# Compass - “Adopt-A-Bene” United Mine Workers of America (UMWA) Support Task

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**Description:** Process for when assisting a UMWA beneficiary and recognizing they may have difficulties in placing or remembering to place mail order refills, either due to age or disability, and you verified the participant is not currently enrolled in the Auto Refill Program (ARP). The Adopt-A-Bene program provides a courtesy call when Mail Order prescriptions are ready for refill.

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| Program Details |

The UMWA has a unique program called **“Adopt-A-Bene”** (pronounce BEN-e; also referred to as Auto Refill program) which allows “select” beneficiaries the opportunity to receive an outbound courtesy call when their mail order prescription is ready for refill. **Beneficiaries are selected based on a clear demonstrated or expressed difficulty in placing or remembering to place mail order refills on their own**. If they do not have a caregiver or are not able to contact Customer Care or use our website to place mail order refills without assistance, then they **may** qualify for this manual process.

A Support Task has been created for the United Mine Workers of America (UMWA) who have a **demonstrated or expressed difficulty in placing or remembering to place their own refills due to age or physical disability.**

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| Research Team Responsibilities |

A dedicated research representative from Pgh Client Support will be making the outbound calls to approved enrolled UMWA beneficiaries.

Calls will be made Monday – Friday between the hours of 8am-5pm Central time in the beneficiary’s time zone.

* Two attempts will be made to call the beneficiary.
* The third attempt will be by letter, and if no response is received, the beneficiary will be removed from the program.
* The Research Team will try to combine all available refills into one call if possible.

**Note: All** attempts to contact the beneficiary will be noted in Compass.

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| Identifying a Beneficiary Who Is Enrolled in the “Adopt-A-Bene” Program |

If a beneficiary is already enrolled in the **“Adopt-A-Bene”** program, an alert will be available which reads:

**“Beneficiary enrolled in Auto Refill Program”**

If this alert is **NOT** present, then the beneficiary is **NOT** enrolled in Auto-Refill.

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| Requesting Enrollment in the “Adopt-A-Bene” Program |

When assisting a UMWA beneficiary and recognizing he/she she may have difficulties in placing or remembering to place mail order refills, either due to age or disability, and you verified the participant is not currently enrolled in the Auto Refill Program (ARP), the CCR will:

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| **Step** | **Action** | |
| **1** | When qualified beneficiaries are identified as being “potentially” eligible for this program, advise the beneficiary about the program and ask if they would be interested in you submitting a request for enrollment on their behalf.  **Note:** Remember this is only for **participants who have clearly shown or expressed physical difficulty due to age or handicap, which may prevent them from placing or remembering to place mail order refills on their own.** If they do not have a caregiver and are unable to contact Customer Care/web to place mail order refills without assistance, they may qualify for this manual program. | |
| **2** | **Ask:**  Based on our discussion today, you expressed that you have difficulties in placing or remembering to place, mail order refills on your own. **Adopt-A-Bene** is a program Caremark has initiated, in strong partnership with the UMWA, to provide you with a courtesy call, when one or more of your mail order prescriptions are ready for refill. Would you be interested in my submitting a request to enroll you in this free of charge program? | |
| **If…** | **Then…** |
| Yes | * Request the beneficiary be enrolled by submitting a Support Task. * From the Case Data section that appears at the top of all Compass screens, click the **Create Support Task** button and create the following Support Task. Refer to [Compass - Create a Support Task (050031)](https://thesource.cvshealth.com/nuxeo/thesource/#!/view?docid=64f18e5a-4d56-4175-ba8e-e7d094e501d6) as needed.   + **Task Type:** UMWA Auto Refill   + **Required:** Callback Phone Number   + **Notes Field:** Include any additional information * Once the Support Task is submitted, advise the beneficiary as follows:   Thank you for letting me submit this request for enrollment in the **“Adopt-A-Bene**.” A representative of the program will respond regarding this request within the next 72 hours. |
| No | * Send the same task indicating in the notes that the beneficiary declined enrollment in the program.   **AND**   * **Document the following in Compass:** : “Offered RAMP beneficiary declined.” |

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| Resolution Time |

3 business days

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| Related Documents |

**Abbreviations/Definitions:** [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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