CDASS Overspending Protocol

Created by Consumer Direct of Colorado and approved by Colorado Department of Health Care Policy and Financing (HCPF)

Case Managers and clients, or their Authorized Representatives should always review the full CDASS Service Utilization Review & Allocation Management Protocol located on the Consumer Direct of Colorado website.

Overspending is defined as monthly expenditures exceeding 9.99% of the clients monthly allocation, with no reserve funds from prior months in the certification period, no prior approval for overspending by the Case Manager and/or no documented fluctuation in overspending approved on the clients ASMP.

![Diagram showing CDASS Spending Limit with percentages and corresponding actions for client spending within and outside limits.](image-url)
For episodes of overspending that meet the definition, Case Managers should follow the steps below:

**1st Episode**
- Notify the Client/AR within 5 business days
- Check for a change in condition
- Discuss a plan to reduce spending or recoup funds
- Remind Client/AR of overspending protocol and consequences for future episodes
- Document all activities in the BUS
- Send a copy of utilization protocol to Client/AR

**2nd Episode**
- Notify the Client/AR within 5 business days
- Check for a change in condition
- Discuss a plan to reduce spending or recoup funds
- Refer the Client/AR to **mandatory** retraining. Must be completed within 45 days
- Remind Client/AR of overspending protocol and consequences for future episodes
- Document all activities in the BUS
- Complete and mail 2nd Episode of Overspending Letter to Client/AR
This protocol is continuous and applies to the duration of the client’s participation in CDASS. Previous over expenditure episodes expire three years from the date of the episode.

By signing below, I___________________________________ attest that I have read this CDASS Utilization Protocol and understand the policy in its entirety. I further understand and agree that episodes of over expenditures will adhere to this protocol and formal action steps may include, but are not limited to, termination of the member from the CDASS delivery option.

Signature of Member or Authorized Representative: _________________________ Date: __________

For questions, contact Consumer Direct of Colorado via phone (844) 381-4433 or via email at infocdo@consumerdirectcare.com. A copy of the full CDASS Utilization Protocol is available on Consumer Direct of Colorado website at https://consumerdirectco.com/