



## CO CDASS Case Manager Portal: Rate Revision Instructions

These instructions will provide support for the 7/1/2023 rate increases to guide Case Managers through the process in the Palco portal. For full instructions on using the Palco portal please view the full Case Manager Portal User Guide located [on our website](#).

### Revising an Existing Budget

1. Locate your client using the Search feature.
2. Click on the **"Budget"** tab on the left side.
3. Choose the PAR you would like to revise by selecting it in the "History" section at the top of the page.
  - a. **VERY IMPORTANT:** Make sure you are selecting the correct budget by verifying the start and end dates! If you see an error or a budget is missing, please stop and contact [CO-CDASS@palcofirst.com](mailto:CO-CDASS@palcofirst.com). You may need to enter an initial budget first before proceeding.
4. Click **"Create Revision"** (see screenshot on next page).

The screenshot displays the Palco portal interface for revising a budget. At the top, there are tabs for 'Entry' and 'Worksheet'. Below this is the 'CDASS Monthly Allocation & PAR' section with an 'ADD NEW' button. A 'History' table lists PARs with columns for Par Number, Eligibility Start, Eligibility End, Authorizations, Status, Created By, and Created At. The first row (622283) is highlighted in blue. Below the table, there are buttons for 'REVISION' and 'GO TO ORIGINAL', and a 'Status: SUBMITTED' indicator. Client information includes Name (Jack Tripper), Medicaid ID, and Waiver (EBD). The 'CDASS (Program Participation) Period' is shown as 01/01/2023 through 10/31/2023, with fields for DAYS (304) and MONTHS (10.00000000).

SERVICE	ADJUSTED RATE	HOURS/WEEK	PERIOD ALLOCATION	DAILY RATE	MONTHLY ALLOCATION
Homemaker	19.46	13.0	\$10986.56	\$36.14	\$1098.66
Personal Care	19.46	13.25	\$11199.36	\$36.84	\$1119.94
Health Maintenance Activities	30.59	2.75	\$3654.08	\$12.02	\$365.41
<b>Roll Forward: \$1.39</b>					
<b>Totals: \$25840.00</b>				<b>\$85.00</b>	<b>\$2585.39</b>

  

PRIOR AUTHORIZATION REQUEST SERVICE	MODIFIER	# OF UNITS	COST PER UNIT	TOTAL \$ AUTHORIZED	DAILY RATE
T2025 CDASS	U1	2584000	\$0.01	\$25840.00	\$85.00
T2040 PMPM	10		\$85.00	\$850.00	\$2.80
<b>Totals: \$26690.00</b>				<b>\$87.80</b>	

  

**REVISED TOTALS (ALL WORKSHEETS): 11/01/2022 through 10/31/2023**

PRIOR AUTHORIZATION REQUEST SERVICE	MODIFIER	# OF UNITS	COST PER UNIT	TOTAL \$ AUTHORIZED:	DAILY RATE
T2025 CDASS	U1	3093960	\$0.01	\$30939.60	\$84.77
T2040 PMPM	12		\$85.00	\$1020.00	\$2.79
<b>Totals: \$31959.60</b>				<b>\$87.56</b>	

At the bottom left, a 'CREATE REVISION' button is highlighted with a red box.



5. Using the “Add Revision” pop up screen, enter the effective date and verify it is correct selecting the check box. Once sure, click **“Create Revision”** (see screenshot below).
  - a. The rate increase will be effective **7/1/2023** for all CDASS members. Please use this as the revision Start Date.

### ADD REVISION

Current Worksheet Range: 01/01/2023 through 10/31/2023

Revision Start Date:

I'm sure the revision start date that I've chosen is correct.

CANCEL
CREATE REVISION

6. The new rates set by the state will automatically be loaded for dates of service effective 7/1/2023 and later. Verify that the annual units match the Bridge and click **“Save and Submit”** at the bottom. You can also delete the request entirely and start a new request.

PAR Number: 622283 REVISION Status: PENDING

[GO TO REVISED WORKSHEET](#)

Client Name: Jack Tripper  
 Medicaid ID:  
 Waiver: EBD  
 CDASS (Program Participation) Period: 07/01/2023 through 10/31/2023 DAYS: 123 MONTHS: 4.00000000

SERVICE	ADJUSTED RATE	HOURS/WEEK	PERIOD ALLOCATION	DAILY RATE	MONTHLY ALLOCATION
Homemaker	\$20.71	13.0	\$4445.22	\$36.14	\$1111.31
Personal Care	\$20.71	13.25	\$4530.09	\$36.83	\$1132.52
Health Maintenance Activities	\$32.18	2.75	\$1478.46	\$12.02	\$369.62
<b>Totals: \$10453.77</b>				<b>Roll Forward: \$-28.35</b>	
				<b>\$84.99</b>	
<b>\$2585.09</b>					

PRIOR AUTHORIZATION REQUEST SERVICE	MODIFIER	# OF UNITS	COST PER UNIT	TOTAL \$ AUTHORIZED	DAILY RATE
T2025 CDASS	U1	1045377	\$0.01	\$10453.77	\$84.99
T2040 PMPM		4	\$85.00	\$340.00	\$2.76
				<b>Totals: \$10793.77</b>	<b>\$87.75</b>

**REVISED TOTALS (ALL WORKSHEETS): 11/01/2022 through 10/31/2023** DAYS: 365 MONTHS: 12

PRIOR AUTHORIZATION REQUEST SERVICE	MODIFIER	# OF UNITS	COST PER UNIT	TOTAL \$ AUTHORIZED	DAILY RATE
T2025 CDASS	U1	3093837	\$0.01	\$30938.37	\$84.76
T2040 PMPM		12	\$85.00	\$1020.00	\$2.79
				<b>Totals: \$31958.37</b>	<b>\$87.56</b>

SAVE AND SUBMIT
DELETE

7. You will need to log in and check the status of the revision two days after you submit it. It will either show a status of Approved or Rejected. If rejected, it will display the reason and you will need to make corrections. If the correction is needed in our system, edit the revision and hit Save and Submit again. If the correction is needed in the Bridge, make that correction and once you verify it matches what our system shows, please Save and Submit the revision in our system and we will check it again.



- Once the status of the revision shows as Approved, you can gather the information you need for your rate change notification letters. You can switch between the date spans to see the Monthly Allocation and Annual Allocation for each respective span.

**History**  SHOW DELETED WORKSHEETS

Par Number	Eligibility Start	Eligibility End	Authorizations	Status	Created By	Created At
622283	07/01/2023	10/31/2023	HMS,HMAS,PCPS	Under Review		04/19/2023 13:34
622283	01/01/2023	06/30/2023	HMS,HMAS,PCPS	Revised		11/10/2022 16:32
622283	11/01/2022	12/31/2022	HMS,HMAS,PCPS	Submitted		10/11/2022 13:17

**PAR Number: 622283** **REVISION** Status: **UNDER REVIEW**

GO TO REVISED WORKSHEET

Client Name: Jack Tripper  
 Medicaid ID:  
 Waiver: EBD  
 CDASS (Program Participation) Period: 07/01/2023 through 10/31/2023

SERVICE	ADJUSTED RATE	HOURS/WEEK	PERIOD ALLOCATION	DAILY RATE	MONTHLY ALLOCATION
Homemaker	\$20.71	13.0	\$4445.22	\$36.14	\$1111.31
Personal Care	\$20.71	13.25	\$4530.09	\$36.83	\$1132.52
Health Maintenance Activities	\$32.18	2.75	\$1478.46	\$12.02	\$369.62
<b>Roll Forward: \$-28.35</b>					
<b>Totals: \$10453.77</b>				<b>\$84.99</b>	<b>\$2585.09</b>

PRIOR AUTHORIZATION REQUEST SERVICE	MODIFIER	# OF UNITS	COST PER UNIT	TOTAL \$ AUTHORIZED	DAILY RATE
T2025 CDASS	U1	1045377	\$0.01	\$10453.77	\$84.99
T2040 PMPM		4	\$85.00	\$340.00	\$2.76
<b>Totals: \$10793.77</b>				<b>\$87.75</b>	

REVISED TOTALS (ALL WORKSHEETS): 11/01/2022 through 10/31/2023					
PRIOR AUTHORIZATION REQUEST SERVICE	MODIFIER	# OF UNITS	COST PER UNIT	TOTAL \$ AUTHORIZED	DAILY RATE
T2025 CDASS	U1	3093837	\$0.01	\$30938.37	\$84.76
T2040 PMPM		12	\$85.00	\$1020.00	\$2.79
<b>Totals: \$31958.37</b>				<b>\$87.56</b>	

### Supported Living Services (SLS) Specific

For the SLS waiver, the SPAL budget and Health Maintenance Budget can be viewed separately. The units for Health Maintenance will also populate below on the corresponding line.

**PAR Number: 622321** **REVISION** Status: **UNDER REVIEW**

GO TO REVISED WORKSHEET

Client Name: CHRISSEY SNOW  
 Medicaid ID:  
 Waiver: SLS  
 CDASS (Program Participation) Period: 07/01/2023 through 08/31/2023

SERVICE	ADJUSTED RATE	HOURS/WEEK	PERIOD ALLOCATION	DAILY RATE	MONTHLY ALLOCATION
Homemaker	\$20.50	5	\$852.50	\$13.75	\$426.25
Homemaker Enhanced	\$31.33	6.75	\$1780.02	\$28.71	\$890.01
Personal Care	\$26.01	3.50	\$762.60	\$12.30	\$381.30
<b>Roll Forward: \$-31.83</b>					
<b>Subtotal: \$3395.12</b>				<b>\$54.76</b>	<b>\$1665.73</b>
Health Maintenance Activities	\$32.18	21	\$5689.74	\$91.77	\$2844.87
<b>Roll Forward: \$-53.58</b>					
<b>Subtotal: \$5689.74</b>				<b>\$91.77</b>	<b>\$2791.29</b>
<b>Totals: \$9084.86</b>				<b>\$146.53</b>	<b>\$4457.02</b>

PRIOR AUTHORIZATION REQUEST SERVICE	MODIFIER	# OF UNITS	COST PER UNIT	TOTAL \$ AUTHORIZED	DAILY RATE
T2025 CDASS	U8	339512	\$0.01	\$3395.12	\$54.76
T2025 CDASS Health Maintenance Budget - SLS only U8,SE	568974	\$0.01	\$5689.74	\$91.77	
T2040 PMPM		2	\$85.00	\$170.00	\$2.74
<b>Totals: \$9254.86</b>				<b>\$149.27</b>	

REVISED TOTALS (ALL WORKSHEETS): 09/01/2022 through 08/31/2023					
PRIOR AUTHORIZATION REQUEST SERVICE	MODIFIER	# OF UNITS	COST PER UNIT	TOTAL \$ AUTHORIZED	DAILY RATE
T2025 CDASS	U8	1987516	\$0.01	\$19875.16	
T2025 CDASS Health Maintenance Budget - SLS only	U8,SE	3331305	\$0.01	\$33313.05	
T2040 PMPM		12	\$85.00	\$1020.00	
<b>Totals: \$54208.21</b>					



### **PALCO Rate Increase Q & A Sessions**

We are offering three training sessions with the dates and times listed below. Registration links are shown beside each training session. Choose the session that works best for you and click the link to sign up.

#### **Registration Details:**

Tuesday, 5/30 at 2:00PM-3:00PM - <https://attendee.gotowebinar.com/register/6139572205025821276>

Thursday, 6/8 at 10:00AM-11:00AM - <https://attendee.gotowebinar.com/register/4823284163252466264>

Tuesday, 6/13 at 2:00PM-3:00PM - <https://attendee.gotowebinar.com/register/635984344379184219>

#### **Contact Us**

Have questions? We'd love to hear from you.

#### **Here's how to get in touch with us:**

- **Phone:** 1-866-710-0456, give us a call Monday – Friday between 8:00 AM and 5:00 PM
- **Email:** [co-cdass@palcofirst.com](mailto:co-cdass@palcofirst.com)

For more information about Palco, visit our website: <https://palcofirst.com/programs/colorado/>