ASAP Instructions

WIC, WIC INVOICE, WIC LAP, WIC REPORTS, WIC BF APPLICATION, MOWINS, VPN – LPHA WIC, and VDI – LPHA WIC

For ASAP assistance, contact the WIC Help Desk at 800-554-2544 or e-mail WICHelpDesk@health.mo.gov

An ASAP form must be completed to request access to WIC, WIC INVOICE, WIC LAP, WIC REPORTS, WIC BF APPLICATION, MOWINS, VPN – LPHA WIC, and VDI – LPHA WIC. This document provides instructions for submitting ASAP requests.

The ASAP form can be accessed on the web at:
https://webapp02.dhss.mo.gov/asap_web/ASAPLogin.aspx
Step 1 – Login to the Automated Security Access Process (ASAP) site.

Should the user choose to create a ‘NEW USER’ profile the following information will need to be entered:

Step 2 – Select who you are completing the ASAP request for, and then click ‘Next’.

If completing the ASAP for another employee, they must know the employees User ID and the last four of their social security number. If this is for a new employee follow instructions to ‘Create User Profile’.

Step 3 – Complete the ASAP form. More information specific to individual ASAP request is included later in this document.

Fill in the (*) required fields, print a copy of request for your records, and then ‘Submit Form’.

Step 4 – After the form has been submitted, it will be sent to the Local Security Officer (LSO) for that agency. It will have to be approved by the Local Security Officer before it is sent to the Program Security Officer (PSO) at the state agency. Once the ASAP is approved by the PSO, it will be sent to ITSD for processing.

Step 5 – Once the ASAP has been processed and approved, an e-mail will be sent to the email address listed at the top of the ASAP form. State agency will only forward notifications to approved internal email addresses; do not list any personal email accounts such as Yahoo, Gmail, etc. If you have any questions regarding an email that was sent to you, please call the MOWINS Help Desk for assistance.

Track all ASAP forms submitted. If a notification regarding access approval/denial is not received within 7 to 10 business days, call the MOWINS Help Desk.
WIC

WIC ASAP is to be completed when requesting access to the HDFS screen. To complete the ASAP all (*) required fields must be entered.

** When staff leave an agency an ASAP must be submitted to remove access; to do this the ‘Request Type’ above will be “DELETE ACCESS”.

** When staff have a name change an ASAP must be submitted to update the user profile, the ‘Request Type’ above will need to be “NAME CHANGE ONLY”.

Area Type: Select ‘MAINFRAME (DDP-137)’.

DDP-137 Area Type: Select ‘WIC’.

Action Type: Always select ‘Add Security Groups’.

Effective Date: Enter in the current date.

Request a different Mainframe area: Always set to ‘No’.

After clicking ‘I Agree’ to the statement provided, you can then click on the ‘Submit Form’ button.
WIC INVOICE

To get WIC INVOICE access, the below ASAP must be submitted. To complete the ASAP all (*) required fields must be entered.

<table>
<thead>
<tr>
<th>Denotes Required Fields</th>
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</thead>
<tbody>
<tr>
<td>*Area Type:</td>
</tr>
<tr>
<td>*Health Area Type:</td>
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<tr>
<td>*Request Type:</td>
</tr>
<tr>
<td>*Role:</td>
</tr>
<tr>
<td>*Other Role/Report Type:</td>
</tr>
</tbody>
</table>

** When staff leave an agency an ASAP must be submitted to remove access; to do this the ‘Request Type’ above will be “DELETE ACCESS”.

** When staff have a name change an ASAP must be submitted to update the user profile, the ‘Request Type’ above will need to be “NAME CHANGE”.

Area Type: Select ‘HEALTH APPLICATIONS’.

Health Area Type: Select ‘WIC INVOICE’.

Role: Local agencies should only select ‘WIC Agency’

Other Role/Report Type: Choose your agency.

Comments and/or reason for requesting access: Enter your reason for requesting access.

Effective Date: Enter in the current date.

Do you enter Data for Additional Agencies?: Y or N
If you choose yes, choose the additional County and Agency from the drop down menus in the box.

After clicking ‘I Agree’ to the statement provided, you can then click on the ‘Submit Form’ button.
WIC LAP

To get WIC LAP access, the below ASAP must be submitted. To complete the ASAP all (*) required fields must be entered.

** When staff leave an agency an ASAP must be submitted to remove access; to do this the ‘Request Type’ above will be “DELETE ACCESS”.

** When staff have a name change an ASAP must be submitted to update the user profile, the ‘Request Type’ above will need to be “NAME CHANGE”.

** Area Type**: Select ‘HEALTH APPLICATIONS’.

** Health Area Type**: Select ‘WIC LAP’.

** Role**: Select either ‘WIC Agency’ or ‘WIC Data Entry’. Local agency staff can have one of two roles to access the ‘WIC LAP’.

- **WIC AGENCY**: Can enter and review all LAP information in the LAP application.
- **WIC DATA ENTRY**: Can enter and review LAP information in the LAP application except for salary and benefit information.

** Other Role/Report Type**: Choose your agency.

** Comments and/or reason for requesting access**: Enter your reason for requesting access.

** Effective Date**: Enter in the current date.

** Do you enter Data for Additional Agencies?** Y or N
If you choose yes, choose the additional County and Agency from the drop down menus in the box.

After clicking ‘I Agree’ to the statement provided, you can then click on the ‘Submit Form’ button.
To have access to WIC REPORTS, or Crystal Reports, the following ASAP must be submitted. To complete the ASAP all (*) required fields must be entered.

** Area Type:** Select ‘HEALTH APPLICATIONS’.

** Health Area Type:** Select ‘WIC REPORTS’.

** Role:** Local agency staff should always select the first option.

** Other Role/Report Type:** Will always be set to NONE.

** Comments and/or reason for requesting access:** Enter your reason for requesting access.

** Effective Date:** Enter in the current date.

** Do you enter Data for Additional Agencies?:** Y or N

If you choose yes, choose the additional County and Agency from the drop down menus in the box.

After clicking ‘I Agree’ to the statement provided, you can then click on the ‘Submit Form’ button.

** When staff leave an agency an ASAP must be submitted to remove access; to do this the ‘Request Type’ above will be “DELETE ACCESS”.

** When staff have a name change an ASAP must be submitted to update the user profile, the ‘Request Type’ above will need to be “NAME CHANGE”.

Submit Form
WIC BF APPLICATION

To get WIC BF APPLICATION access the below ASAP must be submitted. To complete the ASAP all (*) required fields must be entered.

** When staff leave an agency an ASAP must be submitted to remove access; to do this the ‘Request Type’ above will be “DELETE ACCESS”.

** When staff have a name change an ASAP must be submitted to update the user profile, the ‘Request Type’ above will need to be “NAME CHANGE”.

** Area Type: Select ‘HEALTH APPLICATIONS’.
** Health Area Type: Select ‘WIC BF APPLICATION’.
** Role: Local agency staff should always select WIC BF APPLICANT.
** Other Role/Report Type: Choose your agency.
** Comments and/or reason for requesting access: Enter your reason for requesting access.
** Effective Date: Enter in the current date.
** Do you enter Data for Additional Agencies?: Y or N

If you choose yes, choose the additional County and Agency from the drop down menus in the box.

After clicking ‘I Agree’ to the statement provided, you can then click on the ‘Submit Form’ button.
MOWINS

To get MOWINS access the below ASAP must be submitted. To complete the ASAP all (*) required fields must be entered.

** If requesting a new role an ASAP request must be submitted with the ‘Request Type’ above being set to “CHANGE ACCESS”. Staff should enter in notes explaining why this request is being made in the ‘Comments’ section and if previous role needs to be removed.

** When staff leave an agency an ASAP must be submitted to remove access; to do this the ‘Request Type’ above will be “DELETE ACCESS”.

** If a staff person is transferring, needing access to an additional agency, or if there is a name change, an ASAP request must be submitted with the ‘Request Type’ above set to “OTHER OR TRANSFER”. Staff should enter in notes explaining why this request is being made in the ‘Comments’ section, and if access needs to be removed from previous site if applicable.
MOWINS Continued

Below is a list of local agency roles and permissions specific to each role that is available in MOWINS. When determining which access is needed please refer to the following information:

**AGENCY – VIEW:** Participant records can be viewed, and no records can be manipulated.

**AGENCY -CLERK/HPA:** Allows manipulation of demographics and most health information; excluding risk factors, SOAP notes, breastfeeding notes & contacts, and breast pump management.

**AGENCY–WIC CERTIFIER:** Grants full access to participant records for manipulation; excluding the ability to resolve high risk factors.

**AGENCY –WIC COORDINATOR:** Participant records can be viewed, and no records can be manipulated. This role does have access to build the agency/clinic schedule and additional administrative reporting through MOWINS.

**AGENCY –BF COORD/PEER COUNSELOR:** This role grants access to manipulate alerts, appointments, breastfeeding contacts & notes, breast pump management, demographics, nutrition education and referrals.

**AGENCY–CPA:** Grants full access to participant records for manipulation, excluding the ability to resolve high risk factors, and has access to build the agency/clinic schedule.

**AGENCY–NUTRITIONIST/NUTRITION COORD:** This role includes the access for all other roles (listed above) in MOWINS plus additional access to resolve high risk participants.

Please Note:

*If a user is a WIC Coordinator and a WIC Certifier or Clerk/HPA, both roles must be requested on the ASAP.

*Peer Counselors cannot be Certifiers, Nutritionist/Nutrition Coordinators, or CPAs.

*Peer Counselor Coordinators can be Nutritionist/Nutrition Coordinators, CPA, or Certifiers.

*All other roles labeled “State” are for state agency employee use only.
VDI – LPHA WIC

To get VDI – LPHA WIC access the below ASAP must be submitted. To complete the ASAP all (*) required fields must be entered.

** When staff leave an agency an ASAP must be submitted to remove access; to do this the ‘Request Type’ above will be “REMOVE VDI”.

VPN – LPHA WIC

To get VPN – LPHA WIC access the below ASAP must be submitted. To complete the ASAP all (*) required fields must be entered.

** When staff leave an agency an ASAP must be submitted to remove access; to do this the ‘Request Type’ above will be “DELETE VPN”.

VDI – Virtual Desktop Infrastructure – is requested when local agency staff that use a WIC computer to access state software such as the HDFS screen. Most WIC metro provider sites and WIC satellite sites will need to request this access.

VPN – Virtual Private Network – is requested when local agency staff will be using a WIC computer from home to access MOWINS and the HDFS Screen. If the current location prints birth and death certificates, then staff should request VPN access.