# Compass MED D - Specialized Member Services Team (SMST) - EGWP Opt Hold Release Process in FAZAL

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**Description:** This document assists the Specialized Member Services Team (SMST) CCR when receiving from potential enrollees that have been receiving benefits through an Employer Group Waiver Plan (EGWP).

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| General Information |

**Notes:**

* Health Plans/EGWP - refer to the CIF to determine if the plan handles the situations outlined in this document.
  + If Client handles, follow direction provided in CIF.
  + If SMST handles, transfer to SMST. Refer to [MED D - Guide to Transferring a Call](https://aetnao365.sharepoint.com/sites/PolarisPHDDocumentationReview/Shared%20Documents/General/AppData/Local/Microsoft/Windows/INetCache/Content.Outlook/ax02205/Desktop/Ready%20to%20Post/SMST/TSRC-PROD-029866).
* SilverScript (x9110) - Warm transfer to the SMST. Refer to [MED D - Guide to Transferring a Call](https://aetnao365.sharepoint.com/sites/PolarisPHDDocumentationReview/Shared%20Documents/General/AppData/Local/Microsoft/Windows/INetCache/Content.Outlook/Documents/AppData/Local/Microsoft/Windows/INetCache/Content.Outlook/40ZZSJWS/TSRC-PROD-029866).
* For all other clients - refer to [Compass - Transferring Calls to Dedicated and Designated Client Teams.](https://thesource.cvshealth.com/nuxeo/thesource/#!/view?docid=4c87518d-83f5-4884-8631-1f427b77da7d)
* Specialized Member Services Team (SMST) CCRs, follow the process outlined in this document.

MED D Customer Care Representatives (CCRs) may receive calls from potential enrollees that have been receiving benefits through an Employer Group Waiver Plan (**EGWP**). These benefits typically would include medical, prescription, dental and vision coverage for active employees and/or retirees. Due to rising cost, many employers and union groups are making changes in the coverage they offer to retirees.

Once retirees become Medicare eligible, employers and union groups may make one of three decisions for their retirees**:**

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| **Option** | **Then** |
| Continue providing the retirees with full benefits. | * This is considered **creditable coverage** by CMS. * The retiree would not need to choose a Medicare PDP, as they can only be enrolled into one creditable coverage plan at a time. |
| Drop all benefits for retirees. | * The retiree will be granted a Special Enrollment Period (**SEP)** by CMS to choose their own Medicare coverage. |
| Allow the retirees the option to keep their medical, dental, and/or vision benefits, if they join a **specifically selected** Medicare standalone PDP. | * The retiree will be given a **21-day** Opt-Out period to advise SilverScript to continue processing the enrollment into the Medicare PDP selected by the employer or union group or decline the enrollment. * The retiree will receive notification of the 21-day Opt-Out period no later than 10 calendar days from the date their application was received. * The Opt-Out period expires 21 days after the date on the Opt Out letter. |

 If the Opt Hold Release Date has passed or the plan has become effective, the beneficiary **may not** Opt Out of the EGWP.

* If the beneficiary does not want to participate in the plan, the beneficiary will have to disenroll from the plan.

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| Authorized to Attest |

Only the beneficiary, legal representative or SHIP Counselor can verbally attest. The SMST will use the below to determine if the caller is authorized to provide attestation**:**

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| **If the caller is…** | **Then…** |
| Legal representative | In order to process this attestation for (Beneficiary’s Name), I need to verify that you are authorized to act on their behalf under the laws of the State for which resides. If asked to provide evidence of that authority to Medicare, would you be able to do so?  Refer to [MED D - Obtaining a Verbal Attestation from an Authorized Representative](https://aetnao365.sharepoint.com/sites/PolarisPHDDocumentationReview/Shared%20Documents/General/AppData/Local/Microsoft/Windows/INetCache/Content.Outlook/Documents/AppData/Local/Microsoft/Windows/INetCache/Content.Outlook/40ZZSJWS/TSRC-PROD-024341). |
| Non-authorized party (helping the beneficiary but is not the legal representative) | * Only the beneficiary or legal representative or SHIP Counselor is able to verbally attest. * You can assist the beneficiary completing the attestation form and mailing to:   **SilverScript**  **P.O. Box 30001**  **Pittsburgh, PA 15222-0330**  **OR fax to: SilverScript Bizfax at 866-552-6205**  **Note:** The CCR must put add detailed alert in Compass **Medicare D Landing Page** that the non-authorized party is aware of the verbal attestation process. |

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| Releasing an Application on Opt Hold in FAZAL |

To release an enrollment application on Opt Hold in FAZAL, the SMSTCCR will**:**

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| **Step** | **Action** | | | | |
| **1** | Access the beneficiary’s account.   Thank you for calling.  My name is <your name>. Who am I speaking with?    Once the caller provides their first and last name ask**:**     (PAUSE) Are you calling for yourself today?    **NOTE:** Caller must provide **full name** of member, if only first name is given prompt the caller for the last name. For assistance refer to [Universal Care - Consultative Call Flow (CCF) Process](https://thesource.cvshealth.com/nuxeo/thesource/#!/view?docid=c954b131-7884-494c-b4bb-dfc12fdc846f).    **Say**Is this call an internal transfer?   * If **Yes**, complete the required fields and click **Next**. For assistance, refer to [Compass - Basic Call Handling – Opening the Call, Call Hold, Warm and Cold Transfer](https://thesource.cvshealth.com/nuxeo/thesource/#!/view?docid=18c64566-0ebb-4760-96fe-04da06185de0) * If **No**, verify **Caller’s Name** and **Who is calling?** fields, then click **Next**. * Thank you \_\_\_\_\_ (use caller’s name), could you please provide the beneficiary’s **Member ID** please so I may locate the correct account? * If Beneficiary received a letter, the member ID (External ID) can be retrieved from the letter.   **Note:** If the beneficiary cannot be located using the Medicare D System search parameters in Compass, proceed to the next step.    Refer to the [MED D Enrollment - FAZAL](https://aetnao365.sharepoint.com/sites/PolarisPHDDocumentationReview/Shared%20Documents/General/AppData/Local/Microsoft/Windows/INetCache/Content.Outlook/Documents/AppData/Local/Microsoft/Windows/INetCache/Content.Outlook/40ZZSJWS/CMS-PRD1-078799) work instruction. | | | | |
| **If…** | | **Then…** | | |
| Beneficiary’s account located | | Proceed to Step 2. | | |
| Caller is unable to provide the Member ID  **OR**  Provided information does not locate an account | | SayMay I have the beneficiary’s **first name**, **last name**, and **date of birth** please?  **Note:** Ask to spell names as necessary to ensure correct account is located. | | |
| **If…** | | **Then…** |
| Correct account is located | | For assistance, refer to [Compass Med D - Medicare D System Member Search and Guided Authentication (Member in FACETs, not RxClaim) (066114).](https://thesource.cvshealth.com/nuxeo/thesource/#!/view?docid=1ec886dd-639f-45cd-b758-43211e09121c)   * Proceed to Step 2. |
| Account not located  When no members are found that matched your search criteria, additional **Search Parameters** are displayed at the bottom of the Search by Member screen. | | * Click the **Medicare D System**button to begin a Medicare D Search.   **Result:** The Search by Medicare D popup displays.  For assistance, refer to [Compass Med D - Medicare D System Member Search and Guided Authentication (Member in FACETs, not RxClaim) (066114).](https://thesource.cvshealth.com/nuxeo/thesource/#!/view?docid=1ec886dd-639f-45cd-b758-43211e09121c)    **Notes:**   * If account is located, proceed to Step 2. * If **no match is found** after exhausting all Search Parameters, refer to [Compass MED D - SilverScript - Resolution of Eligibility](https://thesource.cvshealth.com/nuxeo/thesource/#!/view?docid=3498d644-ecdb-4bb5-8b04-fe1a1fbd7ee5). * Click the **Close**button at any time to return to the **Search by Member** page if needed. |
| **2** | Log into **FAZAL** and search for the beneficiary’s application be using the **Opt Hold – Opt Hold** **Queue** search.     * To find the application, use **Search By:** **Subscriber ID, Last Name,** or **MBI/HICN** * Enter the application **Subscriber ID** and click **Go.** * Click on the **Subscriber Id** hyperlink. * Proceed to the next step.     **Note**: If an application is not found in Opt Hold search, refer to the [MED D Enrollment - FAZAL](https://aetnao365.sharepoint.com/sites/PolarisPHDDocumentationReview/Shared%20Documents/General/AppData/Local/Microsoft/Windows/INetCache/Content.Outlook/Documents/AppData/Local/Microsoft/Windows/INetCache/Content.Outlook/40ZZSJWS/CMS-PRD1-078799) work instruction | | | | |
| **3** | Determine whether the **Opt Hold Release Date** has passed by**:**   * Asking the beneficiary to provide the date on their Opt Hold letter. * View a copy of the beneficiary’s Opt Hold letter by clicking the “**Last 12 Months of Communications**” hyperlink in the **Medicare D Quick Actions** panel, locatedwithinthe **Medicare D Landing Page** in Compass.   + Refer to [Compass MED D - Viewing Correspondence and Requesting Reprints.](https://thesource.cvshealth.com/nuxeo/thesource/#!/view?docid=6bce8cc8-2318-4271-85a3-07198190a18c) | | | | |
| **If the letter states that the beneficiary…** | | **Then…** | | |
| Needs to provide additional information to opt in/enroll | | * Access the [Compass MED D - Incomplete Enrollments (ICE) or Enrollments with Missing Information](https://thesource.cvshealth.com/nuxeo/thesource/#!/view?docid=c31eec52-fb25-4867-9693-4b5129d67190) work instruction and proceed accordingly. * Once the information has been provided, proceed to [Step 6](#Step6) if the beneficiary wants to opt in. | | |
| Needs to opt in/opt out | | Proceed to the next step. | | |
| **4** | Navigate to **Section 3** of the application and scroll down to the Comments, Opt Hold Attestation and Opt Out Method fields. Verify the Opt Hold Release Date in **FAZAL**. | | | | |
| **If the Opt Hold Release Date Has…** | **Then…** | | | |
| Passed | Proceed to [Step 5](#Step5)  **Note:** If the Opt Hold Release Date has passed, the Opt Hold Attestation drop down menu will be disabled. | | | |
| NOT Passed | Confirm the beneficiary’s decision regarding their application. | | | |
| **If the beneficiary…** | **Then from the Opt Hold Attestation drop down menu, select…** | **AND from the Opt Out Method drop down menu, select…** | |
| Does want to enroll | ATTESTED | Inbound call  Proceed to [Step 6](#Step6) | |
| Does **NOT** want to enroll | NOT ATTESTED/ DISCONTINUED | Inbound call  Proceed to [Step 6](#Step6) | |
| **5** | Confirm the beneficiary’s decision regarding their application. | | | | |
| **If the beneficiary…** | **Then…** | | | |
| Wants to enroll | Inform the beneficiary that no further action is necessary, and their coverage will begin on the effective date. Proceed to [Step 8](#Step8) | | | |
| Does **NOT** want to enroll | **If the beneficiary calls…** | **Then…** | | |
| **Past the Opt Out date but PRIOR** to the effective date of enrollment | Submit the following **Support Task:**  **Task Type:** Enrollment - Cancellation of Enrollment  **Task Data:**Complete all Required Fields marked with an asterisk (\*).   * MBI/HICN * State * Medicare D Contract ID: S5601 (SilverScript) or S2893 (NEJE) * Verbal Attestation: Yes * PBP ID: If unavailable, use “000” * Complete additional fields that provide missing information for the application   For Assistance refer to [Compass - Create a Support Task](https://thesource.cvshealth.com/nuxeo/thesource/#!/view?docid=64f18e5a-4d56-4175-ba8e-e7d094e501d6).  **Task Notes:**  The beneficiary is past the Opt-Out date for withdrawing their enrollment and are requesting to cancel their enrollment prior to the effective date. The beneficiary can be reached at <phone number>.  Proceed to next step. | | |
| **AFTER** the effective date of enrollment | Advise the caller that they will need to submit a disenrollment request.  **Note:** Access the **Eligibility** section of the CIF.  CCRs must follow the Opt Out/Disenrollment process provided by the client.   * This may include referring to [Compass MED D - Specialized Member Services Team (SMST) - Voluntary Disenrollment](https://thesource.cvshealth.com/nuxeo/thesource/#!/view?docid=e26dafa6-215c-4edc-9452-9fb4c29233db) or referring all calls directly to the client.   Proceed to [Step 8](#Step8). | | |
| **6** | Enter the applicable **Customer Service Notes** based on the beneficiary’s request.  **Note:** The CCR can add notes to the application regarding the Opt Hold process, only if it is in a **Pending Queue**.  If the Opt Hold Release Date has passed, the Opt Hold Attestation drop down will **not** be available. | | | | |
| **If the Opt Hold Attestation is…** | | **Then…** | | |
| ATTESTED | | In the **Comments** field, type or copy and paste the following statement**:**  “The beneficiary wants to enroll in the Plan and attests that they want the enrollment released before the 21-day hold period ends.”  Click the **Save** button in the bottom right corner.  Proceed to [Step 8](#Step8). | | |
| NOT ATTESTED/DISCONTINUED | | In the **Comments** and **Customer Services Notes** field, type or copy and paste the following statement**:**  “The beneficiary does not want to enroll in the Plan and will opt out of the plan before the 21-day hold period ends.”  Click the **Withdraw** button in the bottom right corner.  Proceed to the next step. | | |
| **7** | A pop-up window will display on screen. Select **Enrollee Request** from the drop down and click the **Ok** button.     * A second pop-up window will display. Click **Ok**      * If the application has been correctly withdrawn, the following pop-up will display. Click **Ok**     Proceed to the next step. | | | | |
| **8** | Ask if there are any other benefit questions. | | | | |
| **If…** | | **Then…** | | |
| Yes | | Address any benefit issues. | | |
| No | | Document and close the case using current policies and procedures.  Refer to [Compass - Call Documentation](https://thesource.cvshealth.com/nuxeo/thesource/#!/view?docid=0296717e-6df6-4184-b337-13abcd4b070b) and [Compass MED D – Call Documentation Job Aid](https://thesource.cvshealth.com/nuxeo/thesource/#!/view?docid=433711aa-8fa6-447c-872b-bd69cd6cd7c0).  . | | |

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| Accessing Notes for an Application on Opt Hold in FAZAL |

To view or add notes to the application, the SMST CCR will**:**

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| **Step** | **Action** | |
| **1** | From **Step 2** of the [Releasing an Application on Opt Hold in FAZAL](#_Releasing_an_Application_1) section of this work instruction, click on the **SubId** hyperlink.  **Result:** The beneficiary’s enrollment application will display. | |
| **2** | Click on the **Section 3** hyperlink at the top left of the screen. | |
| **3** | Locate previous notes or comments at the bottom of the page.    **Note:** The CCR can add notes to the application regarding the Opt Hold process, as long as the application is in a **Pending Queue**. | |
| **4** | Ask if there are any other benefit questions. | |
| **If…** | **Then…** |
| Yes | Address any benefit issues |
| No | Document and close the case using current policies and procedures.  Refer to [Compass - Call Documentation](https://thesource.cvshealth.com/nuxeo/thesource/#!/view?docid=0296717e-6df6-4184-b337-13abcd4b070b) and [Compass MED D - Call Documentation Job Aid.](https://thesource.cvshealth.com/nuxeo/thesource/#!/view?docid=433711aa-8fa6-447c-872b-bd69cd6cd7c0) |

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| Resolution Time |

 Releasing an Opt Hold = 4 business days

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| Related Documents |

**Parent SOP:** CALL-0048**:** [Medicare Part D Customer Care Call Center Requirements-CVS Caremark Part D Services, L.L.C.](https://policy.corp.cvscaremark.com/pnp/faces/SecureDocRenderer?documentId=CALL-0048&uid=pnpdev1)

**Abbreviations/Definitions:** [Abbreviations / Definitions](https://aetnao365.sharepoint.com/sites/PolarisPHDDocumentationReview/Shared%20Documents/General/AppData/Local/Microsoft/Windows/INetCache/Content.Outlook/Documents/AppData/Local/Microsoft/Windows/INetCache/Content.Outlook/40ZZSJWS/CMS-2-017428)

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