

Pending for and Entering an LTC Level of Care

CBMS | Process Manual | Revised: February 2026

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

3. Select *“Undetermined”* from the **Level of Care Type** dropdown menu.
4. Select *“Pending”* from the **Level of Care Decision** dropdown menu.
5. Select *“Received”* from the **Verification** dropdown menu.
6. Select *“Self-Declared”* from the **Source** dropdown 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 and the date the referral is sent is populated in the **LOC Assessment Referral Sent Date** field in CBMS. The CMA will access the referral from their PEAKPro referral inbox.

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 dropdown menu.
 - a. If certification has been received, the only options to select are *“Approved”* or *“Denied”*.
4. Enter appropriate **Level of Care Type** from the dropdown menu.
 - a. 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.
 - a. The confirmation number is a required field for Nursing Facility, PACE, and HCBS LOCs.

- b. 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** provided on the Level of Care Certification.
 - a. End Dates for HCBS will always have an end date and the HCBS LOC record cannot be saved without entering this record. Certifications for NF and PACE may not be received and are not required to save the LOC record.
 8. Select *“Received”* from the **Verification** dropdown menu.
 9. Select *“LOC Certification Page”* from the **Source** dropdown menu.
 - a. If it was for a 30-day stay, select *“Hospital Records”*.
 - i. Hospital Stay LOCs are not received from CMAs/CCM. This will always require manual data entry and must match the records received from the hospital.
 - ii. Data entry of a medical expense is not required to determine 30 day hospital stay.
 10. Click **Save**.
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ACCESSIBILITY

This document has been designed with accessibility features to support all users. If you need assistance with the accessibility of the content or have questions please contact: SOC_StaffDevelopment@state.co.us.