# PeopleSafe - Account Executive Consideration Task (AE Task)

[Identify Member Inquiry](#_Toc187487820)

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**Description:** Steps to follow when submitting an Account Executive (AE) Consideration task. This includes situations in which the CCR is not able to resolve a member inquiry due to incorrect, conflicting, or inaccurate information in PeopleSafe.

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| Identify Member Inquiry |

Perform the steps below:

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| **Step** | **Action** | |
| **1** | Determine if the member inquiry falls within one or more of the categories:   * Copay paid does not match plan design.   + Fully researched the situation for verification (**Examples:** Review CIF, Work Instructions, View Activities, member-level comments, Run Test Claim; Check Plan Summary). * CIF or work instruction specifically calls for AE task to be submitted. * PeopleSafe Plan Summary and Plan Design information in the CIF have different information listed. * Moving a POA/Authorization Release form from an expired account to an eligible account or from one line of eligibility to another.   + Member must have a POA/Authorization Releaseform on file. * If yes, create a task under the new account and include the expired ID number.   **Do Not Complete AE task if:**   * Contact Senior Team for urgent requests, such as: * Members has less than 10 days’ supply. * Inquiry is regarding Specialty Medication. * EGWP account issues should be treated as Medicare-D issues, contact the Senior Team to ensure the task is submitted under the correct account and the proper expectation is set. * If correction of Deductible, MOOP, MAB Accumulation amounts are needed, refer to [Corrections to Deductible, MOOP and MAB (CDH Accumulations Task) (006603).](https://thesource.cvshealth.com/nuxeo/thesource/#!/view?docid=0bb85a30-90e4-4d8d-beb4-3e090d3e9a94) * **MED D** claims adjustment request, refer to [MED D - Claim Adjustment and Refund Requests (026596)](https://thesource.cvshealth.com/nuxeo/thesource/#!/view?docid=ba37b791-b974-44e3-b8aa-0e3b561b5652). * For issues with adjudication for twins, refer to [[Twins (Rx) Adjudication (Multiple Births) (025065)](https://thesource.cvshealth.com/nuxeo/thesource/#!/view?docid=bc2957e6-d277-44fd-bdb0-37ce06631786)](https://thesource.cvshealth.com/nuxeo/thesource/#!/view?docid=bc2957e6-d277-44fd-bdb0-37ce06631786). * If Override section of the CIF states “Contact AM”, refer to [PeopleSafe - Plan Benefit Overrides (PBO) CCR (024671)](https://thesource.cvshealth.com/nuxeo/thesource/#!/view?docid=f075340f-87ec-41b3-bdeb-16422d0fed0e)and submit PBO RM task. * When member is requesting credit for an order where the day supply received less than plan allowable, refer to [PeopleSafe Bulk Up Rules CCR (030449)](https://thesource.cvshealth.com/nuxeo/thesource/#!/view?docid=e92bf2fd-2808-48f6-bb6d-fd22f0077735). * For any Mail Tag requests, refer to [[Return Order for Refund Copay Credit (Formerly Refund Copay Credit/Mail Tag Request)](https://thesource.cvshealth.com/nuxeo/thesource/#!/view?docid=7b80562c-60b7-4616-b431-c0a481c4c9cb) (060206).](https://thesource.cvshealth.com/nuxeo/thesource/#!/view?docid=7b80562c-60b7-4616-b431-c0a481c4c9cb) * When the CIF indicates “No” for administrative overrides, do not send AE Tasks requesting a “one-time” courtesy override as clients have advised that they will not approve these requests.   Clients with dedicated teams may have different directions. Reach out to those teams as instructed in PeopleSafe. | |
| **If…** | **Then…** |
| Yes | Proceed to next step |
| No | Search for other alternatives.   * If none can be found, call the Senior Team (CVS Commercial or CVS MED D) or speak to your supervisor to request approval to create the [AE task.](#AETask) |
| **2** | Create an Account Executive Consideration Task Resolution Manager as follows:   * **Medicare D** issues must be submitted under their Med D plan code. * **Commercial** issues must be submitted under the Commercial plan code.   Notes are required, be detailed; include all pertinent information.   * **Task Category:** Customer Care Internal Process * **Task Type:** Account Executive Consideration * **Queue:** CC Internal Processes – Client Support   **Notes:** Must include name and date of the prescriptions, medication name, and date of the order.  **Reminder:** Member phone number is mandatory. Verify the contact telephone number with the caller by reading it back to them. | |
| **3** | After completing the AE task information, click the **Save and Clear** button to submit the Task.  **Note:**  Do not submit a Participant Call Back Task. The member will be called back regarding resolution at the phone number in this Task. | |

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| Turnaround Time |

* Standard Request is up to 5 business days.
* Medicare D and EGWP accounts will experience a different turnaround time based on the situation. Consult the Senior Team to determine when the member will be contacted.

**Reminder:** Set proper expectations. If this turnaround time is not adequate for member, escalate via Supervisor or Senior Team following your team’s normal escalation process.

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| Related Documents |

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

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

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