.



## 2.1.2 Issuance Detail Page Mock-up

### Issuance Detail

\*- Indicates required fields

Affidavit
Replace
Edit
Close

<b>Control Number:</b> 0000000000	<b>Category:</b> Supplemental Benefit	<b>Benefit/Service Month:</b> 05/2019
<b>Case Number:</b> <a href="#">CASE000</a>	<b>Case Name:</b> CASE PERSON	<b>Program:</b> CalWORKs

#### Payee Information

<b>Payee:</b> * PAID PERSON	<b>Payee Address:</b> 000 STREET CITY,ST 00000	<b>Reference:</b>
--------------------------------	--	-------------------

#### Basic Information

<b>Issuance Method:</b> EBT	<b>Immediacy:</b> Rush	<b>Payment Amount:</b> 937.00	<b>Invoice Number:</b>
<b>Issue Date:</b> 05/01/2019	<b>Available Date:</b> 05/01/2019	<b>Account Number:</b> 0000000000	
<b>Status:</b> Issued	<b>Status Reason:</b> System		

#### Financial Information

<b>Pay Code:</b>	
<b>Aid Code:</b> 33 - CW-Zero Parent (Fed)	<b>Fund Code:</b> CZ
<b>EDBC:</b> <a href="#">0000000000</a>	<b>Authorized Worker:</b> <a href="#">00000</a>

#### Status History

Status	Reason	Date	Authorized By
Issued	System	05/01/2019 7:27:39 AM	<a href="#">System</a>
Submitted	System	05/01/2019 7:27:39 AM	<a href="#">System</a>
Ready For Issuance	New	05/01/2019 7:27:38 AM	<a href="#">STAFF001</a>

#### Pay Code History

#### Affidavit History

Affidavit
Replace
Edit
Close

Last Updated On 05/01/2019 9:38:42 PM By: [540400](#)

This [Type 1](#) page took 0.38 seconds to load.

Figure 2.1.1 – Issuance Detail Page with Replace button



## Issuance Detail

\*- Indicates required fields

Affidavit
Save
Cancel

<b>Control Number:</b>	<b>Category:</b> Supplemental Benefit	<b>Benefit/Service Month:</b> 05/2019	
<b>Case Number:</b> <a href="#">CASE000</a>	<b>Case Name:</b> CASE PERSON		
<b>Program:</b> CalWORKs	<b>Sub-Category:</b> Replacement Benefit		

### Payee Information

<b>Payee: *</b> PAID PERSON	<b>Payee Address:</b> 000 STREET CITY, ST 00000	<b>Reference:</b>	<b>Secondary Payee:</b>
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### Basic Information

<b>Issuance Method: *</b> EBT	<b>Immediacy: *</b> Rush	<b>Payment Amount: *</b> 937.00	<b>Invoice Number:</b>
<b>Issue Date:</b> 07/17/2019	<b>Available Date:</b> 05/01/2019	<b>Account Number:</b> <a href="#">0000000000</a>	
<b>Status: *</b> Pending Deputy Approval	<b>Status Reason:</b> EBT Theft	<b>Electronic Theft Type: *</b> <div> - Select -  AB 2035 - Skimming  AB 2313 - Scam </div>	
<b>Related Issuance:</b> <a href="#">0000000001</a>			

### Financial Information

<b>Pay Code: *</b> Electronic Theft Replacement Cash Benefits	
<b>Aid Code:</b> 99 - Electronic Theft Replacement Cash Benefit	<b>Fund Code:</b>
<b>EDBC:</b> <a href="#">0000000000</a>	<b>Authorized Worker:</b> <a href="#">00000</a>

Affidavit
Save
Cancel

Last Updated On 05/01/2019 9:38:42 PM By: [000000](#)

**Figure 2.1.2 – Issuance Detail Page With Electronic Theft Type Create Mode (After [Replace] is clicked)**



### Issuance Detail

\*- Indicates required fields

Affidavit
Disapprove
Close

Control Number: *	Category: Supplemental Benefit	Benefit/Service Month: 05/2019
Case Number: <a href="#">CASE000</a>	Case Name: CASE PERSON	
Program: CalWORKs	Sub-Category: Replacement Benefit	

#### Payee Information

Payee: *	Payee Address:	Reference:
PAID PERSON	000 STREET CITY, ST 00000	

#### Basic Information

Issuance Method: EBT	Immediacy: Rush	Payment Amount: 937.00	Invoice Number:
Issue Date: 07/17/2019	Available Date:	Account Number: <a href="#">0000000000</a>	
Status: *	Status Reason:	Electronic Theft Type:	
Pending Deputy Approval	EBT Theft	AB 2035 - Skimming	
Related Issuance: <a href="#">0000000001</a>			

#### Financial Information

Pay Code: Electronic Theft Replacement Cash Benefits	
Aid Code: 99 - Electronic Theft Replacement Cash Benefit	Fund Code:
EDBC: <a href="#">0000000000</a>	Authorized Worker: <a href="#">00000</a>

#### Status History

Status	Reason	Date	Authorized By
Pending Deputy Approval	EBT Theft	07/17/2019 2:08:04 PM	<a href="#">0000000000</a>

Affidavit
Disapprove
Close

Last Updated On 07/17/2019 2:08:04 PM By: [00000](#)

This Type 1 page took 0.90 seconds to load.

Figure 2.1.3 – Issuance Detail Page With Electronic Theft Type View Mode



## Issuance Detail

\*- Indicates required fields

Affidavit Save Cancel

<b>Control Number:</b>	<b>Category:</b> Supplemental Benefit	<b>Benefit/Service Month:</b> 05/2019
<b>Case Number:</b> <a href="#">CASE000</a>	<b>Case Name:</b> CASE PERSON	
<b>Program:</b> CalWORKs	<b>Sub-Category:</b> Replacement Benefit	

### Payee Information

<b>Payee: *</b> PAID PERSON	<b>Payee Address:</b> 000 STREET CITY, ST 00000	<b>Reference:</b>	<b>Secondary Payee:</b>
--------------------------------	---	-------------------	-------------------------

### Basic Information

<b>Issuance Method: *</b> EBT	<b>Immediacy: *</b> Rush	<b>Payment Amount: *</b> 937.00	<b>Invoice Number:</b>
<b>Issue Date:</b> 07/17/2019	<b>Available Date:</b> 05/01/2019	<b>Account Number:</b> <a href="#">0000000000</a>	
<b>Status: *</b> Pending Deputy Approval	<b>Status Reason:</b> EBT Theft		
<b>Related Issuance:</b> <a href="#">0000000001</a>			

### Financial Information

<b>Pay Code: *</b> 1st Time Benefits Not Received	
<b>Aid Code:</b> 99 - Electronic Theft Replacement Cash Benefit	<b>Fund Code:</b>
<b>EDBC:</b> <a href="#">0000000000</a>	<b>Authorized Worker:</b> <a href="#">00000</a>

Affidavit Save Cancel

Last Updated On 05/01/2019 9:38:42 PM By: [000000](#)

**Figure 2.1.4 – Issuance Detail Page Without Electronic Theft Type Create Mode(After [Replace] button clicked)**



### 2.1.3 Description of Changes

- 1) Update Issuance Status Reason 'EBT Theft-AB 2035' to read 'EBT Theft'
- 2) In Basic Information section, add a new drop-down field 'Electronic Theft Type' which will be editable only when [Replace] is clicked (Create Mode).
  - a. available options are:
    - Select (no value)
    - value 'SK' and description 'AB 2035 – Skimming'
    - value 'SC' and description 'AB 2313 – Scam'
  - b. This field is **only** available for edit in create mode.
  - c. For LRS, this field is only displayed for edit with default value Select and is **mandatory** when [Replace] button is clicked and Pay Code in 'Financial Information' section of the page is set as one of following:
    - EO - Electronic Theft Replacement Cash Benefits
    - TB - Lost/Stolen EBT Benefits

When Pay Code is not set to one of the above, the 'Electronic Theft Type' is not visible in Create Mode. (see Figure 2.1.3 as an example)

**Note: For all GR cases, LRS is to default to Pay Code 'TB-Lost/Stolen EBT Benefit', whenever 'EBT Theft' or 'EBT Card Not Cancelled Timely' is selected from the Status Reason drop-down list.**

- d. For C-IV, this field is only displayed for edit with default value Select and is **mandatory** when [Replace] button is clicked and Pay Code in 'Financial Information' section of the page is set as following:
    - ET - Electronic Theft Replacement Cash Benefits (ETRCB)

When Pay Code is not set to the above, the 'Electronic Theft Type' is not visible in Create Mode. (see Figure 2.1.3 as an example)

- e. Display validation message 'Electronic Theft Type - Field is required. Please select a value.' when users submit this field empty for both LRS and C-IV.
  - f. This field is available for view only when having a non-blank value. Also, for all issuances created before the implementation of this SCR, this field is not visible because it is blank.

Note: System test and development team will ensure 'Electronic Theft Type' maintain its value as an issuance detail is updated by users or the system (batch and interface).

### 2.1.4 Page Location

No Change.



### 2.1.5 Counties Impacted

All CalACES Counties.

### 2.1.6 Security Updates

No Change.

### 2.1.7 Page Mapping

'Electronic Theft Type' is mapped to 'Electr\_Thft\_Type\_Code' of 'Issuance\_Detl' table. Please add below statement as column's comment:

This column stores electronic theft type of a benefit replacement. 'SK' indicates a cash benefit replacement due to skimming. 'SC' indicates a cash benefit replacement due to scam. This field is null when a replacement is not due to electronic theft.

## 2.2 Data Change Request

- 1) In Catgry table, insert a new record with below attributes:  
CATGRY\_NAME: Electronic Theft Type  
REFER\_TABLE\_IND: N
- 2) In Code\_Detl table, insert two new records as below:

CODE_NUM_IDENTIF	CATGRY_ID	SHORT_DECODE_NAME	LONG_DECODE_NAME	BEG_DATE	END_DATE
SK	(ID of new Catgry record above)	AB 2035 - Skimming	AB 2035 - Skimming	1/1/1000	12/31/9999
SC	(ID of new Catgry record above)	AB 2313 - Scam	AB 2313 - Scam	1/1/1000	12/31/9999

## 2.3 Database Change Request

- 1) Add a nullable column 'Electr\_Thft\_Type\_Code' with data type VARCHAR2(3 Byte) on 'Issuance\_Detl' table and the default value are null. This field is to identify electronic theft type of a cash benefit replacement.  
'SK' indicates a cash benefit replacement due to skimming.  
'SC' indicates a cash benefit replacement due to scam.  
This field is null when a replacement is not due to electronic theft.
- 2) Set default value to null for existing records when creating this column.



## **2.4 Implement a Report - TEMP 2035 EBT THEFT - Skimming**

### **2.4.1 Overview**

Report Description: A county reimbursement claim for Electronic Benefit Transfer (EBT) replacement due to electronic theft – Skimming.

Implement the TEMP 2035 EBT THEFT - Skimming layout per the attached (TEMP 2035 EBT THEFT - Skimming.xls) file.

### **2.4.2 TEMP 2035 EBT THEFT – Skimming – Mockups**

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### 2.4.2.1 Summary Worksheet

[illegible]

**Figure 2.1.2.1 - 1 Summary Worksheet**



## 2.4.2.2 Issuances Worksheet

TEMP 2035 - Skimming													
San Bernardino													
Report Month: 12/2018													
Run Date: JAN-02-19 06:51 PM													
<a href="#">Summary</a>													
Issuances													
Totals Issuances: 0 Amount: \$0.00													
Reporting Column	Program	Object	Department Object	Case Number	Case Name	Payee Name	Control Number	Benefit Month	Availability Date	Transaction Date	Authorizing Worker ID	Amount	

TEMP 2035 Skimming Issuances Recoveries of Aid Prior Month Adjustments

Figure 2.1.2.2 - 1 Issuances Worksheet

## 2.4.2.3 Recoveries of Aid Worksheet

TEMP 2035 - Skimming											
San Bernardino											
Report Month: 12/2018											
Run Date: JAN-02-19 06:51 PM											
<a href="#">Summary</a>											
Recoveries of Aid											
Totals Transactions: 0 Amount: \$0.00											
Reporting Column	Program	Case Number	Case Name	Payee Name	Transaction Number	Account Number	Benefit Month	Transaction Date	Authorizing Worker ID	Amount	

TEMP 2035 Skimming Issuances Recoveries of Aid Prior Month Adjustments

Figure 2.4.2.3 - 1 Recoveries of Aid Worksheet



### 2.4.2.4 Prior Month Adjustments Worksheet

Figure 2.4.2.4 - 1 Prior Month Adjustments Worksheet

**\*Note: C-IV version of Report will display the C-IV logo in the worksheets and LRS logo will display in the LA County version as required.**

### 2.4.3 Base Criteria

- An Electronic Theft Replacement Cash Benefit (ETRCB) is determined to be issued and claimed when there is a transaction date within the report month in Fiscal History and the Pay Code is 'ET', 'EO' or 'TB'.
- Query to include CalFresh program with the 'ET', 'EO' or 'TB' pay code to identify SUAS EBT THEFT Repayments.
- All LRS Programs use AID\_CODE 99 with the exceptions of RCA (Original issuance aid code = 01) and TCVAP (Original issuance aid code = 1V or R1). Whereas all C-IV Programs use AID\_CODE 99.
- The 'Electr\_Thft\_Type\_Code' value of the issuance is 'SK' for 'AB 2035 – Skimming' or 'SC' for 'AB 2013 – Scam' based on the particular report section in the document.
- The Pay Code of the claimed transaction is one of the following:

Pay_Code	Category ID	Short Description	CalACES/ C-IV
ET	623	Electronic Theft Replacement Cash Benefits (ETRCB)	C-IV



Pay_Code	Category ID	Short Description	CalACES/ C-IV
EO	623	Electronic Theft Replacement Cash Benefits	LRS
TB	623	Lost/Stolen EBT Benefits	LRS

**Table 2.1.3 - 1 Base Criteria**

#### 2.4.4 Report Attributes

Attribute	Description/Value
Name	TEMP 2035 EBT THEFT – Skimming
Report Type	Scheduled
Report Format	Excel
Data Reference	Production Database
Archiving	N/A
Frequency	This report will run on the 1st business day of each month with the same dependencies as the existing TEMP 2035 report in C-IV

**Table 2.4.4 - 1 Report Attributes**

#### 2.4.5 Report Summary

Report Title:

COUNTY REIMBURSEMENT CLAIM FOR ELECTRONIC BENEFIT TRANSFER (EBT)  
REPLACEMENT DUE TO ELECTRONIC THEFT BY SKIMMING - AB 2035 (2012)



### 2.1.5.1 Summary Header Description

Column Header	Field Description and use in C-IV	Field Description and use in LRS
CalWORKs Cash Assistance	Contains; Cal-Learn, CalWORKs, Homeless Permanent, Homeless Temporary, Immediate Need, Welfare to Work and Diversion program information	Contains; Cal-Learn, CalWORKs, Homeless Permanent, Homeless Temporary, Immediate Need, Welfare to Work and Diversion program information.
TCVAP Cash Assistance	As this Program is not tracked in C-IV. Column will not contain information for C-IV reports.	Contains: Trafficking and Crime Victims Assistance Program. Program of RCA with an Original Issuance Aid Code = 1V or replacements for original issuances with Aid Code = R1. Data for row 3 is combined with, and seen under, RCA Cash Assistance.
RCA Cash Assistance	Contains; Refugee Cash Assistance program information	Contains; Refugee Cash Assistance program information. Program of RCA with an Original Issuance Aid Code = 01. Data for row 3 is combined with TCVAP data.
CAPI Cash Assistance	Contains; Cash Assistance Program for Immigrants program information	Contains; Cash Assistance Program for Immigrants program information.
SUAS Cash Assistance	Contains; State Utility Assistance Subsidy program information for CalFresh program.	Contains; State Utility Assistance Subsidy program information for CalFresh program.
GA/GR Cash Assistance	Contains; GA = County Administered General Assistance/General Relief and GM = General Assistance (Managed) in counties that choose to distribute assistance.  <b>Note;</b> GA/GR data is not to be included in State Reimbursement report.	Contains; County Administered GA General Assistance/General Relief in counties that chose to distribute assistance and GW for GROW program information.  <b>Note;</b> GA/GR data is not to be included in State Reimbursement report.

**Table 2.4.5.1 - 1 Summary Header Descriptions**



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### 2.4.5.2 Summary Line Description

Summary Line Name	Field Description
Line 1 > Select the Program Name	This line of the automated report will be populated with data to be selected in the State report. Values are described in column one of Table 2.1.5.1 - 1.
Line 2 > Total reimbursement amount for actual expenditures associated with the theft of EBT cash benefits by skimming in current claiming month	This line will populate the total dollar amount of actual expenditures associated with the theft of EBT cash benefits by skimming claimed during the report month. Dollar amounts will be rounded down to the nearest whole dollar.
Line 3 > Recoveries of Aid Prior AB 2035 issuances	This Line will populate the total dollar amount of recovery account transactions posted in the month for ETRCB recovery accounts. Dollar amounts will be rounded down to the nearest whole dollar. Data for TCVAP and RCA are combined under RCA.
Line 4 > Prior Month Positive Adjustments.	This line will populate the total dollar amount of positive adjustment transactions for ETRCB issuances claimed during the report month. Dollar amounts will be rounded down to the nearest whole dollar.
Line 5 > Prior Month Negative Adjustments.	This line will populate the total dollar amount of negative adjustment transactions for ETRCB issuances claimed during the report month. Dollar amounts will be rounded down to the nearest whole dollar.
Line 6 > Total Net Obligations for Reimbursement (Sum Lines #2 and #4, less Lines #3 and #5)	This line will populate the total amount of expenditures (Line 2) plus the total amount of prior month positive adjustments (Line 4) minus Recoveries of Aid (Line 3) minus prior month negative adjustments (Line 5).
Line 7 > Total Number of Payments Issued.	This line will populate the total number of payments issued and claimed during the report month for ETRCB issuances.



**Table 2.4.5.2 - 2 Summary Line Descriptions**

### 2.4.6 Report Worksheet Field Level Definition

All report worksheets contain details providing backup information to the summary page and will present a common header.

Field Name	Field Description
Title	TEMP 2035 - Skimming
<County Name>	Specified county for which the report was generated
Report Month:	Date of Report Month formatted as; mm/yyyy
Run Date:	Date and time the report was generated with the format as MON-dd-yy HH:MM AM/PM

**Table 2.4.6 - 1 Worksheet Header Descriptions**

#### 2.4.6.1 Report Worksheet – Issuances

Title: Issuances

- The report will contain a detail sheet to provide backup information for Line 2 of the Summary Page.
- A Totals line will show “Issuances” as the total number of Issuances in the Report Month and the “Amount” will show the total amount formatted as \$00.00 for the Report Month.
- The Summary field will provide a URL link to the Summary Page.
- Below are the column names included in the Issuances Detail Worksheet.



Column Name	Field Description
Reporting Column	The column in which the record is counted on the TEMP 2035 EBT THEFT – Skimming Summary Page for these entries: <ul style="list-style-type: none"> <li>• CalWORKs</li> <li>• TCVAP</li> <li>• RCA</li> <li>• CAPI</li> <li>• SUAS</li> <li>• GA/GR</li> </ul>
Program	The decoded program type associated to the Issuance.
Object	This column contains Accounting String information.
Department Object	This column stores the Accounting Department object code.
Case Number	The Case Number of the Case associated to the Issuance.
Case Name	The Case Name of the Case associated to the Issuance.
Payee Name	The name of the Payee associated to the Issuance. The name will be formatted as the first name, last name.
Control Number	The Control Number of the issuance (i.e. warrant number, service payment issuance number).
Benefit Month	The benefit month of the Issuance formatted as "mm/yyyy".
Availability Date	The availability date of the Issuance formatted as "mm/dd/yyyy".
Transaction Date	The transaction date of the Issuance formatted as "mm/dd/yyyy".
Authorizing Worker ID	The worker number of the authorizing worker associated to the Issuance.
Amount	The dollar amount of the Issuance formatted as \$00.00.

**Table 2.4.6.1 - 1 Issuances Worksheet Descriptions**

#### **2.4.6.2 Report Worksheet – Recoveries of Aid**

Title: Recoveries of Aid

- The report will contain a detail sheet to provide backup information for Line 3 of the Summary Page.



- A Totals line will show "Transactions" as the total number of transactions in the Report Month and the "Amount" will show the total amount formatted as \$00.00 for the Report Month.
- The Summary field will provide a URL link to the Summary Page.
- Below are the column names included in the Recovery of Aid Detail Worksheet.

Column Name	Field Description
Reporting Column	The column in which the record is counted on the TEMP 2035 EBT THEFT – Skimming Summary Page for these entries: <ul style="list-style-type: none"> <li>• CalWORKs</li> <li>• TCVAP</li> <li>• RCA</li> <li>• CAPI</li> <li>• SUAS</li> <li>• GA/GR</li> </ul>
Program	The decoded program type associated to the Recoveries of Aid.
Case Number	The Case Number of the Case associated to the Recoveries of Aid.
Case Name	The Case Name of the Case associated to the Recoveries of Aid.
Payee Name	The name of the Payee associated to the Recovery of Aid. The name will be formatted as the first name, last name.
Transaction Number	The Transaction Number of the recovery transaction.
Account Number	The Recovery Account Number associated to the recovery transaction.
Benefit Month	The benefit month of the Issuance formatted as "mm/yyyy".
Transaction Date	The transaction date of the Recovery of Aid formatted as "mm/dd/yyyy".
Authorizing Worker ID	The worker number of the authorizing worker associated to the Recovery of Aid.
Amount	The dollar amount of the Recovery of Aid formatted as \$00.00.

**Table 2.4.6.2 - 1 Recoveries of Aid Worksheet Descriptions**



### 2.4.6.3 Report Worksheet – Prior Month Adjustments

Title: Prior Month Adjustments

- The report will contain a detail sheet to provide backup information for Lines 4 and 5 of the Summary Page.
- A 'Totals' line will show 'Adjustments' as the total number of Adjustments in the Report Month and the 'Amount' will show the Total amount formatted as \$00.00 for the Report Month.
- The Summary field will provide a URL link to the Summary Page.
- Below are the column names included in the Prior Month Adjustments Detail Worksheet.

Column Name	Field Description
Reporting Column	The column in which the record is counted on the TEMP 2035 EBT THEFT – Skimming Summary Page for these entries: <ul style="list-style-type: none"><li>• CalWORKs</li><li>• TCVAP</li><li>• RCA</li><li>• CAPI</li><li>• SUAS</li><li>• GA/GR</li></ul>
Program	The decoded program type associated to the Prior Month Adjustments.
Object	This column contains Accounting String information.
Department Object	This column stores the Accounting Department object code.
Case Number	The Case Number of the Case associated to the Prior Month Adjustments.
Case Name	The Case Name of the Case associated to the Prior Month Adjustments.
Payee Name	The name of the Payee associated to the Prior Month Adjustments. The name will be formatted as the first name, last name.



Column Name	Field Description
Adjustment Type	Indicates the type of adjustment. The possible values will be "Positive" and "Negative". "Positive" adjustment transactions are counted towards Line 4. "Negative" Adjustment Transactions are counted towards Line 5 of the Summary Page.
Control Number	The Control Number of the recovery transaction.
Benefit Month	The benefit month of the Prior Month Adjustments formatted as "mm/yyyy".
Availability Date	The availability date of the adjustment formatted as "mm/dd/yyyy".
Transaction Date	The transaction date of the Prior Month Adjustments formatted as "mm/dd/yyyy".
Authorizing Worker ID	The Worker ID number of the authorizing worker associated to the Prior Month Adjustments.
Amount	The dollar amount of the Prior Month Adjustments formatted as \$00.00.

**Table 2.4.6.3 - 1 Prior Months Adjustments Worksheet Descriptions**



## 2.4.7 Report Location

- Global Navigation: Reports
- Local Navigation: Scheduled
- Task: State
- Report Search: TEMP 2035 EBT THEFT – Skimming
- Report Description: County Reimbursement Claim For EBT Replacement Due To Electronic Theft By Skimming

## 2.4.8 Security Update

Security Right	Right Description	Right to Group Mapping
TEMP2035EBTTHEFT–Skimming	TEMP 2035 EBT THEFT – Skimming;	C-IV/LRS: State Reports LRS: LRS Reports Access – State Reports.

**Table 2.4.8 - 1 Security Right Update**

Security Group	Group Description	Group to Role Mapping
State Reports	State Reports	N/A – Group to Role mappings will not be modified.
LRS Reports Access - State Reports	Report access for state reports	N/A – Group to Role mappings will not be modified.

**Table 2.4.8 - 2 Security Group Update**



## **2.5 Implement a Report - TEMP 2313 EBT THEFT - Scam**

### **2.5.1 Overview**

Report Description: A county reimbursement claim for Electronic Benefit Transfer (EBT) replacement due to electronic theft – Scam.

Implement the TEMP 2313 EBT THEFT - Scam layout per the attached (TEMP 2313 EBT THEFT - Scam.xls) file.

### **2.5.2 TEMP 2313 EBT THEFT – Scam – Mockups**

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### 2.5.2.1 Summary Worksheet

A	B	C	D	E	F	G	H	I
		STATE OF CALIFORNIA - HEALTH AND HUMAN SERVICES AGENCY				CALIFORNIA DEPARTMENT OF SOCIAL SERVICES		
		<b>COUNTY REIMBURSEMENT CLAIM FOR ELECTRONIC BENEFIT TRANSFER (EBT) REPLACEMENT DUE TO ELECTRONIC THEFT BY SCAMS – AB 2313 (2018)</b>	County:		Date (Month Year):			
			San Bernardino		12/2018			
<b>EBT THEFT BY PROGRAM</b>								
1	Select the Program Name	CalWORKs Cash Assistance	TCVAP Cash Assistance	RCA Cash Assistance	CAPI Cash Assistance	SUAS Cash Assistance	GA/GR Cash Assistance	
2	Total reimbursement amount for actual expenditures associated with the theft of EBT cash benefits by scams in current claiming month	\$0	\$0	\$0	\$0	\$0	\$0	
3	Recoveries of Aid for Prior AB 2313 issuances:	\$0	\$0	\$0	\$0	\$0	\$0	
4	Prior Month Positive Adjustments:	\$0	\$0	\$0	\$0	\$0	\$0	
5	Prior Month Negative Adjustments:	\$0	\$0	\$0	\$0	\$0	\$0	
6	Total Net Obligations for Reimbursement (Sum Lines #2 and #4, less Lines #3 and #5):	\$0	\$0	\$0	\$0	\$0	\$0	
7	Total Number of Payments Issued:	0	0	0	0	0	0	
<b>COUNTY WELFARE DIRECTOR'S CERTIFICATION</b>								
I hereby certify, under penalty of perjury, that I am the official responsible for the administration of the public welfare programs in said county; that I have not violated any of the provisions of Sections 1030 to 1036, inclusive, of the Government Code; that the amounts of the aid payments, aid repayments and adjustments reflected herein have been made in accordance with all provisions of the Welfare and Institutions Code and the rules and regulations of the California Department of Social Services.								
Signature of County Welfare Director			Date					
<b>COUNTY AUDITOR'S CERTIFICATION</b>								
I hereby certify, under penalty of perjury, that I am the officer in said county responsible for the examination and settlement of accounts; that I have not violated any of the provisions of Sections 1030 to 1036, inclusive, of the Government Code; that the amounts reported herein are in accordance with authorizations for the above-referenced public assistance programs made by the county; that the amounts of the aid payments, aid repayments and adjustments reflected herein have been made according to law and the rules and regulations of the California Department of Social Services.								
Signature of County Auditor			Date					
Last Modified 06/13/2019								

**Figure 2.5.2.1 - 1 Summary Worksheet**



	A	B	C	D	E	F	G	H	I	J	K	L	M												
1		<b>TEMP 2313 - Scam</b>																							
2	<b>San Bernardino</b>																								
3	<b>Report Month: 12/2018</b>																								
4	<b>Run Date: JAN-02-19 06:51 PM</b>																								
5													<a href="#">Summary</a>												
6	Issuances																								
7																									
8	Totals	Issuances:						0	Amount:				\$0.00												
9																									
10	Reporting Column ▾	Program ▾	Object ▾	Department Object ▾	Case Number ▾	Case Name ▾	Payee Name ▾	Control Number ▾	Benefit Month ▾	Availability Date ▾	Transaction Date ▾	Authorizing Worker ID ▾	Amount ▾												
11																									
12																									
13																									
14																									
15																									
16																									
17																									
18																									

Navigation bar: TEMP 2313 SCAM | Issuances | Recoveries of Aid | Prior Month Adjustments | +

### 2.2.2.3 Recoveries of Aid Worksheet

[illegible]

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## 2.5.2.4 Prior Month Adjustments Worksheet

Figure 2.5.2.4 - 1 Prior Month Adjustments Worksheet

**\*Note: C-IV version of Report will display the C-IV logo in the worksheets and LRS logo will display in the LA County version as required.**

### 2.5.3 Base Criteria

- An Electronic Theft Replacement Cash Benefit (ETRCB) is determined to be issued and claimed when there is a transaction date within the report month in Fiscal History and the Pay Code is 'ET', 'EO' or 'TB'.
- Query to include CalFresh program with the 'ET', 'EO' or 'TB' pay code to identify SUAS EBT THEFT Repayments.
- All LRS Programs use AID\_CODE 99 with the exceptions of RCA (Original issuance aid code = 01) and TCVAP (Original issuance aid code = 1V or R1). Whereas all C-IV Programs use AID\_CODE 99.
- The 'Electr\_Thft\_Type\_Code' value of the issuance is 'SK' for 'AB 2035 – Skimming' or 'SC' for 'AB 2013 – Scam' based on the particular report section in the document.
- The Pay Code of the claimed transaction is one of the following:

Pay_Code	Category ID	Short Description	CalACES/ C-IV
ET	623	Electronic Theft Replacement Cash Benefits (ETRCB)	C-IV



Pay_Code	Category ID	Short Description	CalACES/ C-IV
EO	623	Electronic Theft Replacement Cash Benefits	LRS
TB	623	Lost/Stolen EBT Benefits	LRS

**Table 2.5.3 - 1 Base Criteria**

## 2.5.4 Report Attributes

Attribute	Description/Value
Name	TEMP 2313 EBT THEFT – Scam
Report Type	Scheduled
Report Format	Excel
Data Reference	Production Database
Archiving	N/A
Frequency	This report will run on the 1st business day of each month with the same dependencies as the existing TEMP 2035 report in C-IV

**Table 2.5.4 - 1 Report Attributes**



## 2.5.5 Report Summary

Report Title:

COUNTY REIMBURSEMENT CLAIM FOR ELECTRONIC BENEFIT TRANSFER (EBT)  
REPLACEMENT DUE TO ELECTRONIC THEFT BY SCAM - AB 2313 (2018).

### 2.5.5.1 Summary Header Description

Column Header	Field Description and use in C-IV	Field Description and use in LRS
CalWORKs Cash Assistance	Contains; Cal-Learn, CalWORKs, Homeless Permanent, Homeless Temporary, Immediate Need, Welfare to Work and Diversion program information.	Contains; Cal-Learn, CalWORKs, Homeless Permanent, Homeless Temporary, Immediate Need, Welfare to Work and Diversion program information.
TCVAP Cash Assistance	As this Program is not tracked in C-IV. Column will not contain information for C-IV reports.	Contains: Trafficking and Crime Victims Assistance Program. Program of RCA with an Original Issuance Aid Code = 1V or replacements for original issuances with Aid Code = R1. Data for row 3 is combined with, and seen under, RCA Cash Assistance.
RCA Cash Assistance	Contains; Refugee Cash Assistance program information.	Contains; Refugee Cash Assistance program information. Program of RCA with an Original Issuance Aid Code = 01. Data for row 3 is combined with TCVAP data.
CAPI Cash Assistance	Contains; Cash Assistance Program for Immigrants program information.	Contains; Cash Assistance Program for Immigrants program information.
SUAS Cash Assistance	Contains; State Utility Assistance Subsidy program information for CalFresh program.	Contains; State Utility Assistance Subsidy program information for CalFresh program.



Column Header	Field Description and use in C-IV	Field Description and use in LRS
GA/GR Cash Assistance	Contains; GA = County Administered General Assistance/General Relief and GM = General Assistance (Managed) in counties that choose to distribute assistance.  <b>Note;</b> GA/GR data is not included in State Reimbursement report.	Contains; County Administered GA General Assistance/General Relief in counties that chose to distribute assistance and GW for GROW program information.  <b>Note;</b> GA/GR data is not included in State Reimbursement report.

**Table 2.5.5.1 - 1 Summary Header Descriptions**

### 2.5.5.2 Summary Line Description

Summary Line Name	Field Description
Line 1 > Select the Program Name	This line of the automated report will be populated with data to be selected in the State report. Values are described in column one of Table 2.2.5.1 - 1.
Line 2 > Total reimbursement amount for actual expenditures associated with the theft of EBT cash benefits by skimming in current claiming month	This line will populate the total dollar amount of actual expenditures associated with the theft of EBT cash benefits by skimming claimed during the report month. Dollar amounts will be rounded down to the nearest whole dollar.
Line 3 > Recoveries of Aid Prior AB 2035 issuances	This Line will populate the total dollar amount of recovery account transactions posted in the month for ETRCB recovery accounts. Dollar amounts will be rounded down to the nearest whole dollar. <b>Data for TCVAP and RCA are combined under RCA.</b>
Line 4 > Prior Month Positive Adjustments.	This line will populate the total dollar amount of positive adjustment transactions for ETRCB issuances claimed during the report month. Dollar amounts will be rounded down to the nearest whole dollar.



Summary Line Name	Field Description
Line 5 > Prior Month Negative Adjustments.	This line will populate the total dollar amount of negative adjustment transactions for ETRCB issuances claimed during the report month. Dollar amounts will be rounded down to the nearest whole dollar.
Line 6 > Total Net Obligations for Reimbursement (Sum Lines #2 and #4, less Lines #3 and #5)	This line will populate the total amount of expenditures (Line 2) plus the total amount of prior month positive adjustments (Line 4) minus Recoveries of Aid (Line 3) minus prior month negative adjustments (Line 5).
Line 7 > Total Number of Payments Issued.	This line will populate the total number of payments issued and claimed during the report month for ETRCB issuances.

**Table 2.5.5.2 - 1 Summary Line Descriptions**

## 2.5.6 Report Worksheet Field Level Definition

All report worksheets contain details providing backup information to the summary page and will present a common header.

Field Name	Field Description
Title	TEMP 2313 – Scam
<County Name>	Specified county for which the report was generated
Report Month:	Date of Report Month formatted as; mm/yyyy
Run Date:	Date and time the report was generated with the format as MON-dd-yy HH:MM AM/PM

**Table 2.5.6 - 1 Worksheet Header Descriptions**

### 2.5.6.1 Report Worksheet – Issuances

Title: Issuances

- The report will contain a detail sheet to provide backup information for Line 2 of the Summary Page.



- A Totals line will show “Issuances” as the total number of Issuances in the Report Month and the “Amount” will show the total amount formatted as \$00.00 for the Report Month.
- The Summary field will provide a URL link to the Summary Page.
- Below are the column names included in the Issuance Detail Worksheet.

Column Name	Field Description
Reporting Column	The column in which the record is counted on the TEMP 2313 EBT THEFT – Scam Summary Page for these entries: <ul style="list-style-type: none"> <li>• CalWORKs</li> <li>• TCVAP</li> <li>• RCA</li> <li>• CAPI</li> <li>• SUAS</li> <li>• GA/GR</li> </ul>
Program	The decoded program type associated to the Issuance.
Object	This column contains Accounting String information.
Department Object	This column stores the Accounting Department object code.
Case Number	The Case Number of the Case associated to the Issuance.
Case Name	The Case Name of the Case associated to the Issuance.
Payee Name	The name of the Payee associated to the Issuance. The name will be formatted as the first name, last name.
Control Number	The Control Number of the issuance (i.e. warrant number, service payment issuance number).
Benefit Month	The benefit month of the Issuance formatted as "mm/yyyy".
Availability Date	The availability date of the Issuance formatted as "mm/dd/yyyy".
Transaction Date	The transaction date of the Issuance formatted as "mm/dd/yyyy".
Authorizing Worker ID	The worker number of the authorizing worker associated to the Issuance.
Amount	The dollar amount of the Issuance formatted as \$00.00.

**Table 2.5.6.1 - 1 Issuances Worksheet Descriptions**



### 2.5.6.2 Report Worksheet – Recoveries of Aid

Title: Recoveries of Aid

- The report will contain a detail sheet to provide backup information for Line 3 of the Summary Page.
- A Totals line will show "Transactions" as the total number of transactions in the Report Month and the "Amount" will show the total amount formatted as \$00.00 for the Report Month.
- The Summary field will provide a URL link to the Summary Page.
- Below are the column names included in the Recovery of Aid Detail Worksheet.

Column Name	Field Description
Reporting Column	The column in which the record is counted on the TEMP 2313 EBT THEFT – Scam Summary Page for these entries: <ul style="list-style-type: none"><li>• CalWORKs</li><li>• TCVAP</li><li>• RCA</li><li>• CAPI</li><li>• SUAS</li><li>• GA/GR</li></ul>
Program	The decoded program type associated to the Recoveries of Aid.
Case Number	The Case Number of the Case associated to the Recoveries of Aid.
Case Name	The Case Name of the Case associated to the Recoveries of Aid.
Payee Name	The name of the Payee associated to the Recovery of Aid. The name will be formatted as the first name, last name.
Transaction Number	The Transaction Number of the recovery transaction.
Account Number	The Recovery Account Number associated to the recovery transaction.
Benefit Month	The benefit month of the Issuance formatted as "mm/yyyy".
Transaction Date	The transaction date of the Recovery of Aid formatted as "mm/dd/yyyy".



Column Name	Field Description
Authorizing Worker ID	The worker number of the authorizing worker associated to the Recovery of Aid.
Amount	The dollar amount of the Recovery of Aid formatted as \$00.00.

**Table 2.5.6.2 - 1 Recoveries of Aid Worksheet Descriptions**

### 2.5.6.3 Report Worksheet – Prior Month Adjustments

Title: Prior Month Adjustments

- The report will contain a detail sheet to provide backup information for Lines 4 and 5 of the Summary Page.
- A 'Totals' line will show 'Adjustments' as the total number of Adjustments in the Report Month and the 'Amount' will show the Total amount formatted as \$00.00 for the Report Month.
- The Summary field will provide a URL link to the Summary Page.
- Below are the column names included in the Prior Month Adjustments Detail Worksheet.

Column Name	Field Description
Reporting Column	The column in which the record is counted on the TEMP 2313 EBT THEFT – Scam Summary Page for these entries: <ul style="list-style-type: none"> <li>• CalWORKs</li> <li>• TCVAP</li> <li>• RCA</li> <li>• CAPI</li> <li>• SUAS</li> <li>• GA/GR</li> </ul>
Program	The decoded program type associated to the Prior Month Adjustments.
Object	This column contains Accounting String information.
Department Object	This column stores the Accounting Department object code.



Column Name	Field Description
Case Number	The Case Number of the Case associated to the Prior Month Adjustments.
Case Name	The Case Name of the Case associated to the Prior Month Adjustments.
Payee Name	The name of the Payee associated to the Prior Month Adjustments. The name will be formatted as first name, last name.
Adjustment Type	Indicates the type of adjustment. The possible values will be "Positive" and "Negative". "Positive" adjustment transactions are counted towards Line 4. "Negative" Adjustment Transactions are counted towards Line 5 of the Summary Page.
Control Number	The Control Number of the recovery transaction.
Benefit Month	The benefit month of the Prior Month Adjustments formatted as "mm/yyyy".
Availability Date	The availability date of the adjustment formatted as "mm/dd/yyyy".
Transaction Date	The transaction date of the Prior Month Adjustments formatted as "mm/dd/yyyy".
Authorizing Worker ID	The Worker ID number of the authorizing worker associated to the Prior Month Adjustments.
Amount	The dollar amount of the Prior Month Adjustments formatted as \$00.00.

**Table 2.5.6.3 - 1 Prior Months Adjustments Worksheet Descriptions**



## 2.5.7 Report Location

- Global Navigation: Reports
- Local Navigation: Scheduled
- Task: State
- Report Search: TEMP 2313 EBT THEFT – Scam
- Report Description: County Reimbursement Claim For EBT Replacement Due To Electronic Theft By Scam

## 2.2.8 Security Update

Security Right	Right Description	Right to Group Mapping
TEMP2313EBTTHEFT–Scam	TEMP 2313 EBT THEFT – Scam;	C-IV/LRS: State Reports LRS: LRS Reports Access – State Reports.



**Table 2.5.8 - 1 Security Right Update**

Security Group	Group Description	Group to Role Mapping
State Reports	State Reports	N/A – Group to Role mappings will not be modified.
LRS Reports Access - State Reports	Report access for state reports	N/A – Group to Role mappings will not be modified.

**Table 2.5.8 - 2 Security Group Update**



### 3 SUPPORTING DOCUMENTS

Number	Functional Area	Description	Attachment
CA-208374 CIV 104094	Reports	Update Electronic Theft Replacement and Reporting	CA-208374 - TEMP 2035 EBT THEFT – Skimming Mockup.xls  CA-208374 - TEMP 2035 EBT THEFT - Skir
CA-208374 CIV 104094	Reports	Update Electronic Theft Replacement and Reporting	CA-208374 - TEMP 2313 EBT THEFT – ScamMockup.xls  CA-208374 - TEMP 2313 EBT THEFT - Sca

### 4 REQUIREMENTS

#### 4.1 Project Requirements

REQ #	REQUIREMENT TEXT	How Requirement Met
2.24.1.11	The LRS shall support all reports required by federal, State, and local laws, rules, regulations, ordinances, guidelines, directives, policies, and procedures, including statistical, operational, workload, and fiscal reports.	The two new reports being introduced are mandated by the state as described in the requirement. Implementation will meet requirement 2.24.1.11.

#### 4.2 Migration Requirements

DDID #	REQUIREMENT TEXT	How Requirement Met
N/A		



## 5 MIGRATION IMPACTS

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SCR Number	Functional Area	Description	Impact	Priority	Address Prior to Migration?
N/A					

## 6 OUTREACH

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N/A

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