November 17, 2014

ALL COUNTY LETTER (ACL) NO. 14-83

TO: ALL COUNTY WELFARE DIRECTORS

SUBJECT: WORK INCENTIVE NUTRITIONAL SUPPLEMENT (WINS) MONTHLY CASELOAD REPORT WINS 2 (10/14)

REFERENCE: ACL NO. 13-71, DATED SEPTEMBER 10, 2013, IMPLEMENTATION OF THE WORK INCENTIVE NUTRITIONAL SUPPLEMENT (WINS) PROGRAM AUTOMATION

ACL NO. 09-07, DATED MARCH 5, 2009, CALIFORNIA’S TEMPORARY ASSISTANCE FOR NEEDY FAMILIES (TANF) WORK VERIFICATION PLAN (WVP) EFFECTIVE OCTOBER 1, 2008

ACL NO. 14-27, DATED APRIL 2, 2014, COUNTY TEMPORARY ASSISTANCE FOR NEEDY FAMILIES (TANF) PROGRAM WORK PARTICIPATION DATA REPORTING FOR FEDERAL FISCAL YEAR (FFY) 2014

This letter informs the counties that effective with the October 2014 report month, counties are required to submit data on the WINS program by submitting the Work Incentive Nutritional Supplement Caseload Report (WINS 2) monthly report form.

The WINS program provides a ten dollar ($10) per month additional food supplement benefit for each WINS-eligible CalFresh and California Food Assistance Program (CFAP) household. The monthly WINS report provides data on the number of CalFresh Non-Public Assistance households and persons participating in the federal and state CalFresh programs who are eligible for WINS benefits.
WINS Eligibility

WINS benefit will be given to all CalFresh recipients meeting the WINS eligibility requirement. The requirements are listed as follows:

- Must be a household receiving CalFresh, but not receiving CalWORKs or Tribal TANF;
- Must have a child in the home under age 18, or under the age of 19 if the child meets the requirements of Welfare and Institutions Code (W&IC) Section 11253;
- Must have at least one parent/caretaker who is receiving CalFresh and meeting the federal TANF definition of a “work-eligible individual (WEI)” in accordance with 45 Code of Federal Regulations (CFR) Part 261.2(n) and Title 42 United States Code (USC) Section 607;
- Must have the WEI participating in a sufficient number of hours in work activities that meet federal TANF work participation hours requirements under Title 42 (USC) Section 607 for subsidized or unsubsidized employment, which are as follows:
  - 20 hours per week for single custodial parents/caretakers with a child under the age of six;
  - 30 hours per week for non-two parent/caretakers with children age six or older;
  - 35 hours per week for two-parent/caretaker families; and
- Must provide acceptable documentation when requested that the household met the federal work requirements for subsidized or unsubsidized employment, in accordance with the federally approved work verification plan (ACL NO. 14-27).

Counties must continue to report the federal and state CFAP benefit amounts issued to households composed of federal and state persons on the DFA 256 report.
To complete the electronic form, counties are to download a copy of the WINS 2 form from the California Department of Social Services, Data Systems and Survey Design Bureau (DSSDB) website by using the following link: [http://www.cdss.ca.gov/dssdb/](http://www.cdss.ca.gov/dssdb/). The electronic form contains the form and links to the instructions and validations. All counties are required to submit the report via e-mail to DSSDB at admwins2@dss.ca.gov by the 20th calendar day of the month following the report month. However, due to the timing of this notification and in order to allow adequate time for counties and consortia to accommodate these changes, both the October and November reports are due on December 22, 2014. The WINS 2 form, instructions and validations are attached in PDF as reference material.

If you have any questions regarding the completion of this report, please contact DSSDB at (916) 651-8269. Any Program related questions should be directed to CalFresh Policy Unit-C at (916) 654-1896.

Sincerely,

**Original Document Signed By:**

M. AKHTAR KHAN, Chief
Research Services Branch
Administration Division

Attachments
# Work Incentive Nutritional Supplement (WINS)
## Monthly Caseload Report

**WINS 2**

### PART A. NON-PUBLIC ASSISTANCE (NA) CALFRESH (CF) HOUSEHOLDS APPROVED FOR WINS BENEFITS (NO CFAP)

<table>
<thead>
<tr>
<th>COUNTY NAME</th>
<th>VERSION</th>
<th>REPORT MONTH</th>
<th>REPORT YEAR</th>
</tr>
</thead>
</table>

1. New NACF households approved during the month with the family eligible to a WINS Separate State Program-Maintenance of Effort (SSP MOE) benefit (Item 1a plus Item 1b)…
   - a. One-Parent.
   - b. Two-Parent (Sum of Item 6 Column A and Item 9 Column A).

2. Total NACF households approved for SSP MOE funded WINS benefit during the month (Item 2a plus Item 2b).
   - a. One-Parent (Includes Item 1a households).
   - b. Two-Parent (Includes Item 1b households).

3. Of the households in Item 2, persons approved for WINS (SSP MOE) during the month (Item 3a plus Item 3b).
   - a. Adults
   - b. Children

4. NACF households with WINS (SSP MOE) eligibility that ended during the month (Item 4a plus Item 4b).
   - a. One-Parent
   - b. Two-Parent

### PART B. WINS CASELOAD (NO CFAP)

5. Non-two parent/caretaker relative households approved for WINS and Non-Public Assistance CalFresh (R4) during the month.

6. Two-parent households approved for WINS and Non-Public Assistance CalFresh during the month.

7. Non-two parent/caretaker relative and two-parent households approved for WINS and California Food Assistance Program (CFAP) benefits (R6) during the month.

8. Non-two parent/caretaker relative households approved for WINS and Transitional CalFresh (TCF) benefits (R7) during the month.

9. Two-parent households approved for WINS and TCF benefits (R8) during the month.

10. Non-two parent/caretaker relative and two-parent CFAP households approved for WINS and Transitional CFAP benefits (R9) during the month.

### PART C. WINS CASELOAD BY AID CODES

<table>
<thead>
<tr>
<th>New Cases (A)</th>
<th>Ongoing Cases (B)</th>
</tr>
</thead>
<tbody>
<tr>
<td>13</td>
<td>14</td>
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<td>15</td>
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<td>21</td>
<td>22</td>
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<td>23</td>
<td>24</td>
</tr>
</tbody>
</table>

### COMMENTS

**REVISED REPORT EXPLANATION**

**CONTACT PERSON**

**TELEPHONE**

**EXTENSION**

**FAX**

**JOB TITLE/CLASSIFICATION**

**E-MAIL**

**DATE SUBMITTED**

**DOWNLOAD REPORT FORM FROM:**

[http://www.cdss.ca.gov/dssdb](http://www.cdss.ca.gov/dssdb)

**E-MAIL REPORT FORM TO:**

admwins2@dss.ca.gov
WORK INCENTIVE NUTRITIONAL SUPPLEMENT (WINS)
MONTHLY CASELOAD REPORT
WINS 2 (10/14)

INSTRUCTIONS

CONTENT

The WINS program provides a ten dollar ($10) per month additional food supplement benefit for each WINS-eligible CalFresh and California Food Assistance Program (CFAP) household. The monthly WINS report provides data on the number of CalFresh Non-Public Assistance households and persons participating in the federal and state CalFresh programs who are eligible for the WINS program.

PURPOSE

This report provides county, state, and federal entities with information needed for budgeting, staffing, and program planning.

COMPLETION AND SUBMISSION

The County Welfare Department (CWD) is responsible for ensuring that this report is fully and accurately completed. If portions of the report are completed by more than one entity within the CWD and/or by outside agencies, the contact person responsible for submitting the report to the state shall review the report for completeness and accuracy prior to submittal. Reports are to be received on or before the 20th calendar day of the month following the report month. If the report’s due date is on a Saturday, Sunday or state holiday, the report is due on the next business day.

If a county determines that a revision is needed to its previously submitted report, the county shall submit a revised report for the applicable month(s). The California Department of Social Services’ (CDSS) policy requires counties to revise current State Fiscal Year (FY) reports and two prior FYs if needed. Revisions involving additional fiscal years will be evaluated by CDSS and the county to determine the corrections needed.

Download an Excel version of the report form from [http://www.cdss.ca.gov/dssdb](http://www.cdss.ca.gov/dssdb), complete the downloaded form, and e-mail to CDSS, Data Systems and Survey Design Bureau (DSSDB) at admwins2@dss.ca.gov. The electronic form contains automatic computation of some cells and provides e-mail transmission of completed forms to DSSDB. The website contains specific instructions and guidance. If you have questions regarding completion or submission of the report, contact DSSDB at (916) 651-8269.

For reference purposes, copies of the report form and instructions can be downloaded from the CDSS Research and Data Reports (RADR) website at [http://www.cdss.ca.gov.research/](http://www.cdss.ca.gov.research/). The report’s released monthly statewide and county-specific data is also available on the website. CWDs are encouraged to review their data on the website each month to confirm the county’s data coincides with the data on file at CDSS.

GENERAL INSTRUCTIONS

Enter in the boxes provided at the top of the form the county’s name, report version (Initial or Revised) and enter the report month and year.

Enter the data required for each item. Enter “0” if there is nothing to report for an item. **Do not leave any items blank** unless otherwise instructed. If your county does not provide a particular service/activity or the service/activity is provided but the county is unable to collect or track the data, enter “0” and explain in the Comments box.
GENERAL INSTRUCTIONS (Continued)

Enter in the boxes provided at the bottom of the form the contact name, job title or classification, telephone number, fax number, and e-mail address of the person to contact if there are questions about the report. This person may or may not be the person who completed the report. Enter the date the report is submitted. This is the date when the report is e-mailed to DSSDB.

DEFINITIONS

Approved: Authorized to receive WINS benefits with an assigned WINS aid code.

CalFresh Household: A CalFresh household is an individual or group of individuals who live together and customarily purchase and prepare meals together for home consumption.

California Food Assistance Program (CFAP): This includes aid codes R6 WINS for non-two or two-parent/caretaker relative households receiving CFAP benefits and R9 WINS for non-two or two-parent/caretaker relative CFAP households receiving Transitional CFAP benefits.

Child: A child is a person who is a member of a CalFresh household and is under the age of 18 or is enrolled as a full-time student in high school or a vocational or technical program, before reaching the age of 19. A minor parent shall be considered a child only if he/she is included in a CalFresh household with a senior parent.

Federal Fiscal Year: The federal fiscal year (FFY) is from October 1 through September 30. The first quarter of the FFY is from October 1 through December 31.

New Cases: Cases that did not receive a WINS benefit in the previous month.

Ongoing Cases: Cases that received a WINS benefit in the previous month.

Transitional CalFresh (TCF): Former Public Assistance CalFresh households, whose CalWORKs grant is discontinued, can receive up to five months of TCF. These households will be classified as Non-Public Assistance CalFresh cases as they are no longer receiving CalWORKs cash aid.

WINS Non-Two Parent/Caretaker Relative Households: All families that have not been identified as either a Two-Parent or a Zero Parent family, must be non-disabled, and receiving WINS benefits. This includes aid code R4 WINS for non-two parent/caretaker relative households receiving Non-Public Assistance CalFresh.

WINS Two-Parent Families: A two-parent family is a family with two work-eligible natural or adoptive parents (of the same minor child) living in the home, unless both are minors and neither is a head-of-household. This includes aid code R5 WINS for two-parent/caretaker relative households receiving Non-Public Assistance CalFresh. For two-parent work participation rate calculation purposes, a work-eligible step-parent may be considered when determining a parent with a minor child in a two-parent family. A family with one or more work-eligible individual, but not two parents, is only included in the overall work participation rate, unless disregarded.

ITEM INSTRUCTIONS

PART A. NON-PUBLIC ASSISTANCE (NA) CALFRESH (CF) HOUSEHOLDS APPROVED FOR WINS BENEFITS (NO CFAP) (Item 1)

Part A summarizes WINS total CalFresh new cases during the report month. Part A does not include CFAP cases.
ITEM INSTRUCTIONS (Continued)

1. New NACF households approved during the report month with the family eligible to a WINS Separate State Program-Maintenance of Effort (SSP MOE) benefit (Item 1a plus Item 1b): **This item is automatically calculated.** This is the sum of Items 1a and 1b. This item does not include CFAP cases. [Cell 1]
   a. One-Parent: Enter the number of households approved for new one-parent cases. Do not include CFAP cases. [Cell 2]
   b. Two-Parent: Enter the number of households approved for new two-parent cases. Do not include CFAP cases. [Cell 3]

<table>
<thead>
<tr>
<th>PART B. WINS CASELOAD (NO CFAP) (Items 2 through 4)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Part B summarizes WINS total CalFresh new and on-going cases during the report month. Part B does not include CFAP cases. For purposes of this report, “cases,” “families,” and “households” are interchangeable, but “recipients” refers to the number of individuals in participating families.</td>
</tr>
<tr>
<td>NOTE: These are unduplicated counts of WINS families: report each case only once. If a person applies for WINS benefits in June and is determined eligible for benefits in July for both June and July, the household is counted in Item 1 only once in July.</td>
</tr>
</tbody>
</table>

2. Total NACF households authorized to receive SSP MOE funded WINS benefit during the report month (Item 2a plus Item 2b): **This item is automatically calculated.** This is the sum of Items 2a and 2b. [Cell 4]
   a. One-Parent: Enter the number of SSP MOE one-parent cases authorized to receive a WINS benefit during the report month. This count includes the Item 1a households. [Cell 5]
   b. Two-Parent: **This item is automatically calculated.** This is the number of SSP MOE two-parent cases authorized to receive a WINS benefit during the report month. This is the sum of Item 6 Column A and Item 9 Column A. This count includes the Item 1b households. [Cell 6]

3. Of the households in Item 2, persons authorized to receive for WINS (SSP MOE) during the month (Item 3a plus Item 3b): **This item is automatically calculated.** This is the sum of Items 3a and 3b. [Cell 7]
   a. Adults: Enter the number of adults, of the households in Item 2, authorized to receive a WINS benefit during the report month. [Cell 8]
   b. Children: Enter the number of children, of the households in Item 2, authorized to receive a WINS benefit during the report month. [Cell 9]

4. NACF households with WINS (SSP MOE) eligibility that ended during the month (Item 4a plus Item 4b): **This item is automatically calculated.** This is the sum of Items 4a and 4b. [Cell 10]
   a. One-Parent: Enter the number of closed cases during the report month with one-parent families. [Cell 11]
   b. Two-Parent: Enter the number of closed cases during the report month with two-parent families. [Cell 12]
ITEM INSTRUCTIONS (Continued)

### PART C. WINS CASELOAD BY AID CODES (Items 5 through 10)

Part C summarizes WINS total new and on-going cases by aid codes during the report month.

5. **Non-two parent/caretaker relative households approved for WINS and Non-Public Assistance CalFresh (R4) during the month:** Enter the number of non-two parent/caretaker relative new cases authorized to receive WINS benefits during the report month in Column A. Enter the number of non-two parent/caretaker relative ongoing cases authorized to receive WINS benefits during the report month in Column B. \[Cell \text{13-14}\]

6. **Two-parent households approved for WINS and Non-Public Assistance CalFresh (R5) during the month:** Enter the number of two-parent new cases authorized to receive WINS benefits during the report month in Column A. Enter the number of two-parent ongoing cases authorized to receive WINS benefits during the report month in Column B. \[Cell \text{15-16}\]

7. **Non-two parent/caretaker relative and two-parent households approved for WINS and California Food Assistance Program (CFAP) benefits (R6) during the month:** Enter the number of non-two parent/caretaker relative and two-parent new cases authorized to receive WINS benefits during the report month in Column A. Enter the number of non-two parent/caretaker relative and two-parent ongoing cases authorized to receive WINS benefits during the report month in Column B. \[Cell \text{17-18}\]

8. **Non-two parent/caretaker relative households approved for WINS and Transitional CalFresh (TCF) benefits (R7) during the month:** Enter the number non-two parent/caretaker relative new cases authorized to receive WINS benefits during the report month in Column A. Enter the number non-two parent/caretaker relative ongoing cases authorized to receive WINS benefits during the report month in Column B. \[Cells \text{19-20}\]

9. **Two-parent households approved for WINS and TCF benefits (R8) during the month:** Enter the number of two-parent new cases authorized to receive WINS benefits during the report month in Column A. Enter the number of two-parent ongoing cases authorized to receive WINS benefits during the report month in Column B. \[Cells \text{21-22}\]

10. **Non-two parent/caretaker relative and two-parent CFAP households approved for WINS and Transitional CFAP benefits (R9) during the month:** Enter the number of new cases that have non-two parent/caretaker relative and two-parent CFAP households authorized to receive WINS benefits during the report month in Column A. Enter the number of ongoing cases that have non-two parent/caretaker relative and two-parent CFAP households authorized to receive WINS benefits during the report month in Column B. \[Cells \text{23-24}\]

**COMMENTS**

Use the Comments section to:

- In the Comments box explain any “0” data entry for an item if the county does not provide the service/activity or if the county is unable to collect or track the data.
- In the Comments box explain any major fluctuations in data, including major changes in procedures, programming or staffing that have affected the data.
- In the Comments box provide any other comments the county determines necessary.
- In the Revised Report Explanation box explain the reason for a revised report.
WORK INCENTIVE NUTRITIONAL SUPPLEMENT (WINS)  
MONTHLY CASELOAD REPORT  
WINS 2  
VALIDATION RULES AND EDITS

CELLS 1 - 24
Each data cell in this report must be a whole number equal to or greater than zero (0). Enter no decimals. No data cells should be left blank.

**Initial reports**: If "Initial" is selected, the "Revised Report Explanation" box near the bottom of the report form must be left blank.

**Revised reports**: If "Revised" is selected, enter the reasons for the revision in the "Revised Report Explanation" box near the bottom of the report form.

### PART A. NON-ASSISTANCE (NA) CALFRESH (CF) HOUSEHOLDS APPROVED FOR WINS BENEFITS (NO CFAP)

<table>
<thead>
<tr>
<th>Item 1</th>
<th>Item 1 must be equal to (Item 1a plus Item 1b)</th>
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<tbody>
<tr>
<td>Cell 1</td>
<td>Cell 1 must be equal to (Cell 2 plus Cell 3)</td>
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</table>

<table>
<thead>
<tr>
<th>Item 1b</th>
<th>Item 1b must be equal to (Item 6 Column A plus Item 9 Column A)</th>
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<tbody>
<tr>
<td>Cell 3</td>
<td>Cell 3 must be equal to (Cell 15 plus Cell 21)</td>
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### PART B. WINS CASELOAD (NO CFAP)

<table>
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<tr>
<th>Item 2</th>
<th>Item 2 must be equal to (Item 2a plus Item 2b)</th>
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<tbody>
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<td>Cell 4</td>
<td>Cell 4 must be equal to (Cell 5 plus Cell 6)</td>
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<thead>
<tr>
<th>Item 2</th>
<th>Item 2 must be equal to (Item 5 Columns A and B plus Item 6 Columns A and B plus Item 8 Columns A and Column B plus Item 9 Columns A and B)</th>
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<table>
<thead>
<tr>
<th>Item 2</th>
<th>If Item 2 is 0, then Item 3 must be 0.</th>
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<tbody>
<tr>
<td>Cell 4</td>
<td>If Cell 4 is 0, then Cell 7 must be 0.</td>
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<table>
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<tr>
<th>Item 2a</th>
<th>Item 2a must be greater than or equal to Item 1a</th>
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<tbody>
<tr>
<td>Cell 5</td>
<td>Cell 5 must be greater than or equal to Cell 2</td>
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</table>

<table>
<thead>
<tr>
<th>Item 2b</th>
<th>Item 2b must be greater than or equal to Item 1b</th>
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</thead>
<tbody>
<tr>
<td>Cell 6</td>
<td>Cell 6 must be greater than or equal to Cell 3</td>
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</table>

<table>
<thead>
<tr>
<th>Item 3</th>
<th>Item 3 must be equal to (Item 3a plus Item 3b)</th>
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</thead>
<tbody>
<tr>
<td>Cell 7</td>
<td>Cell 7 must be equal to (Cell 8 plus Cell 9)</td>
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<table>
<thead>
<tr>
<th>Item 3</th>
<th>If Item 3 is 0, then Item 2 must be 0.</th>
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<tbody>
<tr>
<td>Cell 7</td>
<td>If Cell 7 is 0, then Cell 4 must be 0.</td>
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<table>
<thead>
<tr>
<th>Item 3a</th>
<th>Item 3a must be greater than or equal to Item 2</th>
</tr>
</thead>
<tbody>
<tr>
<td>Cell 8</td>
<td>Cell 8 must be greater than or equal to Cell 4</td>
</tr>
</tbody>
</table>
**Item 3b**  Item 3b must be greater than or equal to Item 2

**Cell 9**  Cell 9 must be greater than or equal to Cell 4

**Item 4**  Item 4 must be equal to (Item 4a plus Item 4b)

**Cell 10**  Cell 10 must be equal to (Cell 11 plus Cell 12)

**Item 4a**  Item 4a must be less than or equal to Item 2a

**Cell 11**  Cell 11 must be less than or equal to Cell 5

**Item 4b**  Item 4b must be less than or equal to Item 2b

**Cell 12**  Cell 12 must be less than or equal to Cell 6

**PART C. WINS CASELOAD BY AID CODES**

No validation edits