# **Compass - Basic Call Handling – Opening the Call, Call Hold, Warm and Cold Transfer**

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**Description:** How to accept and redirect inbound calls within Compass regarding a plan member’s prescription benefit plan.

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| **Opening the Call** |

Icon - Important Use professional language. Do **not** use terms such as Hun, Baby, Sweetie. **Refer to the member by their first name**. If the member asks to be called something other than their first name, use that moving forward in your call. Do not use Gender Specific Language such as Ma’am, Sir, Ms., Mr., Mrs. etcetera unless the caller specifically requests you do so.

Why it is important to use Gender Neutral Language?

* To reach and connect with all audiences.
* To advance health equity and better access to healthcare for everyone.
* To ensure we are respectful, accurately representing our members, and are not stigmatizing.
* To ensure our language with our members aligns with our Heart at Work Behaviors.

**Reminders:**

* If a caller asks to speak to a specific agent, advise the caller we are an inbound call center, and you are happy to help. Callers should be handled appropriately by the answering agent.
* If the caller has a dedicated team, follow the dedicated team warm transfer process if appropriate to transfer to the dedicated team. Refer to [Compass and PeopleSafe - Transferring Calls to Dedicated Client Teams (062992)](https://thesource.cvshealth.com/nuxeo/thesource/#!/view?docid=4c87518d-83f5-4884-8631-1f427b77da7d).

**Exception:** If there is an Alert on the account that the member has a specific representative supporting them, contact the Senior Team for assistance.

Follow the steps listed below when opening the call:

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| **Step** | **Action** |
| **1** | Answer the call within a three-second time frame.  Refer to [2025 WECare Companion Guide – WECare Quality Call Evaluation Overview for Care Representatives (062683)](https://thesource.cvshealth.com/nuxeo/thesource/#!/view?docid=384f024c-c33b-426c-8a40-258ba6023d9d). |
| **2** | Answer the call with the greeting following the [Universal Care - Consultative Call Flow (CCF) Process (095822)](https://thesource.cvshealth.com/nuxeo/thesource/#!/view?docid=c954b131-7884-494c-b4bb-dfc12fdc846f).  **Note:** Once you have determined who is calling, select the correct options in Compass to proceed. Refer to[Compass – Guided Caller Authentication (050163)](https://thesource.cvshealth.com/nuxeo/thesource/#!/view?docid=80476f74-7dca-4548-bf35-185ca8d45c13).  A screenshot of a chat  AI-generated content may be incorrect. |

 If at any point the person you are speaking with or about changes, stop and re-authenticate.

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| **Non-Interaction Time** |

The following guidelines are important regarding the quality of the call when addressing Non-Interaction (**NI**) time with the caller:

* Any Non-interaction (silent or mute) time not prompted by the caller that lasts longer than 20 consecutive seconds will not gain quality points on a scored quality call.
* If the Non-interaction (silent or mute) time is less than 20 consecutive seconds, and it was not prompted by the caller and the caller needs to confirm that the Customer Care Representative (**CCR**) is still there, this will result in no gain of quality points.
* Avoid Non-Interaction (silent or mute) by continuing to interact with the caller.

**Note:** It is acceptable to press the **Mute** button **briefly** to avoid caller hearing interruptions such as cough, sneeze, etcetera. Use a brief mute, not to hold.

**Tips to avoid NI time:**

* Walk the caller through what you are doing and keep the member engaged.
* Use positive words and phrases, such as: “I definitely want to give you an accurate answer, I’m going to research this.”
* Avoid muting the call/headset. Mute should only be used temporarily to prevent members from hearing sneezing/coughing, etcetera.

Refer to [2025 WECare Companion Guide – WECare Quality Call Evaluation Overview for Care Representatives (062683)](https://thesource.cvshealth.com/nuxeo/thesource/#!/view?docid=384f024c-c33b-426c-8a40-258ba6023d9d)

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| **Placing the Caller on Hold** |

The following guidelines are important regarding the quality of the call when addressing the hold time with the caller:

If you place your caller on hold, the Conference button cannot be used. Press **Unhold** to use the **Conference** button. Refer to [Compass - Five9 Agent Desktop Phone (056045)](https://thesource.cvshealth.com/nuxeo/thesource/#!/view?docid=ad8f7284-fee0-4ae1-bbbd-d2cbe07a331f).

A screenshot of a phone call

AI-generated content may be incorrect.

 Refrain from placing the caller on hold immediately after the greeting.

* Donotplace a caller on hold when you are doing research on the member’s account. Keep the caller on the line and talk through the research activity. Refer to the [Non-Interaction Time](#_Non-Interaction_Time) section above for information on how to avoid silence and dead airtime.
  + If you need to perform a conference or transfer, refer to [Compass - Five9 Agent Desktop Phone (056045)](https://thesource.cvshealth.com/nuxeo/thesource/#!/view?docid=ad8f7284-fee0-4ae1-bbbd-d2cbe07a331f).
* If a call is disconnected or dropped, refer to [Disconnected, Dropped, No Caller (Ghost Calls), Spam, Automated, and Looping Calls (021760)](https://thesource.cvshealth.com/nuxeo/thesource/#!/view?docid=480af287-dcb8-4305-84c5-dfe8e0c39312).

Perform the steps below:

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| **Step** | **Action** |
| **1** | Dialogue I definitely want to ensure we have an accurate answer for you. I will need to place you on a brief hold while I work to resolve this. May I check back with you in about 5 minutes, or would you prefer I check back sooner?  **Reminder:** Do not ask permission to place a caller on hold, instead ask what they prefer you to do during the hold. Explaining the reason for the hold helps to reassure the caller that the time is purposeful and not just a delay.  Do not allow the caller to hold for more than **five** minutes without checking in with them even if they have given you approval to keep them on hold longer. |
| **2** | Warm Conference/Transfer and do **not** release the call until the receiving party takes over the call.  **Reminder:** Maintain awareness and empathy for on-hold callers. If the caller wants you to check back, you should do so within approximately every **two** minutes. Callers on hold perceive their time to be much longer than actual time. Use Hold time in moderation as it usually leads to reduced customer satisfaction.  After a total hold time of **five** (5) minutes, refer to the [wait time of five (5) minutes](#waittimeexceedsfiveminutes) process below.  **Note:** For specific phone system buttons to utilize when placing the caller on hold, refer to [Compass - Five9 Agent Desktop Phone (056045)](https://thesource.cvshealth.com/nuxeo/thesource/#!/view?docid=ad8f7284-fee0-4ae1-bbbd-d2cbe07a331f).  **Blue MedicareRx (NEJE):** Continue to place the caller on hold. Never leave a caller on hold for more than **two** (2) minutes without returning to the call and touching base with them unless they have indicated not to check back. This includes when you are being assisted by the Senior Team or other department and during warm transfers. DO NOT follow the new process until further notice. |
| **3** | Return to the line and thank the caller for holding.  **Example:** Dialogue Thank you for holding; I apologize for the delay. |

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| **Placing the Caller on Hold and Making an External Call** |

This section will describe how to make an outbound call during an Interaction case.

Icon - Important Using the **Place External Call** button does not initiate the outbound call but starts the outbound Authentication flow. The **Five9** dialer will need to be used to initiate the outbound call.

 If making a call to an **Internal Caremark Department** or following a **Procedural Transfer** (**Example:** Client), **DO NOT** use the **Place External Call** button. Place the call through the **Five9** dialer only.



If an outbound call is needed during an interaction case, perform the following steps to make an outbound call:

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| **Step** | **Action** | |
| **1** | Inform the caller you will be placing them on hold, to reach out and try to resolve their issue.  Dialogue I am happy to reach out to try and resolve this issue for you. I will need to place you on a brief hold while I work to resolve this. May I check back with you in about 5 minutes, or would you prefer I check back at a different time?    **Reminder:** Do not ask permission to place a caller on hold, instead ask what they prefer you to do during the hold. Explaining the reason for the hold helps to reassure the caller that the time is purposeful and not just a delay.   Do not allow the caller to hold for more than **five** minutes without checking in with them even if they have given you approval to keep them on hold longer. | |
| **2** | Navigate to the **Case Data** panel and click **Place External Call**.  Refrain from clicking the **Place External Call** button before placing the member on hold.  **Notes**:   * When hovering over the **Place External Call** button, message displays “**Use only for external call. This should not be used when calling Internal Caremark Department parties or for procedural external transfers**.” * Currently the **Place External Call** button will not be disabled at any time.     **Result:**Outbound Call Information tab displays. | |
| **3** | Complete all required fields.  Ensure the member is placed on hold **before**, going through the Outbound Authentication flow.  **Note**: Verify the appropriate selection is not available in the **Reason for Outbound Call** and **Who are you calling?**drop-down menus before selecting “**Other**.”  If **Other** is selected in the **Reason for Outbound Call** or **Who are you calling** dropdowns, additional required fields will display (Other Reason; Other Relationship.)     * **Reason for Outbound Call** dropdown selection:   + Survey Follow-Up   + Callback Task   + Outbound Call Campaign   + Member Follow-Up   + Other * **Who are you calling** dropdown selection:   + Member/Self   + Family Member/3rd Party   + Retail Pharmacy   + Provider/Prescriber   + Other * **Answering Party’s Name** (Free Text) | |
| **4** | Verify all applicable fields are completed. | |
| **If…** | **Then…** |
| All applicable fields are completed | Click **Next.**  **Result:**Authentication Informationscreen displays. |
| No Answer  Left Message on Voicemail  Member Not Available | * + 1. Complete the **Reason for Outbound Call** and **Who are you calling** dropdowns.      * + 1. Click **Cancel Authentication.**      * + 1. Choose the **Reason for Canceling** from the dropdown menu in the pop-up window that displays and then click **Cancel Authentication**.     **Result:** The Outbound Call Information tab will automatically close, and Member’s accounts displays. |
| **5** | Complete the **Authentication Information** screen, by clicking each box as each authentication requirement is met.  **Note**: The Authentication Information screen will be dynamic, based on the selection “Who are you Calling”?    **Notes**:   * For assistance, refer to [Compass - Outbound Guided Caller Authentication (066775)](https://thesource.cvshealth.com/nuxeo/thesource/#!/view?docid=5a386ced-5dc4-4139-a0b3-9ceffb2431c9) * The call summary notes will be documented by Cresta. Refer to [Cresta Functionality and Processes (067901)](https://thesource.cvshealth.com/nuxeo/thesource/#!/view?docid=f28dbdf4-4355-45be-95c4-6bda1c08a521) for more information. | |
| **6** | I need to let you know that this call is being recorded or monitored for quality purposes.     1. Once read to the answering party, click the checkbox: “**I have advised the answering party of the above information**.” 2. When the answering party is fully authenticated, click **Continue**.  * If the answering party is unable to fully authenticate, click **Cancel Authentication**. * Inform the Answering Party:  You can call another time when the authenticating information can be verified. * Provide the Customer Care Phone Number in the CIF for the callback phone number.     **Note:** The **Continue** button will be disabled, until the answering party is fully authenticated.  **Result**: Agent is returned to the Member account. | |

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| **When the Caller Places the CCR on Hold** |

Follow the guidelines listed below when a caller places the CCR on hold or steps away from the phone for any reason:

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| **Step** | **Action** | |
| **1** | Proceed depending on whether the caller informs you that they are placing you on hold. | |
| **If the caller places you on hold…** | **Then…** |
| With notice | Advise the caller that you would be happy to hold, but you will need to release the line after **two** minutes and they will need to call back when it is a more convenient time for them.  **Note:** Wait **two** minutes. If the caller does not return to the line, proceed to [Step 2](#Step2). |
| Without notice | Wait **two** minutes. If the caller does not return to the line, proceed to [Step 2](#Step2). |
| **2** | Ask the caller if they are there. **Example:** Icon - Conversation <caller’s name>, Are you with me? | |
| **3** | Wait for a response. Ask again. **Example:** Icon - Conversation <caller’s name>, Are you with me? | |
| **If a response is…** | **Then…** |
| Not received | * Close the call and give the appropriate statement; Icon - Conversation As there has been no reply, I will need to end this call now. Thank you for your time. * Disconnect the call. The call summary notes will be documented by Cresta. Refer to [Cresta Functionality and Processes (067901)](https://thesource.cvshealth.com/nuxeo/thesource/#!/view?docid=f28dbdf4-4355-45be-95c4-6bda1c08a521) for more information. |
| Received | Continue with the call. |

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| **Warm Conferencing/Transferring the Call** |

You should handle most caller inquiries. Only on occasion, to properly handle the issue, will you need to warm conference/transfer a call. Warm conferencing/transferring automatically places the caller on hold.

 Follow instructions in the Client Information Form (**CIF**), if any, as it relates to Warm Conference/Transfer.

**Note:** Whether using Five9 and Warm Conference, or other systems and Warm Transfer, say “transfer” to the member, as this is more easily understood as an explanation.

Perform the following steps:

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| **Step** | **Action** | | |
| **1** | Determine the need to warm conference/transfer the call.   * Review the CIF to determine if the Client has a dedicated or designated team. Refer to [Compass and PeopleSafe – Transferring Calls to Dedicated Client Teams (062992)](https://thesource.cvshealth.com/nuxeo/thesource/#!/view?docid=4c87518d-83f5-4884-8631-1f427b77da7d) and [Compass - Locating a CIF Using Auto Search (043888)](https://thesource.cvshealth.com/nuxeo/thesource/#!/view?docid=d9bd0fe8-fbb2-490c-a03c-c9eb7db15a71). For procedural transfers, review all work instructions pertaining to the call.   Refer to [Compass - When to Transfer Calls to the Senior Team (057524)](https://thesource.cvshealth.com/nuxeo/thesource/#!/view?docid=7653e7c2-1a97-42a0-8a81-6267c72e1ca9) and [Compass - When to Transfer Calls to Clinical Care (062778)](https://thesource.cvshealth.com/nuxeo/thesource/#!/view?docid=d2dab105-056c-45be-b28b-bfad61c60a2f) and [Compass - Handling Repeat Callers:  Multiple Contacts, Same Issue (057523)](https://thesource.cvshealth.com/nuxeo/thesource/#!/view?docid=ba08434f-a17e-41de-9428-33f453416a6b).  **Med D:** If contacting Language Line (Interpreter) Services, refer to [MED D – Language Assistance – Language Line Services (028005)](https://thesource.cvshealth.com/nuxeo/thesource/#!/view?docid=83fd99b3-39c6-4382-b726-bf191498a56c) for further call handling instructions. | | |
| **2** | Inform the caller you will need to transfer the call **and** confirm with the caller if there is anything else you can assist with before conferencing/transferring.  **Note:** If any information was provided (explanation of copays, ePA status, etcetera), or any actions were taken on the account (refill, ePA sent to provider, etcetera) **recap** the call **BEFORE** transferring the caller.    **Attempt to summarize the call:**  As a best practice Summarize the call by incorporating the following:   * **REASON:** Include why the member called (when appropriate/applicable). * **ACTION/INFORMATION SHARED:** The information you provided to the caller. * **RESULTS - NEXT STEPS/TAT:** What was done for the member and the turnaround time (TAT) (**Example:** New RX Request, EPA request, etc.).   **Note:** The member may not know what a specific form or request is needed. Explain exactly what these forms and processes are using words that a member can understand.  **Example:** Instead of saying “I submitted a new Rx request” **you can say:** “I sent a request to your doctor’s office for a new prescription.”  Today you called in regarding the rejected claim for Vyvanse through the local CVS Pharmacy. We discussed the medication that requires a prior authorization to be covered & I submitted an ePA form to the doctor’s office for that. I advised once the form is received from the doctor’s office it will take 24-72 hours to be completed. You have enough medication on hand until the decision is made on the prior authorization. I will now be getting you connected with the Specialty Pharmacy to discuss your order for Humira. Before I get you connected with the Specialty Pharmacy, is there anything else I may assist you with today?  If no actions were taken and no information was given and you are simply transferring the caller to the correct department, ask the resolution question: Is there anything else that I may assist you with before I transfer the call?  **Note**: We should first provide a call summary of the call details before asking if the Caller’s concern has been resolved. If the resolution question is provided too soon, the member may assume the call is complete and hang up prematurely, leaving potential concerns/questions unaddressed. Call summary ensures that all inquiries have been fully resolved, reinforcing a positive service experience and preventing misunderstandings.  Ensure the member/caller is fully authenticated before transferring to the receiving party. Refer to [Compass - Five9 Agent Desktop Phone (056045)](https://thesource.cvshealth.com/nuxeo/thesource/" \l "!/view?docid=ad8f7284-fee0-4ae1-bbbd-d2cbe07a331f" \t "_blank) and [Universal Care - Caller Authentication (004568)](https://thesource.cvshealth.com/nuxeo/thesource/#!/view?docid=bcb8da72-5501-4631-b9fd-fe675bc4a1fd).  **Note:** The resolution question does not need to be asked when transferring to a dedicated team. | | |
| **If…** | **Then…** | |
| Yes | Address all additional issues prior to transferring the call.  **Note:** If additional information is given, or additional actions are taken, make sure to complete a second recap. (The second recap should only recap the new information that was given or new actions that were taken.) Refer to [Universal Care - Consultative Call Flow (CCF) Process (095822).](https://thesource.cvshealth.com/nuxeo/thesource/#!/view?docid=c954b131-7884-494c-b4bb-dfc12fdc846f) | |
| No | Proceed to the next step. | |
| **3** | Validate the phone number that the caller is calling from so that you can call them back if they are disconnected.  Icon - Important Information Call the caller back if they are disconnected. | | |
| **4** | Explain to the caller the need to place them on hold to resolve their concern:  I definitely want to ensure we resolve this. I will need to place you on a brief hold so I can transfer you to the correct team and explain the situation. While you are waiting on the line, I will check back with you within **five** (5) minutes, or would you prefer I check back sooner?  **Reminder:** Do not ask permission to place a caller on hold, instead ask what they prefer you to do during the hold. Explaining the reason for the hold helps to reassure the caller that the time is purposeful and not just a delay.  Do not allow the caller to hold more than **five** minutes without checking in with them, even if they have given you approval to hold until a resolution is determined.  If appropriate, provide the phone number of the department. (Ex: Specialty Customer Care)  **Note:** Do **not** provide internal phone numbers to members. Refer to [Phone Numbers (Contacts, Departments, Directory, Addresses, Hours and Programs) (004378)](https://thesource.cvshealth.com/nuxeo/thesource/#!/view?docid=f22eb77e-4033-4ad9-9afb-fc262f29faad).  Before I connect you with <department name>, for your future reference the phone number for <department name> is <area code and phone number>.  Do not provide **internal** phone numbers where you will be transferring the caller. (Ex: Clinical/SRT) | | |
| **5** | Use the **Conference** button to begin the warm Conference process. Refer to [Compass - Five9 Agent Desktop Phone (056045)](https://thesource.cvshealth.com/nuxeo/thesource/#!/view?docid=ad8f7284-fee0-4ae1-bbbd-d2cbe07a331f).  **Notes:**   * You cannot place the caller on hold first before starting a conference, the line will be live until the conference process begins. * If the call drops during a procedural or escalated warm transfer to Senior Team, advise the Senior Team agent of correct phone number and reason for call.   **Note:** The Senior Team representative calls the member back only for escalated or procedural transfer disconnects.  **Only** use the transfer button when directed, by Work Instruction, CIF, etcetera.  Use the shortcut (internal transfer numbers) that Five9 populates to do internal warm transfer to ensure all info is transmitted where the call is being transferred. | | |
| **6** | Dial the extension or phone number of the receiving party. | | |
| **If the caller…** | **Then…** | |
| Is ok with holding. | Hold the line until the conference destination is reached, and the receiving party takes over the call.  **Note:** After a total hold time of **five** (5) minutes, refer to the [has a wait time of five minutes](#waittimeexceedsfiveminutes) process below.  Do not allow the caller to hold more than **five** (5) minutes without checking in with them even if they have given you approval to hold until a resolution is determined. | |
| Requests that we check back sooner than **five** (5) minutes. | 1. Check in with the caller at **two** (2) minute mark into the hold time. 2. Notify your caller that you are awaiting a response from the department you are trying to reach, apologize for the delay, and ask for their permission to continue holding. Provide an estimated hold time. | |
| **If the caller…** | **Then…** |
| Agrees to continue holding. | 1. Place the caller on hold again. 2. Wait an additional **two** (2) minutes (total hold time of four minutes). 3. Check back in with the caller.   **Note:** After a total hold time of **five** (5) minutes, refer to the [has a wait time of five minutes](#waittimeexceedsfiveminutes) process below.  **Blue MedicareRx (NEJE):** Never leave a caller on hold for more than **two** (2) minutes without returning to the call and touching base with them unless they have indicated not to check back. This includes when you are being assisted by the Senior Team or other department and during warm transfers. Do not follow the new process until further notice. |
| Does not want to continue to hold. | Provide the option to call back at a time that is more convenient for them and provide them with the applicable external phone number and hours of operation and properly close the call. Refer to [Universal Care - Caller Authentication (004568)](https://thesource.cvshealth.com/nuxeo/thesource/#!/view?docid=bcb8da72-5501-4631-b9fd-fe675bc4a1fd).  **Exception Med D:** Advise the caller that you will transfer their call into the department’s queue, and they will need to repeat some information. Cold Transfer the call.  Refer to[Universal Care - Caller Authentication (004568)](https://thesource.cvshealth.com/nuxeo/thesource/#!/view?docid=bcb8da72-5501-4631-b9fd-fe675bc4a1fd).  Do Not Cold Transfer to the Senior Team, continue to hold. |
| Has a waiting time of **five** (5) minutes or longer. | 1. Notify your caller that the department you are trying to reach is experiencing a longer than expected hold time and apologize for the wait.   If the CIF states to warm transfer the caller, then follow the instructions of the CIF.  **Note:** There is no set time limit that CCRs can hold when reaching out to internal departments, or placing external calls such as to pharmacies, provider’s offices, etcetera. If the caller is willing to hold, follow the standard process of checking back with the caller every five (5) or two (2) minutes, according to their preference, until the 3rd party is reached.   1. Provide them with the hours of operation and the applicable phone number (Do **not** provide internal phone numbers to the caller). 2. Provide the option to call back at a time that is more convenient for them.   **Exception Med D:** Advise the caller you will transfer their call into the department’s queue, and they will need to repeat some information. Cold Transfer the call.  Do Not Cold Transfer to the Senior Team, continue to hold. | |
| **7** | Introduce yourself to the receiving party. Give your first name and last initial, and the department from which you are calling. | | |
| **8** | Confirm you have contacted the proper department. | | |
| **If…** | **Then…** | |
| Yes | Proceed to [Step 10](#Step10). | |
| No | Release the conferenced party from the call and check back in with the caller. [Repeat steps 5-8](#Step5).  **Note:** Refer to [Phone Numbers (Contacts, Departments, Directory, Addresses, Hours and Programs) (004378)](https://thesource.cvshealth.com/nuxeo/thesource/#!/view?docid=f22eb77e-4033-4ad9-9afb-fc262f29faad) to ensure that you dialed the correct number. | |
| **9** | Inform the receiving party of the steps you have completed. | | |
| **If the receiving party is…** | **Then…** | |
| A dedicated team or any other department | Inform them that you have Authenticated the caller. | |
| Any other department | Inform them that you have:   * Authenticated the caller. * Determined if the caller has called previously on the same subject. | |
| **10** | Provide the receiving party with the background as to why the transfer is taking place. Include as much information as possible. | | |
| **11** | Return to the caller andconnect the two lines.  **Note:** For specific phone system buttons to use when [Compass - Five9 Agent Desktop Phone (056045)](https://thesource.cvshealth.com/nuxeo/thesource/#!/view?docid=ad8f7284-fee0-4ae1-bbbd-d2cbe07a331f). | | |
| **12** | Thank the caller for holding, apologize for the delay and introduce the caller to the receiving party. Wait for the receiving party to take over the call before disconnecting.  **Clinical:** The Clinical Care Technician/Pharmacist will take over the call without needing the CCR to remain on the line.   * If the Clinical Care Technician/Pharmacist requests you to remain on the line, inform the caller that you will remain on the line. * If not brought into the conversation within **two** (2) minutes, ask if your assistance is still required. This should only occur during a pause in conversation, so no interruption occurs. If advised that your assistance is no longer required, you may drop from the call. Once your assistance is no longer needed on the call, inform both parties that you will be dropping off the call.   Click **Leave Conference** to disconnect yourself from the call.  Icon - Important Information Do **NOT** Click **End Call** as this will disconnect **ALL** parties.  Icon - Important Information Staying on the line silently can lead to a HIPAA violation and breach of caller privacy. If remaining on the line after completing the warm conference/transfer, notify the Clinical Care Technician or Pharmacist and the caller. | | |

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| **Receiving a Warm Conference/Transfer Call** |

This section provides authentication requirements for calls that are transferred to you from another internal employee or from an external party.

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| **Conference/Transfer type** | **Authentication Requirement** |
| **Internal Departments (Aetna or CVS caller) and/or Internal Conference/Transfers: (Incoming)**    **Note:** A transfer from an outside organization is an External Transfer. | 1. Verify and document:  * Conferencing/Transferring representatives first name and initial of last name. * Conferencing/Transferring “from” department name.  1. Ask if the call has been fully authenticated. Refer to [Universal Care - Caller Authentication (004568)](https://thesource.cvshealth.com/nuxeo/thesource/#!/view?docid=bcb8da72-5501-4631-b9fd-fe675bc4a1fd).   **Note:** If the transferring agent does not confirm the caller has been fully authenticated, treat it as not authenticated.  A screenshot of a computer  AI-generated content may be incorrect. |
| **External Conference/Transfer (Incoming)**  From clients, benefit offices, health insurance providers and so forth. | Authenticate the caller following the process for your line of business. Refer to [Universal Care - Caller Authentication (004568)](https://thesource.cvshealth.com/nuxeo/thesource/#!/view?docid=bcb8da72-5501-4631-b9fd-fe675bc4a1fd).  **Notes:**   * If the person you are speaking with changes, reauthentication is required, even if the original party was authenticated via the CTI/IVR system. * An External Conference/Transfer is **not** considered an internal transfer, select **no** to the question “Is this call an Internal Transfer?” in Compass. |
| **Web Support/Medicare B** | Ask to speak to the member.   * If the member is available, fully authenticate the member and obtain permission to discuss the web account with the caller for this call. * If the member is not available, inform the caller that you cannot assist with any web support calls and inform them to have the member callback. |
| **Internal Warm Transfer** | Follow prompts from Compass if all info is already populated from an internal warm transfer. |

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| **Cold Transferring Using Your Phone to Dial and Transfer the Call** |

This procedure provides instructions to Cold transfer the member to the appropriate department utilizing your phone to dial the department phone number and release the caller.

Perform the steps below:

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| **Step** | **Action** | |
| **1** | Determine that the caller needs to be cold transferred by referring to [Phone Numbers (Contacts, Departments, Directory, Addresses, Hours and Programs) (004378)](https://thesource.cvshealth.com/nuxeo/thesource/#!/view?docid=f22eb77e-4033-4ad9-9afb-fc262f29faad) (list of departments and how the call should be transferred), or due to the specific CIF or Work Instruction.  Escalated calls should be **warm** conferenced/transferred and never cold transferred. If the CIF states to warm conference/transfer the caller, then follow the instructions of the CIF.  Most transfers are Warm transfers. Only **cold** transfer if the Work Instruction or CIF specifically states to cold transfer.  **Note:** If the member requests to be conferenced/transferred outside of CVS Health and the company is not listed in [Phone Numbers (Contacts, Departments, Directory, Addresses, Hours and Programs) (004378)](https://thesource.cvshealth.com/nuxeo/thesource/#!/view?docid=f22eb77e-4033-4ad9-9afb-fc262f29faad) or direction is not given in the CIF, handle as a cold transfer. | |
| **2** | Inform the member you need to transfer the call and why.  **Note:** If any information was provided (explanation of copay, ePA status, etcetera), or any actions were taken on the account (refill, ePA sent to provider, etcetera) **recap** the call **BEFORE** transferring the caller.   * Include why the member called/ * The information you provided to the caller/ * What was done for the member and the turnaround time (**Example:** New RX Request, EPA request, etc.).   Today you called in regarding the rejected claim for Vyvanse through the local CVS Pharmacy. We discussed the medication that requires a prior authorization to be covered & I submitted an ePA form to the doctor’s office for that. I advised once the form is received from the doctor’s office it will take 24-72 hours to be completed. You have enough medication on hand until the decision is made on the prior authorization. I will now be getting you connected with the Specialty Pharmacy to discuss your order for Humira. Before I get you connected with the Specialty Pharmacy, is there anything else I may assist you with today?  If no actions were taken and no information was given and you are simply transferring the caller to the correct department, ask the resolution question: Is there anything else that I may assist you with before I transfer the call?  Ensure the member/caller is fully Authenticated before conferencing/transferring to the receiving party.  **Note:** The resolution question does not need to be asked when conferencing/transferring to a dedicated team. | |
| **If…** | **Then…** |
| Yes | Address all additional issues prior to conferencing/transferring the call. |
| No | Proceed to the next step. |
| **3** | Icon_-_Conversation I am going to transfer you to <…> who can help you.  **CCR:** If the number listed on the [Phone Numbers (Contacts, Departments, Directory, Addresses, Hours and Programs) (004378)](https://thesource.cvshealth.com/nuxeo/thesource/#!/view?docid=f22eb77e-4033-4ad9-9afb-fc262f29faad) list or the CIF indicates it can be shared, provide it to the caller for future use.  **Note:** Do **not** provide internal phone numbers to members. Refer to [Phone Numbers (Contacts, Departments, Directory, Addresses, Hours and Programs) (004378)](https://thesource.cvshealth.com/nuxeo/thesource/#!/view?docid=f22eb77e-4033-4ad9-9afb-fc262f29faad).  Icon_-_Conversation You can reach this area in the future by calling <area code and phone #> directly. They may ask additional questions to verify your information. Have a great day. | |
| **4** | Click the **Transfer** button, select **Cold,** and **Complete Transfer**. Select **No Disposition.** Refer to [Compass - Five9 Agent Desktop Phone (056045)](https://thesource.cvshealth.com/nuxeo/thesource/#!/view?docid=ad8f7284-fee0-4ae1-bbbd-d2cbe07a331f) and reference the Transferring Calls section.  A screenshot of a computer  AI-generated content may be incorrect. | |
| **5** | * Click **Close Case** and complete all required fields. * The call summary notes will be documented by Cresta. Refer to [Cresta Functionality and Processes (067901)](https://thesource.cvshealth.com/nuxeo/thesource/#!/view?docid=f28dbdf4-4355-45be-95c4-6bda1c08a521) for more information.   A screenshot of a computer  AI-generated content may be incorrect. | |

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| **Closing the Call** |

* [Universal Care - Caller Authentication (004568)](https://thesource.cvshealth.com/nuxeo/thesource/#!/view?docid=bcb8da72-5501-4631-b9fd-fe675bc4a1fd)
* [Universal Care - Consultative Call Flow (CCF) Process (095822)](https://thesource.cvshealth.com/nuxeo/thesource/#!/view?docid=c954b131-7884-494c-b4bb-dfc12fdc846f)

**Note:**Ensure all member requests are completed in the system before releasing the call. No account changes should be made after the call is released.

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| **Related Documents** |

[Compass – Guided Caller Authentication (050163)](https://thesource.cvshealth.com/nuxeo/thesource/#!/view?docid=80476f74-7dca-4548-bf35-185ca8d45c13)

[Compass - Five9 Agent Desktop Phone (056045)](https://thesource.cvshealth.com/nuxeo/thesource/#!/view?docid=ad8f7284-fee0-4ae1-bbbd-d2cbe07a331f)

[Compass – Close an Interaction or Research Case (050011)](https://thesource.cvshealth.com/nuxeo/thesource/#!/view?docid=0296717e-6df6-4184-b337-13abcd4b070b)

[Compass and PeopleSafe - Transferring Calls to Dedicated Client Teams (062992)](https://thesource.cvshealth.com/nuxeo/thesource/#!/view?docid=4c87518d-83f5-4884-8631-1f427b77da7d)

[Customer Care Abbreviations, Definitions, and Terms Index (017428)](https://thesource.cvshealth.com/nuxeo/thesource/#!/view?docid=c1f1028b-e42c-4b4f-a4cf-cc0b42c91606)

**Parent Documents:** [CALL-0011 Authenticating Callers](https://policy.corp.cvscaremark.com/pnp/faces/DocRenderer?documentId=CALL-0011), [CALL-0049 Customer Care Internal and External Call Handling](https://policy.corp.cvscaremark.com/pnp/faces/DocRenderer?documentId=CALL-0049)

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