Change Request ("CR") Submissions

General Instructions
1. Email CR Submissions to OUSF@occemail.com.
   a. Email subject line should be “OUSF – [Carrier] – CR Submission” or similar.
2. CR submission period is from the 26th to the 25th of the month for approval by the 25th of the following month.
   a. Example: A CR submission received between January 26 and February 25 will be evaluated by March 25 (unless the CR has to be deferred).
3. If a CR is approved, funding should be requested on the following month’s Monthly Payment Request (“MPR”) Worksheet.
   a. Example: A CR submission received between January 26 and February 25 will be evaluated by March 25 (unless the CR has to be deferred). If the CR is approved, the carrier can include the CR and catch-up amounts on the April MPR submission (due by April 10). Funding would be disbursed by April 25.
4. The Monthly Payment Team (“MPT”) may, in rare instances, find it necessary to defer CR submissions beyond the 25th of the month in order to gather more information or perform a more thorough review. The Administrator will cease current OUSF funding for any CR submission with outstanding issues not resolved within 60 days, and a new Application will be required in order to receive ongoing funding, pursuant to OAC 165:59-3-68(o).
5. The MPT will not hold documents from an incomplete CR submission. If a CR submission is not complete by the 25th, a new (complete) submission will be required during the next submission window.
6. The MPT will not review change requests for service changes occurring earlier than 18 months prior to the submission date.
7. Required CR documents:
   a. Change Request Form, which is a PDF document as described below.
   b. All attachments required as part of the Change Request Form, including Beneficiary’s Affidavit in Support of Request for Special Universal Services and all attachments thereto (see Section 4 instructions below)
   c. One Change Request Excel Worksheet that includes all change requests submitted in the submission window.
8. The MPT will send an email notification of CR approval or CR non-approval to the beneficiary and carrier within 60 days of the CR submission.
9. If you have any questions, you can send an email to the OUSF team at OUSF@occemail.com.

Change Request Form (PDF)
1. Section 1: Service Provider Information
   a. Enter the service provider name.
   b. Enter the date the CR Form was completed.
   c. Enter service provider contact information for the person(s) who can answer questions the MPT may have about the CR.
2. Section 2: Beneficiary Information
a. Select the beneficiary type from the dropdown menu.
b. Enter the beneficiary name.
c. Enter beneficiary contact information for the person(s) who can answer questions the MPT may have about the CR.

3. **Section 3: Change Request**
   a. Enter the Cause number in which funding was originally approved for the circuit.
   b. Enter the effective date of the change (i.e., the first day of the new price and/or bandwidth).
   c. Enter the type of change (invoice price, bandwidth, or both).
   d. Enter the type of service (Internet or WAN).
   e. Enter the bandwidth, circuit ID, and OUSF-eligible invoice amount of the circuit prior to the change.
   f. Enter the bandwidth, circuit ID, and OUSF-eligible invoice amount of the circuit after the change.
   g. Multiple circuits may be submitted as part of a single Change Request if they experience the same change (i.e., the same beneficiary, type of service, price, and bandwidth both before and after the change). In this case, provide a separate Excel worksheet with your submission summarizing the information in Section 3.

4. **Section 4: Required Attachments**
   a. The beneficiary’s Affidavit in Support of Preapproval or Request for Special Universal Services, including all attachments. The Affidavit is available on the OUSF website at [http://www.occeweb.com/pu/OUSF/OUSF.htm](http://www.occeweb.com/pu/OUSF/OUSF.htm).
   b. All relevant invoices, including the invoice immediately prior to the effective date of the change, the invoice containing the effective date of the change, and any later invoices containing service credits or adjustments related to the change.
   c. The contract, agreement, or service order which governs the service, along with any amendments, addenda, or supplemental schedules.

5. **Section 5: Optional Comments**
   a. A space is provided for comments. This is especially useful for CRs which are particularly complex, or which have unique circumstances that you wish to bring to the reviewer’s attention.

**Change Request Worksheet (Excel)**

1. **Introduction Tab**
   a. Enter the service provider ID (OK00###).
   b. Enter the service provider name.
   c. Enter the name of the submission preparer.
   d. Enter the date the change request worksheet was completed.

2. **Circuit Data Tab**
   a. Beneficiary/Circuit Name (column A)
      i. Use this space to identify the circuit – you may enter whatever is helpful to you here. While it is not recommended, you may leave it blank if you prefer.
ii. This column is primarily for your benefit. This information is not required and is not uploaded to the OUSF database.

b. Effective Date of Change (column B)
   i. Enter the date the change took place.

c. Circuit ID before change (column C)
   i. Enter the circuit ID prior to the change. May be the same as column D.

d. Circuit ID after change (column D)
   i. Enter the circuit ID after the change. May be the same as column C.

e. Bandwidth* (column E)
   i. Enter the bandwidth number only (no MB/GB identifiers) for service after the change took place.

f. Bandwidth Units (column F)
   i. Enter MB/GB (no numbers) for service after the change took place.

g. Actual Monthly Invoice Amount (column G)
   i. Enter the invoice amount here (including taxes, fees, items that aren’t OUSF eligible, etc.) for the requested service after the change took place. However, do not enter any amounts not related to the requested service (e.g., telephone charges should not be included for an Internet line).
      1. If the change took place in the middle of a billing period, enter the Monthly Invoice Amount for a full billing period. Do not prorate the Monthly Invoice Amount on this worksheet.
         a. Any necessary proration will take place on the Monthly Payment Request submission, if the requested change is approved.

h. OUSF Determined Monthly Invoice Amount (column H)
   i. Enter the OUSF Determined Invoice Amount here (this will exclude all taxes, fees, and non-OUSF eligible charges) for service after the change took place.
      1. If the change took place in the middle of a billing period, enter the full OUSF Determined Invoice Amount for a full billing period. Do not prorate the OUSF Determined Invoice Amount on this worksheet.
         a. Any necessary proration will take place on the Monthly Payment Request submission, if the requested change is approved.

i. Remarks (column I)
   i. Enter any comments you may have. This column is not required.

3. Check Data
   a. Once you have entered all data in the Circuit Data tab, return to the Introduction tab and click the green “Check Data Now” button to run the Check Data macro. A dialog box should pop up informing you of any errors; review and correct the errors (highlighted in red) and run the macro again.
   b. If you are having trouble running the Check Data macro, make sure macros are enabled in Excel.