# PeopleSafe - Log Activity/Capture Activity Codes

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**Description:** Activity codes to be used when logging the call type.

**Note:** New Activity Log codes may be added as needed for emergencies, pandemics, etcetera. Refer to theSource for Announcements when such scenarios occur.

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| Billing/Payment 200’s |

Refer to as needed:

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| **Activity Description** | **Code** | **Use For questions or issues concerning…** |
| **Refund Check Request** | **200** | Refund checks for an order overpayment |
| **Payment Dispute** | **203** | Disputes regarding a charge, bill, payment, invoice, etc. This does not include Premium Billing – refer to the Medicare D section. |
| **Stop Payment** | **207** | Stop payment placed on check. |
| **Payment Inquiry** | **209** | General queries asking about payments, bills etc.  Not used for payment disputes or making a payment.  If they asked about a payment and then made it, the original intent of the call is still Payment inquiry. |
| **Payment/Credit Applied** | **213** | Pay for a balance of some type  Not used for adding a Credit Card |

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| Coverage/Plan Design 1000’s |

Refer to as needed:

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| **Activity Description** | **Code** | **Use For questions or issues concerning…** |
| **Plan Design Education** | **1003** | How to use mail, copays, what is a formulary |
| **Plan Benefit Overrides (PBO)** | **1006** | Override such as vacation, refill too soon or other, regardless if you able to complete it or not |
| **Appeals** | **1007** | Processes or status inquiries |
| **Prior Authorization (PA) Exception, Initial Benefit Review (IBR)** | **1011** | If PA is needed, was it approved already, what to do since rejected etc. |
| **Formulary Updates** | **1022** | Used for questions dealing with plan design formulary updates. |
| **Pharmacy Network** | **1025** | Rejections from pharmacy network or requests concerning pharmacy network  If asking about specific locations, use Retail. |
| **Coding Issues** | **1026** | Used mostly during Welcome Season and instructed when to use for specific coding issue reasons |
| **Medication Coverage** | **1032** | To see if medication is covered, quantity allowed for medication, tier, cost etc. |
| **Alternate Meds** | **1033** | About alternative medications |
| **COVID Vaccine** | **1034** | COVID vaccine inquiries |

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| Eligibility 700’s |

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| **Activity Description** | **Code** | **Use For questions/concerns/complaints regarding…** |
| **Eligibility Update request** | **700** | Used when you must reach out to someone else to update information.    Requests or questions pertaining to eligibility maintenance when plan is on file. Update from the Account team, Benefits Office etc. |
| **Eligibility Verification** | **701** | Verifying if eligible or getting information such as BIN, PCN, ID etc.  This does **not** apply to requesting an ID card. |
| **COB Verification** | **708** | Secondary insurance for commercial |

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| Media Event 3800’s |

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| **Activity Description** | **Code** | **Use For questions or issues concerning…** |
| **Media Event** | **3800** | Dealing with media or members affected by Civil Unrest and Retail Store closures.  When directed for items that may be in the news causing call volume.  Announcements will be provided on when to use. |

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| Medicare D 1300’s |

**Reminder:** For all MED D Calls, reference the [MED D - Call Documentation Including Viewing and Adding Comments in PeopleSafe (067665)](https://thesource.cvshealth.com/nuxeo/thesource/#!/view?docid=e9cdb772-9c04-4e42-b87a-ae4d2c2e1f62). As per CMS guidance, detailed documentation is required for all MED D calls.

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| **Activity Description** | **Code** | **Use For questions or issues concerning…** |
| **Post ANOC letter** | **1300** | Post ANOC letters |
| **CD Client Handles** | **1315** | When CD cannot be pursued because the client handles it |
| **Grievance Submitted** | **1319** | When MedHOK grievance is submitted on behalf of the beneficiary |
| **Grievance Client Handles** | **1320** | Member expresses dissatisfaction and is transferred to the client to file the grievance |
| **CD Transfer to CDA** | **1322** | RM Task created to have the CD&A Process initiated (**or**)  Call Transferred to CD&A by Senior Team |
| **Grievance Caller Not Eligible** | **1323** | When caller is not eligible to file a MedHOK Grievance |
| **Grievance – Member Refuses Transfer to Client or Unable to Transfer** | **1325** | **MED D only:** A grievance/complaint is expressed, and the CIF indicates that the Client handles grievances. The member refuses or is unable to be transferred. |
| **Premium Billing** | **1327** | Premium Billing |
| **LEP/TRC Attestation** | **1328** | Process of taking LEP/TRC Attestation |
| **Florida Agreement – Grievance** | **1329** | Florida Agreement - Grievance |

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| Miscellaneous 1800’s |

Refer to as needed:

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| **Activity Description** | **Code** | **Use For questions or issues concerning…** |
| **Potential Fraud** | **1805** | Determining potential fraud |
| **PBM Transition** | **1808** | An order/Rx being transferred to another account within CVS Caremark or PBM |
| **Natural Disaster** | **1809** | Overrides for natural disaster emergency |
| **View Account** | **1835** | Viewing account and no deliverables |
| **Coaching (SRT Only)** | **1875** | Coaching – Senior Team Use Only |
| **Call Disconnected/Dropped** | **1889** | Call disconnected/dropped |
| **COVID-19 or Coronavirus Inquiry** | **1898** | COVID-19 or Coronavirus inquiries  COVID-19 OTC Test Kits use this codeand add the following in the Activity Log Notes: “**COVID-19 OTC TEST KIT Inquiry”.** |

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| Order Placement 300’s |

Refer to as needed:

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| **Activity Description** | **Code** | **Use For questions or issues concerning…** |
| **Manual Refill** | **304** | Member’s intent is to place a refill no matter if we have to do RM task or other |
| **Rx Transfer** | **307** | Transfer Rx into or out of our PBM |
| **Order Placement** | **313** | Use this code when an order was placed for the member. |
| **Restart Rx** | **318** | Use this when restarting or releasing a prescription from FFL, SCH, A/R, Indefinite Hold or other |
| **Start New Rx** | **317** | Requesting a new or change to existing prescription |

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| Order Status 400’s |

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| **Activity Description** | **Code** | **Use For questions or issues concerning…** |
| **Backorder** | **400** | Order delay due to medication backorder. |
| **Order Delayed in House** | **401** | Concerns about order status - diverted |
| **Order Inquiry** | **404** | About the order for anything else such as did we receive the order, what is the medication, is it in process, did it ship yet or when will it ship. |
| **Order Lost in Transit Order Reshipment** | **405** | Order Reshipment |
| **Cancel Rx/Order** | **408** | Cancel Rx/Order |
| **In Process Order** | **427** | Any change to an order that we have in process such as changing the shipping address, cancel, expedite, change payment etc. |
| **Shipment Issue** | **428** | Issue with an order post shipment such as LIT, Damaged, Reship request |
| **Mail Tag/Return** | **429** | Mail tag if allowed or not but the intent was to return the medication |

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| Paper Claims 600’s |

Refer to as needed:

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| **Activity Description** | **Code** | **Use For questions or issues concerning…** |
| **Claim Pull** | **600** | Pulling a paper claim via email |
| **Claim Research Request** | **601** | Adding/Confirming paper claim information via task |
| **Claim Status** | **602** | Paper Claim status within Normal turnaround times |
| **Claim Dispute** | **610** | Disputing a paper claim, rejection |

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| Profile Updates and ID Cards 3900’s |

Refer to as needed:

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| **Activity Description** | **Code** | **Use For questions or issues concerning…** |
| **Demographic Changes** | **3900** | Updates such as address change, email, text, preferences etc. |
| **ID Cards** | **3901** | ID cards |

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| Programs 800’s |

Refer to as needed:

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| **Activity Description** | **Code** | **Use For questions or issues concerning…** |
| **Maintenance Choice Inquiry** | **807** | Maintenance Choice Questions/Concerns/Presentation/Letter  **Examples:** Rejection due to Maintenance Choice, prescription not covered at non-CVS retail pharmacy, can they get 90 days at retail, etc. |
| **AutoFill / Renewal**  **Auto Renewal Program (ARP)** | **811** | Primary reason for the call was to enroll or disenroll in ARP program |
| **Other Programs** | **821** | Any other program we may be offering  **Examples:** Glucose meter program, smoking cessation, etc. |

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| Retail 900’s |

Refer to as needed:

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| **Activity Description** | **Code** | **Use For questions or issues concerning…** |
| **Retail Billing/Payment** | **900** | Point of Sale (POS) concerning reimbursement checks |
| **Retail Claim reversal** | **901** | Assistance from Pharmacy Help Desk with a retail claim reversal |
| **Retail NDC Maintenance** | **902** | Point of Sale requests to add NDC or price and/or verify brand vs generic |
| **Retail Pharmacy Contracts** | **903** | Point of Sale regarding joining our PBM network |
| **Retail Pharmacy Locations** | **904** | In network/out of network pharmacy locations in the member’s area |
| **Prescriber ID Maintenance** | **906** | Questions/Assistance about invalid DEA numbers for prescribers, as well as submitting to have address/phone/fax updated |
| **Retail Pharmacy Maintenance** | **907** | Requests from Point of Sale to have address/phone/fax updated |
| **Retail Assist with Transmission** | **913** | Mostly used by the Pharmacy Help Desk - Retail claim processing |
| **Claim Research** | **917** | Unknown Retail Pharmacy rejections/possible coding issues/claim research |
| **Pharmacy Network Change Disruption** | **920** | Pharmacy Network Changes |

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| Rx Request Website 1600’s |

Refer to as needed:

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| **Activity Description** | **Code** | **Use For questions or issues concerning…** |
| **Web Technical Support** | **1602** | Web errors and navigation |

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| Rx Verification 1100’s |

Refer to as needed:

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| **Activity Description** | **Code** | **Use For questions or issues concerning…** |
| **Rx Verify Dosage/Strength** | **1101** | Dosage/strengths of Rx |
| **Courtesy Retranslation** | **1106** | Retranslation is requested |
| **Rx Verify** | **1115** | Verifying a prescription is for the correct medication, directions, quantity etc.  Use this if can answer or if transferring to Clinical Care Services. |
| **Medication Recall** | **1116** | All medication recalls |

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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)

Refer to the **Process** section of the [PeopleSafe - Log Activity (042891)](https://thesource.cvshealth.com/nuxeo/thesource/#!/view?docid=08023401-0eee-4e2b-97fe-f0bc7c5aa2f0) document for the proper call-logging process.

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