



CDASS and IHSS Mediation Request Form

Consumer Direct Colorado (CDCO) helps mediate concerns about the services Health First Colorado (Medicaid) members receive through Consumer Directed Attendant Support Services (CDASS) or In-Home Support Services (IHSS).

Members, Authorized Representatives (AR), case managers or IHSS agencies can request mediation. Filling out this form and returning it are the first steps in the mediation process.

Person requesting mediation:

Date:

Relationship to the member:

Member's name:

Health First Colorado (Medicaid) ID number:

IHSS Agency name, if applicable:

Member's case manager:

Please explain why you are requesting mediation:

The mediation process:

- The member, AR, case manager or IHSS agency must complete this mediation request form and send it to CDCO.
- CDCO will contact the case manager within 1 business day to collect information.
- CDCO will send a release of information form (ROI) to the member or AR. The member or AR will return the form to CDCO.
- CDCO will contact the member or authorized representative to get more information.
- CDCO will contact the IHSS agency, if necessary, to collect information.
- After collecting all information, CDCO will schedule either a phone call or virtual meeting with everyone involved. The member or AR should notify CDCO one week before the meeting if they need reasonable accommodations during the meeting.
- After the meeting, CDCO will make a recommendation send a summary to all parties.
- The case manager will make the final decision about the member's services.
 - If the member's request is denied, the member will receive an 803 letter from the case manager. If the member or AR disagrees with the decision, they can formally appeal it. Information on how to appeal will be in the letter.



Mediation Process Summary:

- CDCO will send a release of information form (ROI) to the member or AR.
- CDCO will issue recommendation only, not a final decision
- After the meeting, CDCO will make a recommendation send a summary to all parties. The case manager will make the final decision about the member's services.
- Members, authorized representatives (AR), case managers or IHSS agencies can request mediation.

**Please send this completed request form to CDCO
Fax: 866-924-9072 or Email: infocdco@consumerdirectcare.com**