

Pending for and Entering an LTC Level of Care

Overview

This document provides a step-by-step process for processing for and entering a Long-Term Care Level of Care. The steps to take when addressing Level of Care are dependent on if the case needs to be pended for LOC or if the Case Management Agency (CMA) has provided a Level of Care.

Process

- 1) **Login** to 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 Level of Care** tab
- 7) From the **Name** drop-down, select the person requesting Long Term Care

Process for Pending for Level of Care

- 1) Click the **plus (+)** sign in the blue detail header
- 2) Enter the **Effective Begin Date**
 - Refer to Online Help for assistance with which date you should use
- 3) Select *“Undetermined”* from the **Level of Care Type** drop-down menu
- 4) Select *“Pending”* from the **Level of Care Decision** drop-down menu
- 5) Select *“Received”* from the **Verification** drop-down menu
- 6) Select *“Self-Declared”* from the **Source** drop-down menu
- 7) Click **Save**

FYI: After saving the information on the Long-Term Care Level of Care page, the referral information is sent from CBMS to PEAKPro, where the CMAs will pull the information. CMAs will generally have 2 to 10 business days to acknowledge receipt of the assessment referral and make a final determination. CMAs will complete their Level of Care assessment and put the outcome into their system (MedCompass). The approval/denial certification is sent through PEAKPro to CBMS.

A copy of the PEAK PDF of the certification page will be housed in the PEAK Inbox.



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Process for Entering Level of Care

If an LOC was completed by a CMA for an individual not in CBMS yet or who is not pending or approved for MA aid code, follow the steps below. A copy of the LOC will be sent to the CBMS PEAK Inbox. On new applications, CBMS users can/should check the PEAK Inbox prior to sending a referral.

Note: All information is provided on the Level of Care Certification from the Case Management Agency.

- 1) Navigate to the **Long-Term Care Level of Care** tab
- 2) Click on the **pencil icon** to edit/add details
- 3) Enter the appropriate **Level of Care Decision** from the drop-down menu
 - If certification has been received, the only options to select are “*Approved*” or “*Denied*”
- 4) Enter appropriate **Level of Care Type** from the drop-down menu
 - If LOC decision is entered as “*Approved*” or “*Denied*”, the LOC types available will be “*Nursing Facility*”, “*HCBS*”, “*PACE*”, or “*Hospital*”
- 5) Enter the **Confirmation #**, if provided
 - The confirmation number is a required field for Nursing Facility, PACE and HCBS LOCs
 - The confirmation number must be entered in exactly as it is shown in the certification or later updates to the LOC record cannot be automatically made
- 6) Enter the **Start Date** provided on the Level of Care Certification
- 7) Enter the **End Date**
 - This will happen with NF certifications and sometimes with HCBS/PACE certifications
- 8) Select “*Received*” from the **Verification** drop-down menu
- 9) Select “*LOC Certification Page*” from the **Source** drop-down menu
 - If it was for a 30-day stay, select “*Hospital Records*”
 - PLEASE NOTE: Hospital Stay LOCs are not received from CMAs/CCM. This is always all manual data entry and must match the records received from the hospital.
- 10) Click **Save**

Do you have any questions or suggestions regarding this process? Please contact the SDD via email SOC_StaffDevelopment@state.co.us

