Entering Long Term Care Institution Information

CBMS | Process Manual | Revised: February 2024

OVERVIEW

This document provides a step-by-step process for how to enter Long Term Care Institution information into CBMS. If the member requesting LTC *is not active or pending MA*, the information in the Institution page will need to be manually entered using the following steps. If the member requesting LTC *is active or pending MA*, the Institution page will be automatically updated through information provided by PEAKPro.

PROCESS

1. Log into **CBMS**

2. Navigate to the Case by entering the Case Number in the **Global Search** bar on the Home Page

3. Click on Case Number in the results table to access the **Members** page

4. From the Members page, hover over the **Actions** button

5. Select **Begin Interactive Interview** to initiate the II queue

6. Navigate to the **Long-Term Care Institution** page

7. From the **Name** drop-down, select the institutionalized member

8. To add a new record, click the plus **(+)** sign in the blue detail header

9. Enter the **Effective Begin Date**

    a. Refer to **Online Help** for assistance with which date you should use

10. Click on the **Search** (blue magnifying glass) button

11. Enter the **Business Name**

12. Select **Search**

13. Highlight the appropriate Nursing Facility or Hospital from the search results

    a. If you are unable to find the Nursing Facility or Hospital, **DO NOT** create a new record. *This is a State function only*. Instead, create a Help Desk Ticket (HDT) and include the Provider Name, Address, and National Provider Identifier (NPI) number.

    b. If there is more than one listing for the facility, you will need to select the record that has the NPI listed with the facility. If not, the spans cannot be sent to the iC and the member cannot get Nursing facility services covered.

14. Click **Select**

15. Enter the **Admit Date** (this should match the information in the certification from the CMA)

16. Enter the **Discharge Date** (if known)

17. Select the appropriate radio button for **Admitted to Current Institution from Home (optional)**

18. Select the appropriate radio button for **Expected to Return Home (optional)**

    a. If *"Yes"* is selected, enter the **Expected Date** they will be returning home

    b. Select the appropriate **Verification** option from the drop-down menu

    c. Select the appropriate **Source** option from the drop-down menu

19. Select the appropriate radio button for **Consecutive 30 days stay if not for Death? (optional: only enter if member has passed away)**

    a. If "Yes" is selected, select the appropriate **Verification** and **Source** options from the drop-down menus

20. Enter the **Date Reported**

21. Enter the **Date Verified**

22. Click **Save**

ACCESSIBILITY

This document is designed to comply with the Web Content Accessibility Guidelines (WCAG) 2.1 AA standard. If you experience any difficulty accessing the content or have questions regarding the process, please contact SOC_StaffDevelopment@state.co.us for assistance.