**Compass MED D - When to Transfer Calls to the Senior Team**

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**Description:** This document outlines the process that a MED D CCR should follow when contacting the Senior Team.

 CCRs should review the CIF/Work Instruction/Job Aid and use their team internal chat/channel for assistance prior to reaching out to the Senior Team.

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| **High Level Process** | |
| 1. [**Determine**](#_Overview_1) **the type of assistance needed (Assist, Procedural Transfer or Escalation).** | **Note:** Refer to  [Basic Call Handling - Greet, Warm, Cold. Call Hold and Close Call](https://thesource.cvshealth.com/nuxeo/thesource/#!/view?docid=8c31454d-f1e4-41af-b678-7017409e18f4) |
| 1. **Contact/transfer to the Senior Team and proactively offer the caller’s information.**  * If [assist](#Assist), contact:   + HealthPlan/EGWP: 1-877-209-5167   + SilverScript: 1-888-572-0869 * If [procedural](#Procedural_Transfer),   + Blue MedicareRx (NEJE) Dedicated Senior Team, warm transfer to 1-800-790-6382   + HealthPlan/EGWP: 1-877-209-5167   + SilverScript: 1-888-572-0869 * If [escalation](#Escalation),   + Blue MedicareRx (NEJE) Dedicated Senior Team, warm transfer to 1-800-790-6382   + HealthPlan/EGWP: 1-877-209-5167   + SilverScript: 1-888-572-0869 | |

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| **Determine the Type of Assistance Needed for the Senior Team** |

 CCRs should review the CIF/Work Instruction/Job Aid and use their team internal chat/channel for assistance prior to reaching out to the Senior Team.

 Authenticate the caller prior to contacting Senior Team. If the caller cannot be authenticated, inform the Senior Team Representative at the time of the transfer.

**** If a beneficiary insists on only speaking with someone who is onshore, refer to [MED D - Guide to Transferring a Call](https://thesource.cvshealth.com/nuxeo/thesource/#!/view?docid=b9e1330e-9803-4dd8-a699-6ae62bb590d2). This process should only be used for beneficiaries who want to speak to someone onshore **AND** have NO other escalation or concerns. All other escalations should follow the below processes.

Reasons for a CCR to contact Senior Team:

[Assist](#Assist)

* General inquiries about a process, topic, work instruction or client information form.
* Unsure how to proceed with the beneficiary or additional guidance needed to complete the call.
* Cardholder Based Eligibility (Only when the beneficiary is unable to wait the turnaround time period).
* Beneficiary is low on medication and is unable to wait six days for a task to be processed and CIF allows the PBO.

[Procedural Transfer](#Procedural_Transfer)

* + As directed by the CIF, Work Instructions, Job Aids, References or Announcements.
  + If after-hours and caller is unable to understand CCR and requests to be transferred.

[Escalation](#Escalation)

* + Caller requests a supervisor and/or higher (Manager, CEO, etc.).
  + Caller threatens legal action, going to the media, or contacting the CEO.
  + Caller calls regarding a prescription that is on delayed prescriber hold.

** ALL** Procedural and Escalation calls to the Senior Resolution Team Assist and Escalation Lines will be **warm** transferred.

**** Always listen for the appropriate prompts when escalating. These selections are tracked to ensure the appropriate transfer is taking place and process is being followed.

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| **Assist** |

When the CCR has general inquiries, is unsure how to proceed with the **beneficiary**, or needs additional guidance to complete the call, follow the steps below:

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| **Step** | **Action** | |
| **1** | Review all resources to resolve the issue such as CIF, Work Instructions, Job Aids and References.   * If unable to locate a resolution, proceed to the next step. | |
| **2** | * Notify the beneficiary that you are making a call to help resolve their issue and they will hear a brief silence while this occurs. * Contact the Senior Team at:   + HealthPlan/EGWP: 1-877-209-5167   + SilverScript: 1-888-572-0869   Do **NOT** share the above number with beneficiaries; this is for internal Use Only.  **Note:** If there is a **Long Hold Time** (over 5 minutes) **Waiting for Senior Team:** Notify your Supervisor.  I understand your time is important, however there seems to be an extended wait for the Senior Team line. Let me see if my supervisor is available.  Do **NOT** release the beneficiary from the call as the Senior Team cannot perform callbacks. Make contact with your supervisor and follow their directions. | |
| **3** | Provide the following information to the Senior Team:   * Your first name, first letter of your last name, and job title * Network ID (ID used to login to windows/Compass) * Beneficiary’s ID number * Beneficiary’s Name * Identify the call as an **Assist**. * Clear and brief description of the issue | |
| **If...** | **Then...** |
| Resolution is provided by Senior Team | Return to caller, provide solution, and close the call. |
| Additional research and follow up is required | Refer to [Procedural Transfer](#Procedural_Transfer). |
| The caller is venting and upset with the issue, not escalating | File a grievance as necessary. Refer to [Compass MED D - Grievances Index](https://thesource.cvshealth.com/nuxeo/thesource/#!/view?docid=70034f51-77df-49a4-ae97-7d3d63b216b3). |

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| **Procedural Transfer** |

Use when the CCR is required to transfer to the Senior Team as directed by the CIF, Work Instructions, Job Aids, References or Announcements **or** the CCR is unable to fulfill the beneficiary’s request without the aid of a Senior Team.

**Note:** If the Senior Team receives a Procedural assist call from a CCR and interpreter, they will complete the necessary action and then release the call back to CCR to complete the process. **Seniors will not speak to the beneficiary in these instances.**

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| **Procedural Transfer Reasons** | |
| **Type** | **Details** |
| **Billing & Credits** | * Mailtags * Credit requests * Billing research * Retail reimbursement * Reimbursement Claim Research |
| **CIF (Client Information Form)** | * CIF instructs CCR to contact Senior Team * PBOs not available to CCR * EGWP Clients (Not EFWP Accounts) |
| **Mail Order** | * Shipping credits * Change Shipping address for Ready label print orders * Expediting orders (escalated) * Special dispensing requests |
| **Work Instruction driven** | * Adopt a Member - Enrollment Requests * AM for assistance with Mandatory Mail * Call pull request * **COVID-19 Overrides (Coronavirus)** - If CIF states to use override code DR and you do not have access, the plan has MChoice Incentivized, PA or QVT issues because of early refill or anything outside of early refill rejection not previously specified. * DAW9 (Dispense As Written) * Eligibility due to beneficiary being loaded in incorrect system and coding error * Fraud * HIPAA disclosure/Violations * Large font request * Med D Fraud Waste & Abuse * MDO Complaints * MTM Opt Out * Permanent Mail Order (Add) Alerts (CCR able to enter temporary Mail Order Alerts) * Repeat Caller (Multiple Calls for Same Unresolved Issue) * Mail Order (Remove) Alerts * Stop Totes (Only if the CCR does not have access to email) * Unclaimed Property - 8 weeks has passed since the replacement check was reissued. Need to research * Unclaimed Property - Unable to locate account for the claim * Unclaimed Property – Check issued more than 180 days ago and not received * Unclaimed Property - Found check issued more than 6 months and less than 2 years ago |
| **Other** | **Note:** For the below scenarios, refer to [MED D - Guide to Transferring a Call](https://thesource.cvshealth.com/nuxeo/thesource/#!/view?docid=b9e1330e-9803-4dd8-a699-6ae62bb590d2). If after-hours, accept Warm Transfer and assist the beneficiary.   * Beneficiary is unhappy due to not being able to understand the CCR * Beneficiary is unhappy CCR is not located in the USA |

Follow the steps below:

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| **Step** | **Action** | | |
| **1** | Address ALL of the caller’s needs and questions. | | |
| **If the call...** | **Then...** | |
| Falls under one of the categories listed above and all other issues have been addressed | I’m going to transfer you to a representative who can help you. | |
| **If...** | **Then...** |
| SilverScript | Warm transfer to the Senior Team at 1-888-572-0869. |
| HealthPlan/EGWP | Warm transfer to the Senior Team at 1-877-209-5167.  File a grievance as necessary.  **Refer to:**   * [Compass MED D - Grievances Index](https://thesource.cvshealth.com/nuxeo/thesource/#!/view?docid=70034f51-77df-49a4-ae97-7d3d63b216b3) * [Basic Call Handling](file:///C:/Users/C513388/AppData/Local/Microsoft/Windows/INetCache/Content.Outlook/AppData/Local/Microsoft/Windows/INetCache/Content.Outlook/AppData/Local/Microsoft/Windows/INetCache/Content.Outlook/AppData/Local/Microsoft/Windows/INetCache/AppData/Local/Microsoft/Windows/INetCache/Content.Outlook/03SX5036/TSRC-PROD-016401) |
| Blue MedicareRx (NEJE) Dedicated Senior Team | Warm transfer to the NEJE Dedicated Senior Team at 1-800-790-6382. |
| Does not fall under one of the categories listed above or the CCR is unsure | Proceed to the next step. | |
| **2** | Explain to the caller that you will need to place them on a brief hold for further research.  **Do NOT** set the expectation that the beneficiary will be transferred to the Senior Team or that their request will be met. | | |
| **3** | * Contact the Senior Team. (Do Not Email or Instant Message a Senior Representative directly).   **Note:** If there is a **Long Hold Time** (over 5 minutes) **waiting for Senior Team**.  I understand your time is important, however there seems to be an extended wait for the Senior Team line. Let me see if my supervisor is available.  Do **NOT** release the beneficiary from the call as the Senior Team cannot perform callbacks. Make contact with your supervisor and follow their directions.   * Clearly state the reason for the call in a brief explanation.   I have a procedural transfer, and the members ID is <ID #>, the beneficiary has been fully authenticated and their name is <name of beneficiary>, the issue is <brief explanation of issue>, <type of Grievance filed, if applicable>.  **Result:** The Senior Representative will determine whether or not they should take over the call. | | |
| **If the Senior Representative…** | **Then...** | |
| Determines the call should be transferred | Return to the Caller and advise:  We have a team that can fulfill this request, may I transfer you?   * If the caller agrees, conference the Senior Representative in, introduce the caller and then the Senior Representative. Drop off the call.   **CCR’s - Do NOT** ask the beneficiary if they need anything else at this point.   * If the caller disagrees, attempt to address the beneficiary’s request with the Senior Representative while the beneficiary is on hold. | |
| Determines this is not a procedural assist | **Result:** Senior Representative will advise of next steps.   * Return to the beneficiary. * Provide the solution. | |

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| **Escalation** |

When the CCR has exhausted all resources to assist but the issue cannot be resolved and the beneficiary requests to escalate the call, follow the steps below:

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| **Step** | **Action** | | |
| **1** | Determine the type of escalation that will be needed: | | |
| **If the caller/beneficiary…** | | **Then…** |
| Threatens to contact:   * I’m going to speak with my attorney * I’m going to call the TV station to report this * I need to speak to the President of your company! * I’m going to call Medicare (CMS) * Mentions calling any outside parties pertaining to their issue. | | * Document the Case in Case Comments:   + Beneficiary upset about <issue> and threatening legal action.   + Beneficiary upset about <issue> and asking to speak to the President of the company. * Make every attempt to resolve the caller’s issues immediately and on the first point of contact. Refer to [Frequently Asked Questions and Answers.](#FAQs)   + If unable to resolve the caller’s questions, continue to the next step. |
| Expresses concerns such as:   * I never got a call back when I was promised * I’m going to take it up the ladder * I was told it would be taken care of * This is my (#) time calling on this same issue * Why is no one listening to my concerns? * I want to talk to the CEO (Chief Executive Officer) or person in charge * I want to talk to your supervisor * I want to speak with someone onshore * I want to speak with someone else | | Make every attempt to resolve the caller’s issues immediately and on the first point of contact. Refer to [Frequently Asked Questions and Answers.](#FAQs)   * If unable to resolve the caller’s questions, continue to the next step. |
| Contact regarding a prescription that is on delayed prescriber hold | | Transfer to the Senior Team Escalation line.  Refer to [Compass MED D - Delayed Prescriber Response/Prescriber Holds](file:///C:\Users\c071417\Downloads\TSRC-PROD-057051). |
| **2** | Warm Transfer the call to the Senior Team.  I understand your concern. I will transfer you to the Senior Team who will help resolve your issue. There will be a brief silence while I transfer your call. | | |
| **If the Caller...** | **Then...** | |
| Agrees to the transfer | Warm Transfer to the Senior Team:   * Blue MedicareRx (NEJE) at **1-800-790-6382** * HealthPlan/EGWP at **1-877-209-5167** * SilverScript at **1-888-572-0869**   **Note:** If there is a **Long Hold Time** (over 5 minutes) **Waiting for Senior Team**, then notify your Supervisor.  I understand your time is important, however there seems to be an extended wait for the Senior Team line. Let me see if my supervisor is available.  Do **NOT** release the beneficiary from the call as the Senior Team cannot perform callbacks. Make contact with your supervisor and follow their directions.   * Provide the following:   + Your first name, first letter of your last name, and job title   + Network ID (ID used to login to windows/Compass)   + Beneficiary’s ID number   + The beneficiary has been Fully Authenticated.   + Beneficiary’s Name   + Identify the call as an **Escalation**   + Brief Description of Issue to be escalated   + If a Grievance has been filed. * Introduce the caller to <Senior Team Member Name> from the Senior Team then release the call.   **CCR’s** - Do NOT ask the beneficiary if they need anything else at this point. | |
| Does not agree to hold | Contact your supervisor. | |

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| **Frequently Asked Questions** |

Refer to the following:

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| **Question / Statement** | **Answer / Resolution** |
| I think that my account is mixed up with someone else’s.  Someone is using my account because there are prescriptions listed that I don’t remember.  Someone has hacked my account. | We understand how upsetting an identity situation can be. Let’s take a look at some information to see what we can do to resolve this. May I ask you a few questions?  Refer to [Compass - Reporting Alleged Fraud CCR](file:///C:\Users\c071417\Downloads\TSRC-PROD-057131). |
| Why am I being transferred to someone else for this request? | We have a separate team that manages these requests. |
| Caller refuses to be transferred. | Your issue cannot be reviewed at this time if you do not want to be transferred to the team that can assist you. |
| I have never had to be transferred before, when and why did this change? | This is a recent change. We have a more streamlined approach to fulfilling these requests. |
| For all inquiries related to **beneficiary,** follow up. | CCR should **never** email or Instant Message a Senior Team or Case Coordinator directly; instead, you should:   * Research account thoroughly for answers or updates:   + If issue is resolved, provide resolution to **beneficiary**.   + If issue is still pending, then transfer the call to the Senior Team.   Use the suggested verbiage below when transferring the call to the Senior Team:  I am going to place you on a brief hold while I further research this issue for you.  **Note:** If there is a **Long Hold Time** (over 5 minutes) **Waiting for Senior Team:** Notify your Supervisor.  I understand your time is important, however there seems to be an extended wait for the Senior Team line. Let me see if my supervisor is available.  Do **NOT** release the beneficiary from the call as the Senior Team cannot perform callbacks. Make contact with your supervisor and follow their directions. |

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| **Related Documents** |

* Refer to the “Grievance Standard Verbiage (for use in Discussion with Beneficiary)” section in the appropriate work instruction linked to from [Compass MED D - Grievances Index](https://thesource.cvshealth.com/nuxeo/thesource/#!/view?docid=70034f51-77df-49a4-ae97-7d3d63b216b3).
* [Basic Call Handling](file:///C:\Users\C337799\AppData\Local\Microsoft\Windows\INetCache\Content.Outlook\U1QX4D53\TSRC-PROD-016401)

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

**Abbreviations/Definitions:** [Abbreviations / Definitions](file:///C:\Users\C337799\AppData\Local\Microsoft\Windows\INetCache\Content.Outlook\U1QX4D53\CMS-2-017428)

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