**Compass - Prescription (Rx) Transfer to and from the Hawaii (HIP) Dispensing Pharmacy Only**

[Transfer Retail to Our Hawaii (HIP) Mail Order Process](#_Toc168578546)

[Member Requesting Rx Transfer from Our Hawaii (HIP) Mail Order to Another Pharmacy](#_Toc168578547)

[Member Requests to Transfer Prescriptions from Another Mail Order to Our Hawaii (HIP) Mail Order Pharmacy](#_Toc168578548)

[Pharmacy Prescription (Rx) Transfer Scenario Guide](#_Toc168578549)

[Transfer Request Email Template](#_Toc168578550)

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[Related Documents](#_Toc168578552)

**Description:**How to transfer a prescription to or from the Hawaii (HIP) dispensing pharmacy only, along with additional scenarios and steps for agents to use to submit an offline Support Task (formerly known as Resolution Manager (RM) Task/Service Resolution) with an existing claim in Compass.

Do **not** offer to call the Retail pharmacy to initiate the Rx transfer. The pharmacy that will fill the medication must start the Rx transfer process.



If speaking to a fully verified **Pharmacist** or **Pharmacy Tech** calling to request a transfer of a Rx(s) from our Mail Order to their pharmacy, refer to [Rx Transfer: Pharmacist Requesting a Prescription Transfer (Retail to Mail or Mail to Retail) (041409)](https://thesource.cvshealth.com/nuxeo/thesource/#!/view?docid=5c75c145-b15c-441e-aba2-190ab033d68f). This process is not specific to either Compass or PeopleSafe.



**Note:** Encourage the member to allow us to initiate a request for a New Rx:

* If the member agrees, refer to [Compass - Obtaining a New Prescription (Rx) for the Member (New Rx Request) (054208)](https://thesource.cvshealth.com/nuxeo/thesource/#!/view?docid=a7684ce9-c2bc-4cbc-ab37-c1ffb7789706) for the process to initiate the New Rx Request.
* If the member refuses the offer to initiate a New Rx, continue to the applicable transfer section of the work instruction.

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| **Transfer Retail to** **Our Hawaii (HIP) Mail Order Process** |

Follow the steps below:

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| **Step** | **Action** | | | |
| **1** | Verify that the member has enough medication on hand:  How much medication do you have on hand?   * If less than 5 days’ supply on hand, refer to [Compass - Member Low or Out of Medication (063003)](https://thesource.cvshealth.com/nuxeo/thesource/#!/view?docid=91f73b9d-e568-48dd-9ab4-88cb2654d4c9)and complete as appropriate. If a member insists on transferring the prescription, proceed to next Step. * If more than 5 days’ supply on hand, proceed to the next Step.   **Note:** Retail to Mail Prescription transfer can be initiated for multiple members at one time. | | | |
| **2** | Determine if a Support Task has already been created. Refer to [Compass - View Support Task History (050044)](https://thesource.cvshealth.com/nuxeo/thesource/#!/view?docid=1674c564-fc41-42ad-a7c2-f3b610716cba). | | | |
| **If…** | **Then…** | | |
| Yes | Advise the caller a Support Task already exists and provide the turnaround time.  **Turn Around Time:**Up to three (3) business days followed by the standard order process (up to five (5) business days) time. This does not include shipping time.  **Note:** The turnaround time (TAT) is dependent on the pharmacy with the prescription sending us the Rx. We cannot guarantee a pharmacy will respond to our request.  Refer to [Compass - Order Shipping Turn Around Time (TAT) (062824).](https://thesource.cvshealth.com/nuxeo/thesource/#!/view?docid=31ee69db-e3d5-4717-b336-23ca51f1191e) | | |
| No | Proceed to the next Step. | | |
| **3** | Advise the member that we can send a new prescription request to their doctor.  **Note:** There are many reasons a prescription transfer request may fail. Encourage the member to allow you to instead obtain a new prescription from their doctor. | | | |
| **If member…** | | | **Then…** |
| Agrees to new prescription (Rx) request | | | Refer to [Compass - Obtaining a New Prescription (Rx) for the Member (New Rx Request) (054208)](https://thesource.cvshealth.com/nuxeo/thesource/#!/view?docid=a7684ce9-c2bc-4cbc-ab37-c1ffb7789706). |
| Refuses | | | Continue to next step. |
| **4** | Advise the caller that the prescription transfer requires enough refills remaining for a 90 days’ supply. At least one 90 Day Supply (DS) or three-30 DS refills are needed to successfully initiate the Mail Order. Rx transfer.  **Note:** If the member wants a less than the maintenance dose at Mail Order, warm transfer the caller to FastStart who can assist the member with obtaining a new prescription for less than a maintenance dose. | | | |
| **If an Rx transfer is…** | | | **Then…** |
| **Available**  (**Example:** The member has a valid prescription at a Retail pharmacy for at least 90 days’ supply inclusive of all refills) | | | Proceed to the next Step. |
| **Not available**  The Rx transfer is unavailable if any of the following criteria apply:   * Prescription is expired or does not have enough refills remaining * C2 Controlled Substances * C 3-5 Rx that has never been filled or has already been transferred * Compounded Prescription * Member’s plan does not participate in Mail Order (MOR) * The Retail pharmacy where the Rx was issued is in Arkansas, Nebraska, New York, Puerto Rico, Utah, or Washington state, which cannot transfer prescriptions to other states; instead, a new prescription is required. | | | What we can do is contact your prescriber for a new 90-day supply of your prescription. It will maximize your benefits and ensure you receive the proper days’ supply for mail service.  Then proceed to [Compass - Obtaining a New Prescription (Rx) for the Member (New Rx Request) (054208)](https://thesource.cvshealth.com/nuxeo/thesource/#!/view?docid=a7684ce9-c2bc-4cbc-ab37-c1ffb7789706).   * If the caller does not want to proceed with a New Rx Request, offer them the following options. Their prescriber can:   + **eScribe** the prescription to CVS/Caremark.   + **Fax** the prescription to CVS/Caremark at **1-800-378-0323.**   + **Call** the prescription into CVS/Caremark at **1-877-418-4130 option 2.**   **Note:** If the member’s plan does not participate in Mail Order (MOR), we cannot assist with a prescription transfer or a new Rx request. Member should contact their preferred in-network pharmacy they would like to fill the medication at for assistance. |
| **5** | Navigate to the **Claims** **Landing Page** to determine if the Rx(s) requesting to be transferred are listed in the Claims table. | | | |
| **If…** | | | **Then…** |
| Rx(s) are listed in the Claims Table | | | Proceed to next step. |
| Member requests a transfer of Rx(s) that are **not listed** on the Claims table.  **Example:** Filled Rx(s) at retail pharmacy with Prior PBM. | | | A new prescription is needed.  Refer to [Compass - Obtaining a New Prescription (Rx) for the Member (New Rx Request) (054208)](https://thesource.cvshealth.com/nuxeo/thesource/#!/view?docid=a7684ce9-c2bc-4cbc-ab37-c1ffb7789706). |
| **6** | Check the box next to the **Rx #** for each medication the member wants to transfer to the Mail Order Pharmacy.  **Notes:**   * The **Transfer Retail to Mail** button is disabled until at least one Rx is selected. * The **Transfer Retail to Mail** button does not display on screen if no claims are listed. * For transfers from multiple pharmacies, multiple requests must be submitted. Ensure all selected Rx’s are from the same Retail pharmacy before proceeding. If there are prescriptions from multiple different pharmacies, follow the steps to transfer the prescription for 1 (one) pharmacy, then repeat for each additional pharmacy.       **Result:** The **Transfer Retail to Mail** button illuminates. | | | |
| **7** | Click the **Transfer Retail to Mail** button.    **Result:** The Transfer Retail to Mail Support Task screen displays.  **Note:** If one of the selected prescriptions is ineligible, a dynamic **Ineligible for Transfer to Mail** popup displays indicating the reason.  **Example:** A prescription filled at a pharmacy in Arkansas displays: “The retail pharmacy is located in a state that does not allow transfers to mail.”     * To exit, click **Close**.   **Result:** The system automatically runs a Test Claim. | | | |
| **8** | Review the Test Claim results at the top of the Transfer Retail to Mail Support Task screen to ensure the medication is covered through Mail Order. Refer to [Compass - Test Claims (050041)](https://thesource.cvshealth.com/nuxeo/thesource/#!/view?docid=60c20ea0-1d07-46e3-809a-b54734b80fbe) if needed.    **Notes:**   * Compass displays the following message when a Test Claim **cannot** be completed: “Test claims failed to run. **Try rerunning test claims**.” Refer to the [Scenario Guide](#_Pharmacy_Prescription_(Rx)) for further information. * If the member decides not to transfer any of the medications selected on the previous screen, click **Cancel** at the bottom of the screen. * If the member decides to remove medication(s) from the Rx Transfer request, from the Test Claim section, click the **Row Level Action** drop-down arrow for that medication and select **Remove**. | | | |
| **9** | Complete the required fields for the Transfer Retail to Mail Support Task.  Review and confirm the member’s shipping address and phone number are correct before submitting the request.     * If the member’s address, phone number, or payment method need to be changed, click the related drop-down menu to select from existing shipping addresses/phone numbers/payment methods on the member’s account. | | | |
| **If the Shipping Address/Phone Number/Payment Method the member provides is…** | | **Then…** | |
| Available to select from the related drop-down menu | | Select the existing Shipping Address/Phone Number/Payment Method and proceed to the next Step. | |
| **Not** available to select from related the drop-down menu | | 1. Click the **Add/Update** button next to the related drop-down menu and add the new/updated information to the member’s account. Refer to the below for more information as needed:    * [Compass - Add / Edit / Delete Mailing Address (053255)](https://thesource.cvshealth.com/nuxeo/thesource/#!/view?docid=9cfb4422-7129-4bca-b1ea-f1d6fa964906)    * [Compass - Add / Edit / Delete Phone Number (053256)](https://thesource.cvshealth.com/nuxeo/thesource/#!/view?docid=c37d4289-63b2-4732-a35c-c411cc26a29c)    * [Compass - Add, Edit, and Delete Mail Order Payment Methods (Credit Card & eCheck) (056289)](https://thesource.cvshealth.com/nuxeo/thesource/#!/view?docid=5a1a67eb-a7b1-4ae5-bcfe-e986bbe4aa3d) 2. Click **Refresh for Updates** to add it to the related drop-down menu. 3. Click the drop-down menu and select the newly added/updated information. 4. Proceed to the next Step. | |
| **10** | Click **Submit Support Task** once all fields are complete and verified.  **Note:** If a pop-up message displays indicating the Test Claim failed, refer to the [Scenario Guide](#_Pharmacy_Prescription_(Rx)).    **Notes:**   * To exit, click **Cancel**. * If Automation fails, refer to [Compass - Obtaining a New Prescription (Rx) for the Member (New Rx Request) (054208)](https://thesource.cvshealth.com/nuxeo/thesource/#!/view?docid=a7684ce9-c2bc-4cbc-ab37-c1ffb7789706). * If member does not want us to send a new Rx request, the member can mail in a new written RX, or their prescriber can:   + **eScribe** the prescription to CVS/Caremark.   + **Fax** the prescription to CVS/Caremark at **1-800-378-0323.**   + **Call** the prescription into CVS/Caremark at **1-877-418-4130 option 2.** | | | |
| **11** | For **Urgent Support Tasks** **only**:   * Navigate to the **Case** **Landing Page** and locate the **Member’s Recent Support Tasks** panel. (Click Refresh button) * Click the Support Task hyperlink of the task you recently submitted. * Locate the **Priority** field and click the drop-down arrow to change the **Priority** field from **Normal** to **Escalated**.   **Note:** Urgent Support Task requests can only be changed manually after the support task has been submitted. | | | |
| **12** | Once the Support Task is submitted, copy the [Transfer Request Email Template](#_Transfer_Request_Email) and send an email to **HIPCCSOffline** to include the following information:   * Member ID & Member Name * Pharmacy Name & NPI * Day supply member has on hand & day supply member is expecting through mail * Estimated copay provided to member * If recently filled, ask if member already picked up   + If no, do we tell retail to cancel their fill   + If yes, do we leave in FFL or place on file   If request is **Urgent (less than 5 days on hand)**, add “Urgent” in the email subject line **AND** proceed to next Step.  Once email is complete, click **Send** | | | |

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| **Member Requesting Rx Transfer from Our Hawaii (HIP) Mail Order to Another Pharmacy** |

If speaking to a member and they request Caremark to transfer from mail to retail, determine if it is an MChoice transfer.

* If yes, refer to [Compass - Maintenance Choice (MChoice) Rx Transfer (056032)](https://thesource.cvshealth.com/nuxeo/thesource/#!/view?docid=cc2503bf-62dc-4db1-ad98-abfe4e9e98d4)
* If not, refer to the steps below.

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| **Step** | **Action** |
|  | From the **Case Data** section that displays at the top of all Compass screens, click the **Create Support Task** button.    **Result:**  New Support Task: Support Task screen displays. |
|  | If request is **Urgent**, locate the **Priority** field in the New Support Task: Support Task screen and click the drop-down arrow to change from the **Priority** from Normal to **Escalated.**   1. Submit the following **Support Task**:   **Task Type:** Mail Order Transfer to Retail  **Complete all required fields.**   * **Drug Names:** Include **Rx Number, Rx Name and Rx Strength** * **Pharmacy Phone #:** Pharmacy Phone # including area code * **Pharmacy Name:**  Pharmacy Name where the Rx is being transferred to * **Assigned Pharmacy:**  HIP-Hawaii  1. Add in Notes Section:   Transfer to Retail, Day Supply of Rx is <enter day supply>   1. Click the **Save** button.   Refer to [Compass - Create a Support Task (050031)](https://thesource.cvshealth.com/nuxeo/thesource/#!/view?docid=64f18e5a-4d56-4175-ba8e-e7d094e501d6) or [Compass - Support Task Types and Uses List (058147)](https://thesource.cvshealth.com/nuxeo/thesource/#!/view?docid=6753488f-3996-45d9-88ba-257575369a98) as needed. |
|  | 1. Once the **Support Task** is submitted, copy the [Transfer Request Email Template](#_Transfer_Request_Email) and send an email to **HIPCCSOffline** to include the following information:  * Member ID & Member Name * Pharmacy Name & NPI * Prescription number and drug name & strength * Day supply member has on hand   If request is **Urgent (less than 5 days on hand)**, add “Urgent” in the email subject line.   1. Once email is complete, click **Send** |

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| **Member Requests to Transfer Prescriptions from Another Mail Order to Our Hawaii (HIP) Mail Order Pharmacy** |

 Perform the steps below:

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| **Step** | **Action** | |
|  | From the Claims Landing page, **Mail Rx** tab, check the **Prior PBM Prescription** drop down to verify if the Rx has been transferred.  **Note:** For more information, refer to the “Selecting Prior PBM Prescriptions” section within the scenario guide of [Compass - Mail Rx Refill/Renewal (Order Placement) (054262)](https://thesource.cvshealth.com/nuxeo/thesource/" \l "!/view?docid=ad3a7263-725b-4d5d-a2ec-440f1f30d79c). | |
| **If the prescription is…** | **Then…** |
| On File | Place the refill as normal, refer to [Compass - Mail Rx Refill/Renewal (Order Placement) (054262).](https://thesource.cvshealth.com/nuxeo/thesource/#!/view?docid=ad3a7263-725b-4d5d-a2ec-440f1f30d79c) |
| Not on file | Proceed to next step. |
|  | From the **Case Data** section that displays at the top of all Compass screens, click the **Create Support Task** button.  **Note:** Check that a support task for this has not been initiated and select the “View PeopleSafe Activity” link to ensure that no task was created. | |
|  | If request is **Urgent**, change **Priority** field from Normal to Escalated.   1. Submit the following Support Task:   **Task Type:** Transfer Other Mail Rx to Our Mail Order  **Complete all required fields.**   * **Drug Names:** Include **Rx Number, Rx Name and Rx Strength** * **Pharmacy Phone #:** PBM phone # including area code * **Pharmacy Name:**  PBM where the Rx is currently at * **Assigned Pharmacy:** HIP - Hawaii  1. Add in the Notes Section:   Transfer to Home Delivery, Day Supply of Rx is <enter day supply>  **or**  Transfer to Home Delivery member is aware of current day supply of Rx is less than 90 days.   1. Click the **Save** button.   Refer to [Compass - Create a Support Task (050031)](https://thesource.cvshealth.com/nuxeo/thesource/#!/view?docid=64f18e5a-4d56-4175-ba8e-e7d094e501d6) or [Compass - Support Task Types and Uses List (058147)](https://thesource.cvshealth.com/nuxeo/thesource/#!/view?docid=6753488f-3996-45d9-88ba-257575369a98), as needed. | |
|  | 1. Once the **Support Task** is submitted, copy the [Transfer Request Email Template](#_Transfer_Request_Email) and send an email to **HIPCCSOffline** to include the following information:    * Member ID & Member Name    * Pharmacy Name & NPI    * Prescription number and drug name & strength    * Day supply member has on hand & day supply member is expecting through mail    * Estimated copay provided to member   If request is **Urgent (less than 5 days on hand)**, add “Urgent” in the email subject line.   1. Once email is complete, click **Send.** | |

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| **Pharmacy Prescription (Rx) Transfer Scenario Guide** |

Utilize the scenario guide for the following situations:

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| **Scenario** | **Action** | |
| Test Claims Failed to Run | * + 1. Click the **Try rerunning test claims** hyperlink.     **Result:** The Transfer Retail to Mail Support Task – Test Claim Results screen displays.   * The Approved/Rejectedcolumn displays: “Test Claim failed.” * The following message displays in the Cost section: “Test Claim failed. Run a manual test claim.”   + 1. Click the **Run a manual test claim** hyperlink.     **Result:** The Test Claim subtab opens.  **Notes:**   * Test Claim Status field displays: “Test claim failed.” * The Total Cost is blank.   + 1. Return to Transfer Retail to Mail Process [Step 9](#TransferRetailtoMailProcessStep8). | |
| Clicking Submit Support Task  The test claim failed to run automatically. | When the Review the Following pop-up message displays, a manual Test Claim is needed to provide the member with the copay amount:  “The test claim failed to run automatically. Verify you have provided the copay.” | |
| **If...** | **Then...** |
| Manual Test Claim has been run | 1. Click the **checkbox** to indicate “I have ran a manual Test Claim and provided the copay amount to the member.”   **Result:** ThePlace Order button illuminates.   1. Click **Place Order** to continue with the order.   **Note:** Click **Cancel** to return to the Transfer Retail to Mail Support Task screen. |

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| **Transfer Request Email Template** |

After submitting a Support Task for a Prescription (Rx) Transfer from our Mail Order to another pharmacy or from another Mail Order to our Mail Order Pharmacy, send the following email to **HIPCCSOffline**:

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| **Step** | **Action** |
|  | 1. Once Support Task is submitted, copy and paste template below in Outlook email. 2. In the CC field of the email add: [hiccseniors@CVSHealth.com](mailto:hiccseniors@CVSHealth.com) 3. In the subject line of the email add: Transfer Request - Pharmacy/Store # (COMPASS) \*Securemail\* 4. Include at the start of the subject line Urgent if member has less than 5 days’ supply on hand.  |  |  | | --- | --- | | **Activity** | **Information** | | Prescription Number, Drug Name, and Strength |  | | Day Supply on Hand |  | | Support Task # |  | | Member Name & ID |  | | Pharmacy Name & NPI |  | | Estimated copay provided to member, if applicable. |  | | Other notes, if applicable:   * If recent claim/in waiting bin at retail: Determine whether member will be picking up at POS first or if we need to reverse the claim at POS and fill through Mail Order * Place in FFL or Place on hold * Mbr only wants specific qty/ day supply filled |  | |

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| **Turn Around Time** |

**Support Task:**  Up to three (3) business days followed by the standard order process time (up to five (5) business days); however, this does not include shipping time.

**Note:**  Advise the member that once the prescription is transferred to Mail Order, it fills and ships like a new prescription.

If the member wants the prescription placed on hold until a future date, add a Mail Alert to the account instructing Mail Order to place the transferred RX on hold. Refer to [Compass - Viewing, Adding, and Editing Alerts (054194)](https://thesource.cvshealth.com/nuxeo/thesource/#!/view?docid=36c941d2-25a6-4075-993d-f12deb31be18).

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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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