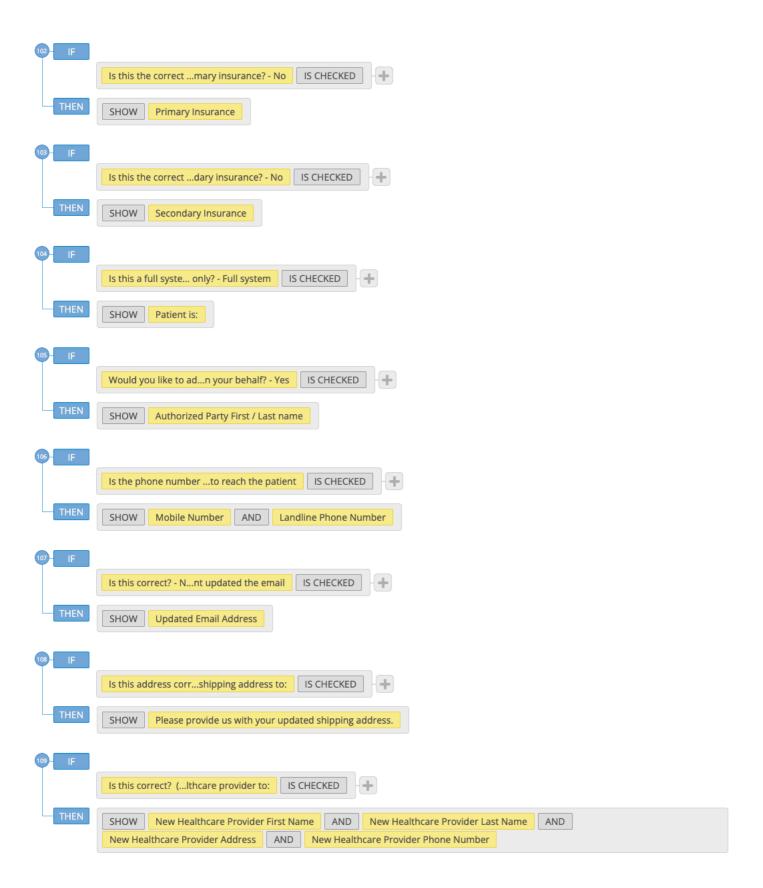


What WF task are in ...hat apply): - Triage

THEN

Patient Phone Number SHOW Would you like to add additional authorized parties to speak on your behalf? AND AND Is this phone number a mobile number or landline phone? AND Is the phone number we have on file the ... No' and provide your phone number). The email I have on file for you is: AND To provide you with better services or o ... eceive these communications at any time. Is this correct? AND AND Is this address correct? State I want to confirm we are shipping your supplies to: AND City AND AND Zip AND Current Healthcare Provider First Name Current Healthcare Provider Last Name AND Text 1 AND AND AND AND Current Healthcare Provider Phone Number Current Healthcare Provider Address AND Is this correct? (If a current healthc ... me of your current healthcare provider). AND Follow these steps to complete the Triage tasks Is the WF assigned to RX NCE? AND I will need to obtain your drug card information. Drug Card/Insurance Name AND AND Rx BIN AND PCN AND Help Desk Phone # ID# AND Group # AND AND Is the PBM, Optum RX? AND Does the patient live in one of the stat ... issippi = MS Nebraska = NE Oregon = OR



Would you like to add additional authorized parties	to speak on your behalf?	× Clear choice	
○ Yes			114140175
○ No			
Authorized Party First / Last name			
First	Last		114140844
Patient Phone Number			114140179
			114140173
Is this phone number a mobile number or landline ph	one?	× Clear choice	
○ Mobile			114140180
○ Landline			111110100
Is the phone number we have on file the best numbe displayed, select 'No' and provide your phone number		X Clear choice	
Yes, this is the best number to reach the patient			114140198
O No, this is not the best number to reach the pat	ient		
Mobile Number			44440004
#########	114140224		
Landline Phone Number			
### ### ####	114140225		

The email I have on file for you is:	114140226
Is this correct? X Clear choice	
Yes - patient confirmed the email on file	
○ No - patient updated the email	114140235
○ No - patient does not have an email	
Updated Email Address	
	114140874
To provide you with better services or other useful information, including new products or services, CCS Medical may call, email, or text you by using the contact information you have provided, which may include prerecorded communications and automatic dialing systems.	
Your telephone carrier's standard message rates may apply to these communications? Would this be ok?	114140240
As always, you can tell us you no longer wish to receive these communications at any time. $ imes$ Clear choice	
CCS may contact patient by call, email, or text	
CCS may only call or text the patient	
CCS can only email the patient	
CCS should not contact the patient	

I want to confirm we are shipping you	ir supplies to:	
		114140244
City		114140245
itate		114140246
ip		
•		114140247
ls this address correct? (If an address is not displayed, please selec	ct no and provide your shipping address).	× Clear choice
Yes - patient confirmed the shipping address		
Yes - patient confirmed the ship	ping address	114140251
Yes - patient confirmed the shipNo - patient updated shipping a		114140251
No - patient updated shipping a	ddress to:	114140251
	ddress to:	114140251
No - patient updated shipping a	ddress to:	
No - patient updated shipping and Please provide us with your updated Street Address	ddress to:	114140251

show your current healthcare provide	114140289	
Current Healthcare Provider First Nam	IE .	114140296
Current Healthcare Provider Last Nam	е	114140300
Current Healthcare Provider Address		11414000
		114140301
Current Healthcare Provider Phone Nu	ımber	44440000
		114140302
s this correct? (If a current healthcare name of your current healthcare provid	provider is not displayed, select no and provide the der).	Clear choice
Yes - patient confirmed healthcare provider		114140316
O No - patient updated healthcare p	rovider to:	
New Healthcare Provider First Name		114140328
		117170020
New Healthcare Provider Last Name		114140329
New Healthcare Provider Address		
Street Address		
Street Address Line 2		114140338
City	Region	
Postal / Zip Code	United States	
New Healthcare Provider Phone Numb	per	11110015
		114140345