# PeopleSafe - Split Payments

[Reminders](#_Toc149031339)

[New or Refill Order and Payment Needs to be Split (No Order in Progress)](#_Toc149031340)

[Split Payment in Order that’s In Progress or Payment Exception](#_Toc149031341)

[Using Two Separate FSA Accounts](#_Toc149031342)

[Turnaround Time](#_Toc149031343)

[Related Documents](#_Toc149031344)

**Description:** Steps to add multiple payments for members with more than one credit card or e-check when a member is placing a new order, a refill order, or an order that is in progress.

|  |
| --- |
| Reminders |

* Verify information for prescription(s) the member wants to order.
* Verify that payment methods are on file and up to date prior to placing tasks, sending emails, or calling Senior Team.
* Members may still receive calls for high copay issues after releasing orders for split payment due to contractual obligations with clients which require us to make outbound calls when copays reach a certain amount.
* If the payment order has been stopped for a partial authorization **do not** make any changes to the method of payment within the order. Updating the method of payment on a partially authorized order will cause the original (partial) charge to be voided and can cause delays in resolving the partial authorization.
* **Never** list full credit card numbers or e-check routing and account numbers in comment fields. List only the last 4 digits of the members debit/credit card or e-check. This includes RM task comments, notes, emails, and Stop See comments. Enter Credit card numbers and e-check routing and account numbers in system-specific credit card number/E-check routing and account number fields **only**. Comment fields are periodically checked for compliance.  
   Users who fail to abide by policy may be subject to disciplinary action.

[Top of the Document](#_top)

|  |
| --- |
| New or Refill Order and Payment Needs to be Split (No Order in Progress) |

Perform the following steps when a member wants to place a new/refill order and you know in advance that the member wants to have the payment split:

|  |  |
| --- | --- |
| **Step** | **Action** |
| **1** | Verify with member medications needed. Run [test claims (004573)](https://thesource.cvshealth.com/nuxeo/thesource/#!/view?docid=59c4e7fa-4a87-43c4-89cd-5d4f8c6c3421) to verify the cost of the medications. |
| **2** | Verify the method of payment is listed as a valid payment option on the member’s account. |
| **3** | Verify necessary information and then create a [Manual Refill (027179)](https://thesource.cvshealth.com/nuxeo/thesource/#!/view?docid=eea92f37-f941-4237-9b9e-af999ad68e8f) task: |
| **4** | Fill out information and include in the notes (copy and paste):   * Payment Method #1: Last 4 digits of credit/debit card or e-check. * **#1** - Payment Amount. * Payment Method #2: Last 4 digits of credit/debit card or e-check. * **#2** - Payment Amount.   Do not list full credit card or account numbers. |
| **5** | Save task and educate member that the request is complete.  **Note:** Turnaround time is up to 2 business days. |

[Top of the Document](#_top)

|  |
| --- |
| Split Payment in Order that’s In Progress or Payment Exception |

**Note: Do not** make any manual changes to the method of payment on an order showing in progress. Updating the method of payment on a partially authorized order will cause the original charge to be voided and can cause delays in resolving the partial authorization.

Perform these steps when a member wants to split a payment that is already in the system showing in progress or is in payment exception status:

|  |  |  |
| --- | --- | --- |
| **Step** | **Action** | |
| **1** | Verify with member medications needed in the order are correct. If not, then place a separate new refill order as needed. | |
| **2** | Determine if the original method of payment is voided from the original order: | |
| **If…** | **Then…** |
| Yes | 1. Create an RM task, Billing and Payment Dispute:    * **Task Category:**  Billing/Payment    * **Task Type:**  Payment Dispute    * **Queue:**  Finance – Northbrook    * **Reason for Dispute:** (Copy and paste and add appropriate information from member's account.)   **Notes:**  Member would like to pay via split payment:   * Payment Method #1: Payment Type & Last 4 digits. * **#1-** Payment Amount. * Payment Method #2: Payment Type & Last 4 digits. * **#2** - Payment Amount.   “Original method of payment was voided from the order, please charge the original amount ($XX.XX) to VISA/MSTR/AMEX ending xxxx.”   1. Take note of the RM task number and proceed to the next step. |
| No | Proceed to the next step. |
| **3** | 1. Create an email to [SATDebitsandCredits@CVShealth.com](mailto:SATDebitsandCredits@CVShealth.com) 2. Copy and paste the Split Payment table below into the body of the email, and then complete the fields.  |  | | --- | | **Split Payment** |  |  |  | | --- | --- | | **Member ID#** |  | | **Member Name** |  | | **Order Number** |  | | **First Form of Payment and last 4 Digits** (VISA, MasterCard, American Express, Discover Card, E-Check, or Fill and Bill if allowed by client) |  | | **First Amount Applied** |  | | **Second Form of Payment and last 4 Digits** (VISA, MasterCard, American Express, Discover Card, E-Check, or Fill and Bill if allowed by client) |  | | **Second Amount Applied:** |  | | **Reason for Split Payment** |  | | **Additional Notification** (if any amount already applied to either Payment and if or why RM task created) |  | | **RM Task Number** |  |   **Notes:**   * If no email access contact [Senior Team (016311)](https://thesource.cvshealth.com/nuxeo/thesource/#!/view?docid=9eef064d-c7d7-42f7-9026-1497496b4d51) to have the email sent. * If there are more than two payment methods, add extra lines for the additional payments. | |
| **4** | Include **“SECUREMAIL – SPLIT PAYMENT this email may contain PHI or other sensitive information”** in Subject line. | |
| **5** | Add the **Sensitivity Stamp Label** to the email in Outlook.    **Note:** After pressing Send to forward the email to the appropriate team, you can verify the email was successfully sent by double clicking **Sent Items** listed on the left side of your Outlook menu. | |
| **6** | Add Order level comments (copy and paste):  “Member would like to pay via split payment.”   * Payment Method #1 Last 4 digits of debit/credit card or e-check. * **1#** - Payment Amount. * Payment Method #2 Last 4 digits of debit/credit card or e-check * **2# -** Payment Amount.   **Notes:**   * Refer to [Viewing and Adding Comments in PeopleSafe (086165)](https://thesource.cvshealth.com/nuxeo/thesource/#!/view?docid=dfe59c11-8a1a-4c1e-b939-2825186a20ce). * Verify both payment methods are listed and up to date on member’s account.   If applicable, for **High Dollar Copays Orders** add Stop See Comment:   * Add [Stop See Comments (007009)](https://thesource.cvshealth.com/nuxeo/thesource/#!/view?docid=6a481d2d-cc6d-40f0-af30-1858db02b7a4)to the member’s profile (via the view comments screen) stating the following: <Name> approved high dollar copay <amount> on Order <enter order task number> with payment method <method>. * Refer to [High Dollar Copay Orders and Cardholder Limits (086469)](https://thesource.cvshealth.com/nuxeo/thesource/#!/view?docid=bc3693f3-fefe-4bb5-8720-4e51e940a0f7). | |

[Top of the Document](#_top)

|  |
| --- |
| Using Two Separate FSA Accounts |

When a member wants to pay for an order in the system with two separate FSA Accounts, complete these steps:

|  |  |
| --- | --- |
| **Step** | **Action** |
| **1** | Send the [Split Payment Email](#SpitPaymentEmailStep3) as described above. |
| **2** | Create a Payment Dispute Task.   * **Category:** Billing and Payment. * **Type:** Payment Dispute. * **Queue:** Finance – Northbrook. * **Reason for Dispute:** (Copy and paste) Partially authorized order - Two separate FSA accounts requested for payment method.   **Notes:**  Member would like to pay via split payment:   * Payment Method #1: Payment Type & Last 4 digits. * **1# -** Payment Amount. * Payment Method #2: Payment Type & Last 4 digits. * **2# -** Payment Amount. |

[Top of the Document](#_top)

## Turnaround Time

* Emails sent to the **SAT Debits & Credits** mailbox will be worked within 1 business day, excluding weekends.
* Manual Task turnaround time (up to 2 business days)

Business days do **not** include weekends and holidays.

[Top of the Document](#_top)

## Related Documents

[Log Activity/Capture Activity Codes (005164)](https://thesource.cvshealth.com/nuxeo/thesource/#!/view?docid=bdac0c67-5fee-47ba-a3aa-aab84900cf78)

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

[Billing & Payments Index (049663)](https://thesource.cvshealth.com/nuxeo/thesource/#!/view?docid=be58f9e6-2fde-4398-bce1-6f862189f89c)

**Parent Documents:**

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

[CALL-0011 Authenticating Callers](https://policy.corp.cvscaremark.com/pnp/faces/DocRenderer?documentId=CALL-0011)

[Top of the Document](#_top)

Not To be Reproduced or Disclosed to Others without Prior Written Approval

**ELECTRONIC DATA = OFFICIAL VERSION – PAPER COPY – INFORMATIONAL ONLY**