Change Request Guidance

DSS provider staff should submit change requests to SkillUP.Missouri@dss.mo.gov, after supervisor approval. **Do not send these requests to DHEWD directly**. Most change requests can be completed by DSS/OWCI staff. Those that cannot be completed will be sent to DHEWD for completion by DSS/OWCI staff.

Change requests must be submitted by the 15th of the month following quarter end. It is imperative that requests are submitted timely to ensure accurate data is reported to the Food and Nutrition Service (FNS). It might be helpful to set a calendar reminder to review cases for possible changes prior to the end of the quarter.

Federal Fiscal Year Quarters and Change Request Due Dates:

Quarter	Months	Due Date
Q1	October, November, December	January 15th
Q2	January, February, March	April 15th
Q3	April, May, June	July 15th
Q4	July, August, September	October 15th

Important information to note:

➢ Emails should be encrypted when sending requests. See "*Encryption Guidance*" here: Additional Resources | Missouri Department of Social Services

➢ Do not submit more than 5 change requests per email.

➢ Only one change request form should be submitted per participant, even if requesting multiple changes. (refer to Example 2)

➢ Use the **State ID** when submitting change requests, please do not use the SSN or DCN.

➢ In the "*Data To Be Changed"* section, put what the system reflects currently.

➢ In the "*Change Data To"* section, put what you want DSS staff to change in the system to make it correct.

➢ Make sure to include the reasoning in the "*Documented Justification For Change*" section.

➢ Change requests not signed and dated by a supervisor will be returned to the sender for the approval signature and date.

➢ **SkillUP Application un-exit requests do NOT require a change request form. Please see the SkillUP Handbook for the policy on this procedure.**

Services/Activities/Enrollments:

- ❖ Please include:
  - ➢ Activity service code (e.g. 101 Orientation)
  - ➢ Activity ID # (e.g. 6487721)
  - ➢ Actual and projected dates of the services as they are listed in MoJobs
  - ➢ What date needs to be changed (e.g. change actual begin date to 4/01/2025 and change actual end date to 4/30/2025).
  - ➢ What the completion code should reflect (e.g. successful or unsuccessful)
- ❖ Deletion/Void: Activities/services/enrollments will not be deleted; only voided.
- ❖ Additions/Changes: Activities needing to be backdated must be entered prior to submitting change requests. DSS staff will not enter activities on behalf of case managers. If case is exited, send an email to SkillUP to determine resolution.
- ❖ Provide clear and detailed explanation of change(s) being requested. This includes justifications for changes.
- ❖ Documentation may be requested by DSS staff to verify information for backdating a service/activity/enrollment.

Case Notes:

- ❖ Please include:
  - ➢ Case note ID number
  - ➢ Subject
- ❖ Deletion/Void: Case notes will only be deleted if they are attached to the incorrect participant or if the note contains confidential information such as PHI.
- ❖ Additions/Changes: It is not necessary to enter a change request to add, change, or correct information in a case note, staff should enter the additional or corrected information in a new case note and reference the original case note (e.g. participant also completed IEP with staff on 4/01/2025 addition to case note #3257).
- ❖ Sometimes it is necessary to request a 'contact date' be changed on a Case Note for clarity. This will have to be on a case-by-case basis, and DSS/OWCI staff will determine if the change is necessary. The 'create date' cannot be changed.

Individual Employment Plan (IEP) and Objective Assessment Summary (OAS):

- ❖ Please include:
    - ➢ IEP and/or OAS number (e.g. OAS 43282)
    - ➢ Goal number (for IEP only)
    - ➢ Full name of objective (IEP only)
    - ➢ Provide the # of the IEP and the # of the goal when requesting changes.
- ❖ Be sure to state in full, what the Goal Description should be when requesting adjustments. (e.g. Goal Description should read: Submit application for CMT course with State Fair Community College)
- ❖ The IEP and OAS will not be backdated if the participant is not actively working with a provider. Staff will need to enter a case note explaining when the IEP, IEP goal, IEP objective or OAS should have been entered in the system.

Documents:

- ❖ Please include:
    - ➢ Document Name
    - ➢ Document Modify Date
- ❖ Deletion: Documents will only be deleted if they are attached to the incorrect participant or if they contain confidential information such as PHI.

How to navigate different scenarios:

Situation 1: Belle Beauty is participating in a 361 activity and their benefits lapsed for one month, causing the SNAP application to exit and 361 activity to system close. Belle is still actively participating in the 361 activity and has regained her SNAP benefits.

❖ **What do I need:** Case manager will need to submit a current and completed DCN verification and a completed change request form to the SkillUP inbox requesting that 1. The SkillUP application be unexited and 2. That the 361 activity be reopened. The DCN verification needs to be separate from the change request form. Please ensure to follow the guidelines listed in the examples on the following pages.

Situation 2: Johnny Jobseeker began training on 05/01/2024, however his case manager forgot to enter the 361 activity. His SNAP benefits lapsed for one month, causing the SNAP application to exit while he was in training. Johnny regained his SNAP benefits on 07/01/2024; on 7/10/2024 his case manager realizes they did not enter the 361.

❖ **What do I need:** Case manager will need to submit a current and completed DCN verification with an unexit request to the SkillUP inbox, making sure to include all the information in the unexit request example found in the SkillUP Handbook. After receiving confirmation that the application has been reopened, the case manager will then enter the 361 activity with the dates the system allows. Once entered, the case manager will then submit a change request to the SkillUP inbox, requesting the dates for the 361 to be backdated to the correct dates. Please ensure to follow the guidelines listed in the examples on the following pages.

Situation 3: Case manager entered a case note regarding participant Mandi Cooper's dependents. However, the information initially given to the case manager was not correct.

❖ **What do I need:** Case manager does not need to submit a change request to have case note deleted. Case manager should enter a clarifying case note to explain the error and reference the previous case note ID number.

Example 1 (single change):

Instructions:
1. COMPLETE **ALL** RELEVANT FIELDS
2. SIGN DIGITALLY, RENAME, RESAVE
3. Complete IQ Webform, then upload this form into MoJobs case note.
4. **FSD CONTRACTORS SEND TO:** Skillup.Missouri@dss.mo.gov

MoJobs
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RECORD CHANGE REQUEST

TO BE COMPLETED BY SENDING AGENCY

PROGRAM	MISSOURI JOB CENTER	LOCAL WORKFORCE DEVELOPMENT AREA
SNAP	JEFFERSON CITY	CENTRAL

CUSTOMER NAME	STATE ID	EMPLOYER SITE ID
Johnny Jobseeker	3123949801	3323

CASE MANAGER/STAFF NAME	PHONE NUMBER	EMAIL
Bailey Cooper	(573) 123-4567	email@gmail.com

TYPE OF DATA TO BE CHANGED
- ☐ Program Application
- ☐ Case Note
- ☐ IEP/OAS
- ☑ Activities/Enrollments
- ☐ Other:

DATA TO BE CHANGED (include dates, services, enrollments, etc.) CONTINUE ON PAGE 2 IF ADDITIONAL SPACE IS NEEDED.	**CHANGE DATA TO** (include dates, services, enrollments, etc.) CONTINUE ON PAGE 2 IF ADDITIONAL SPACE IS NEEDED.
PROGRAM: SNAP APPLICATION NUMBER: 6927653	
Activity 361 - FSD SkillUP Training, ID # 6450427. Actual begin date entered incorrectly as 7/25/2024.	Activity 361 - FSD SkillUP Training, ID # 6450427. Correct actual begin date to 8/25/2024.

DOCUMENTED JUSTIFICATION FOR CHANGE - CONTINUE ON PAGE 2 IF ADDITIONAL SPACE IS NEEDED.

Client did not begin training until 8/25/2024, this needs to be changed to the correct date for clarity and monitoring purposes.

☑ Functional Leader, Regional Manager, or local authorized representative has reviewed. **REQUIRED FIELD**	☑ **APPROVED** ☐ **DENIED** (If "Denied" is checked, complete "Reason for Denial" on page 2 of this form. Do not forward/email denied request to OWD, but keep on file in local office.) **REQUIRED FIELD**

FL, RM OR REPRESENTATIVE SIGNATURE (Click to sign, sign digitally only with your Acrobat Reader Digital Signature)   *Supervisor Lindsey*

INTERNAL USE ONLY

DATE RECEIVED	☐ OWD Central Office Programs and Services reviewer has reviewed this change	☐ **APPROVED** ☐ **PARTIAL APPROVAL** ☐ **WITHDRAWN** ☐ **DENIED** (If partially approved or denied is checked, complete Reason for Denial on this form. Return copy of denied or partially approved signed form to originating email address.) Forward approved change to OWD Customer Support Unit.

OWD CENTRAL OFFICE PROGRAMS AND SERVICES APPROVAL/DENIAL SIGNATURE	DATE REVIEWED	URGENT ☐

DATE RECEIVED	CHANGE COMPLETED BY	OPC TICKET NUMBER	DATE CHANGE(S) CMPL.	CSU TIME SPENT

DATE RECEIVED	ADDITIONAL SIGNATURE	DATE CHANGED	
			☐ Approved ☐ Partial Change ☐ Withdrawn ☐ Denied

Updated 4.2025

Example 2 (multiple changes):

RECORD CHANGE REQUEST

Save	Print	Reset

Instructions:
1. COMPLETE ALL RELEVANT FIELDS
2. SIGN DIGITALLY, RENAME, RESAVE
3. Complete IQ Webform, then upload this form into MoJobs case note.
4. **FSD CONTRACTORS SEND TO:** Skillup.Missouri@dss.mo.gov

TO BE COMPLETED BY SENDING AGENCY

PROGRAM	MISSOURI JOB CENTER	LOCAL WORKFORCE DEVELOPMENT AREA
SNAP	JEFFERSON CITY	CENTRAL

CUSTOMER NAME	STATE ID	EMPLOYER SITE ID
Belle Beauty	3125388606	

CASE MANAGER/STAFF NAME	PHONE NUMBER	EMAIL
Amanda Oppy	(573) 123-4567	email@gmail.com

TYPE OF DATA TO BE CHANGED
- ☐ Program Application
- ☐ Case Note
- ☐ IEP/OAS
- ☑ Activities/Enrollments
- ☐ Other:

DATA TO BE CHANGED (include dates, services, enrollments, etc.) CONTINUE ON PAGE 2 IF ADDITIONAL SPACE IS NEEDED.	CHANGE DATA TO (include dates, services, enrollments, etc.) CONTINUE ON PAGE 2 IF ADDITIONAL SPACE IS NEEDED.
PROGRAM SNAP — **APPLICATION NUMBER** 693317	
SNAP Application date AND SNAP Participation date Entered incorrectly as 1/17/2025 Activity 213 - Comprehensive Assessment Actual begin date is entered incorrect 01/17/2025 Activity 205 - Develop Service Strategies (IEP/ISS/EDP) Actual begin date is entered incorrect 01/17/2025	SNAP Application date AND SNAP Participation date Correct date to 08/21/2024 Activity 213 - Comprehensive Assessment Correct actual begin date to 08/21/2024 Activity 205 - Develop Service Strategies (IEP/ISS/EDP) Correct actual begin date to 08/21/2024

DOCUMENTED JUSTIFICATION FOR CHANGE - CONTINUE ON PAGE 2 IF ADDITIONAL SPACE IS NEEDED.

Corrected dates required for clarity and monitoring purposes. Late entry enrollment.

☑ Functional Leader, Regional Manager, or local authorized representative has reviewed. **REQUIRED FIELD**	☑ APPROVED ☐ DENIED (if "Denied" is checked, complete "Reason for Denial" on page 2 of this form. Do not forward/email denied request to OWD, but keep on file in local office.) **REQUIRED FIELD**

FL, RM OR REPRESENTATIVE SIGNATURE (Click to sign, sign digitally only with your Acrobat Reader Digital Signature)	*Supervisor Suzanne*

INTERNAL USE ONLY

DATE RECEIVED	☐ OWD Central Office Programs and Services reviewer has reviewed this change	☐ APPROVED ☐ PARTIAL APPROVAL ☐ WITHDRAWN ☐ DENIED (If partially approved or denied is checked, complete Reason for Denial on this form. Return copy of denied or partially approved signed form to originating email address.) Forward approved change to OWD Customer Support Unit.

OWD CENTRAL OFFICE PROGRAMS AND SERVICES APPROVAL/DENIAL SIGNATURE	DATE REVIEWED	URGENT ☐

DATE RECEIVED	CHANGE COMPLETED BY	OPC TICKET NUMBER	DATE CHANGE(S) CMPL.	CSU TIME SPENT

DATE RECEIVED	ADDITIONAL SIGNATURE	DATE CHANGED	☐ Approved ☐ Partial Change ☐ Withdrawn ☐ Denied

DWD-ADM-2 (03-2022)

PAGE 1
RECORD CHANGE REQUEST

Updated 4.2025

RECORD CHANGE REQUEST

MoJobs
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PROGRAM	MISSOURI JOB CENTER	LOCAL WORKFORCE DEVELOPMENT AREA
SNAP ▾	JEFFERSON CITY ▾	CENTRAL ▾

CUSTOMER NAME	STATE ID	EMPLOYER SITE ID
Belle Beauty	3125388606	

CASE MANAGER/STAFF NAME	CASE MANAGER/STAFF PHONE NUMBER	EMAIL
Amanda Oppy	(573) 123-4567	email@gmail.com

CON'T FROM PAGE 1 - DATA TO BE CHANGED OR REASON FOR DENIAL | CHANGE DATA TO

PROGRAM	APPLICATION NUMBER
SNAP ▾	693317

Activity 101 - Orientation
Actual being date is entered incorrect 01/17/2025

Activity/Funding source S10 - SkillUP TANF
Actual being date is entered incorrect 01/17/2025

Activity 103 - Provision of Information on Training Providers
Actual being date is entered incorrect 01/17/2025

CHANGE DATA TO

Activity 101 - Orientation
Correct actual begin date to 08/21/2024

Activity/Funding source S10 - SkillUP TANF
Correct actual begin date to 08/21/2024

Activity 103 - Provision of Information on Training Providers
Correct actual begin date to 08/21/2024

PROGRAM	APPLICATION NUMBER
SNAP ▾	OAS 48103

Assessment Create Date
Date entered incorrectly as 01/17/2025

Staff Completed Date
Date entered incorrectly as 01/17/2025

CHANGE DATA TO

Assessment Create Date
Correct date to 08/21/2024

Staff Completed Date
Correct date to 08/21/2024

PROGRAM	APPLICATION NUMBER
SNAP ▾	IEP 408673

620463 Training - ST-Complete NCCER training (Goal)
Date established entered incorrectly as 01/17/2025

620464 Schooling - LT- Obtain HISET (Goal)
Date established entered incorrectly as 01/17/2025

Objective - Show up to class everyday and show initiation
Objective - Attend AEL
Date established entered incorrectly for both as 01/17/2025

CHANGE DATA TO

620463 Training - ST-Complete NCCER training (Goal)
Correct date established to 08/21/2024

620464 Schooling - LT- Obtain HISET (Goal)
Correct date established to 08/21/2024

Objective - Show up to class everyday and show initiation
Objective - Attend AEL
Correct both date established to 08/21/2024

Updated 4.2025