# PeopleSafe - Auto Refill Program (ARP)

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**Description:** The Auto Refill program allows members to automatically receive prescription refills at the appropriate time, without having to manually place the order. Once a new prescription is received from the prescriber, a new order will be generated and automatically shipped out in time for refill. This is a benefit provided free of charge to all members of participating clients.

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| Reminders |

* Auto Refill will take effect immediately upon initial enrollment.
* Anyone who is fully authenticated and is authorized to order a refill for a member, can enroll or unenroll a member in ARP.
* To protect patient privacy, the caller must positively identify, without prompting, all medications they would like to be enrolled or unenrolled for the member by Rx name and/or Rx number. Refer to the [HIPAA Grid (028920)](https://thesource.cvshealth.com/nuxeo/thesource/#!/view?docid=5b354e50-0d15-42d0-b9c2-0711ea02d9ce) to determine who is authorized to request a refill on behalf of the member.

** MED D Beneficiaries:** If you have not been trained to handle MED D or EGWP calls, warm transfer **ALL** Med D call types to the appropriate Med D Care phone number located in the CIF. This includes basic refill and order status calls. This is due to new regulations regarding automatic refills and increased complexity handling MED D calls. Refer to [PeopleSafe - Basic Call Handling (016401)](https://thesource.cvshealth.com/nuxeo/thesource/#!/view?docid=8c31454d-f1e4-41af-b678-7017409e18f4).

* **MED D beneficiaries:** CMS may require express consent from the beneficiary for Auto Refill prescriptions that are generated as part of the Auto Refill, with the exception of most SSI EGWP plans. The beneficiary should not receive Auto Refill notifications if they are a Medicare D beneficiary who is eligible for Shipped Consent Hold. Refer to [MED D - Expressed Consent (Ship Consent) (083036)](https://thesource.cvshealth.com/nuxeo/thesource/#!/view?docid=3f0adae9-ad4d-4e9c-9707-301d785da1cf).
* Medicare B drugs are not eligible for enrollment in ARP.
* For information about Carrier to Carrier moves and their impact on ARP, refer to [Carrier to Carrier Moves & Enrollment](#_Carrier_to_Carrier) section.

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| Enrollment Criteria |

To enroll in Auto Refill, a member must have:

* A shipping address on file.
* Messaging Platform (MP) selected for Order Status alerts. If speaking with the member/POA ask for email address, if not on file.
* Secure Message Center alerts.

Not all mail service prescriptions are eligible for enrollment into the Automatic Refill Program. Medications ineligible for the program may include, but may not be limited to:

* Controlled substances
* Specialty drugs
* Prescriptions covered by certain government payers, including Medicare Part B
* Medications that have not shipped at least once from the Caremark mail pharmacy

**Note:** Though Secure Message Center alerts are required for Auto Refill enrollment, the member is not required to be enrolled on Caremark.com.

The state of California (CA) requires all pharmacies to maintain annual member consent for medications enrolled into automatic refill/renewal programs. Members will receive a communication informing them that their Rx has been disenrolled from ARP and Rx-level comments in PeopleSafe/Compass will display: “Rx disenrolled due to state regulations. Member must re-enroll to continue receiving automatic refills.“

* Refer to [Automatic Refill Program:  California Regulatory Changes to Medication Exclusions Job Aid (070485)](https://thesource.cvshealth.com/nuxeo/thesource/#!/view?docid=4346e7df-7d22-4e8f-8229-8f9421cadb34) for additional information as needed.

Perform the following steps to set up Auto Refill, which will take effect immediately upon initial enrollment:

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| **Step** | **Action** | |
| **1** | Access PeopleSafe and navigate to the Order Placement screen. | |
| **2** | Determine if client and member are eligible for the Auto Refill program. | |
| **If…** | **Then…** |
| Client is not part of the Auto Refill Program | **Auto Refill** check box is deactivated and the following hover message will be viewable:  **Program Not Available for Client**  Do not offer the Auto Refill program to the member. |
| Member has been unenrolled from the Auto Refill Program | **Auto Refill** check box is deactivated and the following hover message will be viewable:  **Participant Restricted**  Do not offer the Auto Refill program to the member. |
| Member does not currently have any prescriptions eligible for Auto Refill Program | **Auto Refill** check box is deactivated as well as a reason will be viewable when the mouse hovers over the deactivated check box.  **Messages vary.**  **Example: C-2 medication**  Advise member to check back in the future if new prescriptions are filled. |
| Member is eligible for the Auto Refill Program | None of the above scenarios are displayed.  Proceed to next step. |
| **3** | Verify that the member has met all requirements.  **Note:**  If none of the below messages are displayed (with the exception of No Default Payment Account Available), the member has met all of the requirements for enrollment in the program. | |
| **If the following error message is displayed…** | **Then…** |
| **No primary MOR address** | 1. Select the **Fix** button under the Shipping Address & Messaging Preferences section to navigate to the Contact Info screen. 2. Verify the member’s shipping address and follow the [Address, Email and Phone Number Changes (004566)](https://thesource.cvshealth.com/nuxeo/thesource/#!/view?docid=a09925d4-9dbb-407b-b579-c17eec6e62ee) standard procedure for adding the address to the profile. 3. Select **Back** to return to the ARP Summary screen. 4. In addition to Order Status updates, select **Send Notification** to Caremark.com Secure Message Center checkbox on the Messaging Platform (MP) Set Preferences screen.  * If this is not selected, the **ARP Summary** screen remains in a Read Only status and displays an error message.   **Disclaimers:**   * + - All the member’s prescriptions enrolled in the program must be shipped to one primary address. The shipping address is assigned at the member level, not the prescription level.   **Example:** If a member asks for one prescription to be shipped to their home address, but another to be shipped to their work address; this is not an available option for Auto Refill.   * + - * + The member needs to choose between having both prescriptions sent to either their home or work address, **OR** only enrolling one prescription in Auto Refill and manually ordering the other. * Prescriptions can be sent to a different family member’s primary address by selecting that member’s name in the Ship to drop-down box.   + - If the other family member’s primary address is changed, the prescriptions are sent to the new address for that family member.   **Note:** If the Mail Order default address is incorrect, only the member or POA can update the default address. Authorized party callers cannot add or change a permanent mail address. |
| **No default payment account** | * 1. Select the **Add** button under the Payment Account section.   2. Verify the payment type the member would like to use for future orders and follow the procedures for adding a [Payment Maintenance Add, Edit, and Remove (Credit Card and eCheck) (010987)](https://thesource.cvshealth.com/nuxeo/thesource/#!/view?docid=b0d1693e-3ebd-45e7-811a-adbe7e2c9f83) account to the profile.   3. Select **Close** to return to the ARP Summaryscreen.   4. Inform the member the selected payment account is automatically charged when future orders are received unless a different form of payment is provided. It will also be charged for any outstanding balance due.   **Note 1:** Members are not required to have a default payment account on file for Auto Refill. Ask for a default payment account during the enrollment process, but if the member says they do not want to use one (they do not have a copay, have used Fill and Bill in the past, etcetera.), continue with the enrollment process.  **Note 2:** Like any other orders that do not have a payment, Auto Refill orders may be held if there is a past due balance on account. This also applies if the amount due is over the client’s agreed upon threshold. If an order is held for payment and the Accounts Receivable department is unable to secure a payment or make other arrangements with the member, the order may be canceled. |
| **Member does not have Order Status and Secure Messaging enabled.** | 1. Select the **Fix** button under the Shipping Address & Messaging Preferences section to navigate to the Contact Info screen. 2. Verify the type of communication the member would like to receive for the Order Status option. Ask for email address (if not already on file). 3. Input the [message preferences (027674)](https://thesource.cvshealth.com/nuxeo/thesource/#!/view?docid=918203d3-2d76-4044-b2d9-0ced0504d471) on the profile. 4. Select **Update** button to save the message preferences to the profile then select **Back** to return to the ARP Summary screen. 5. In addition to Order Status updates, select the **Send Notification to Caremark.com Secure Message Center** checkbox on the Messaging Platform (MP) Set Preferences screen. If this is not selected, the **ARP Summary** screen remains in a Read Only status and displays an error message.   **Note:** The Order Status option for Messaging Platform (CMP) is directly tied to the Auto Refill Program (ARP). The member cannot opt-out of the order status notification if they have prescriptions enrolled in ARP. |

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| Promoting the Auto Refill Program to Members |

Ensure the plan participates and the medication being discussed are eligible before educating caller on ARP.

Offer/recommend Auto Refill only when:

* The opportunity is listed in the PeopleSafe View Opportunities screen, OR
* The member asks about automatically refilling their prescriptions
* The CCR is sending a new RX request
* Placing a refill

**Note:** Refer to the [HIPAA Grid (028920)](https://thesource.cvshealth.com/nuxeo/thesource/#!/view?docid=5b354e50-0d15-42d0-b9c2-0711ea02d9ce) to determine who is authorized make changes on behalf of the member.

Perform the following steps:

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| **Step** | **Action** | |
| **1** | Review the opportunities available to the member within the View Opportunities (HEE) screen. | |
| **If Auto Refill is…** | **Then…** |
| Listed | Present the opportunity using the HEE talk track when appropriate during the call and document the member’s response under the opportunity.   * If the member wants to take action by enrolling their prescriptions in the program, proceed to [Enrolling a Member’s Prescriptions in Auto Refill](#_Using_Fax_Workflow). For more information about using the View Opportunities talk tracks, refer to [Health Engagement Engine (HEE) - View Opportunities (022708)](https://thesource.cvshealth.com/nuxeo/thesource/#!/view?docid=c2732a43-0453-4dab-a245-537dbe97d1e0). |
| Not listed | Do not offer Auto Refill unless the member asks about automatically refilling their prescriptions at some point during the call, if sending a new RX request, or placing a refill.   * If the member does ask, proceed to next step. |
| **2** | Navigate to the **Order Placement** screen and determine if client and member are eligible for the Auto Refill Program: | |
| **If…** | **Then the screen will display…** |
| Client is not part of the Auto Refill Program | **Auto Refill** check box is deactivated, and the following hover message are viewable:  **Program Not Available for Client**  Do not offer the Auto Refill Program to the member. |
| Member has been unenrolled from the Auto Refill Program | **Auto Refill** check box is deactivated, and the following hover message are viewable:  **Participant Restricted**  Do not offer the Auto Refill Program to the member. |
| Member does not currently have any prescriptions eligible for Auto Refill | **Auto Refill check box** is deactivated, and a reason is viewable when the mouse hovers over the deactivated check box.  **Messages will vary.**  **Example: C-2 medication**  Advise member to check back in the future if new prescriptions are filled. |
| Member is eligible for the Auto Refill Program | None of the above messages will be displayed, then proceed to next step. |
| **3** | Ask the member if they would like to hear more about our Auto Refill Program. | |
| **If the member replies…** | **Then…** |
| No | Proceed as normal with the call. |
| Yes | Explain the benefits of the program.  We have an automatic refill program to help ensure you don’t run out of your medication. We’ll send you an email, call, or text 23 days before your refill is due. Once you receive that message, you have 16 days to cancel or make changes to your order before it is processed and shipped to you. The order will begin processing 7 days before you run out of medication. When your prescription expires or is out of refills, we will contact your doctor to get a renewal. If you change doctors, the notification may not reach your current doctor.  **Note:** The term “automatic renewal” is not well understood by members. Bundle automatic refill and renewal into a single description for the member. If the member agrees to enrollment, enroll the member in both Automatic Refill and Automatic Renewal. |
| **4** | Would you like me to enroll your eligible prescriptions in Automatic Refills? | |
| **If the member replies…** | **Then…** |
| No | Proceed as normal with the call. |
| Yes | * Ask the member to provide you with the Rx names they wish to enroll in the program.   + If they are unable to provide the Rx names and you have authenticated the member, release only those Rx names that qualify for ARP.   **Note:** Anyone who is fully authenticated and is authorized to order a refill for a member, can enroll or unenroll a member in Auto Refill.   * Proceed with [verifying member enrollment requirements](#_Fax_Workflow_Navigation), followed by [enrolling eligible prescriptions.](#Enrolling_prescriptions) |
| **Note:** If the Order Placement screen displays the message No Prescription Found, then the member does not currently have any prescriptions eligible for the Auto Refill Program. Advise member to check back in the future if new prescriptions are filled. | |

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| Enroll a Member’s Prescriptions in Auto Refill |

The Auto Refill Program is a benefit focusing primarily on maintenance medications. Certain medications such as controlled substances, specialty drugs, and others are excluded from enrolling in Auto Refill and therefore will not be eligible for Auto Refill.

To ensure continuous therapy for the plan member, the best opportunity to enroll a plan member’s prescription(s) into Auto Refill occurs during a prescription refill call. Enrolling a plan member’s prescriptions into Auto Refill can be performed:

When the member needs a refill and would also like to set up ARP, submit the prescription refill request first and then enroll the prescription in the Automatic Refill Program.



* If the prescriber does not respond to our direct Auto Refill fax, PeopleSafe has been updated to identify the new order by the GPI number. This should ensure member’s prescription remains on the Auto Refill Program.
* If the member is interested in Auto Refill and has an open bridge supply order, then they should wait until they receive their bridge supply order first. This would include if the bridge supply order is Future Filled for a later date. They can then enroll in the Auto Refill Program.
* Do not enroll in Auto Refill at the same time a bridge supply is requested; doing so will delay the order.
* Prescriptions that are from Prior PBMs or moved from other plans are not eligible for Auto Refill until they have been filled under the new plan.

**MED D beneficiaries:** CMS requires that we obtain express consent from the beneficiary for each Auto Refill order. The beneficiary should not receive Auto Refill notifications if they are a Medicare D beneficiary and eligible for Shipped Consent Hold. Refer to [MED D - Expressed Consent (Ship Consent) (083036)](https://thesource.cvshealth.com/nuxeo/thesource/#!/view?docid=3f0adae9-ad4d-4e9c-9707-301d785da1cf).

**Note:** Refer to the [HIPAA Grid (028920)](https://thesource.cvshealth.com/nuxeo/thesource/#!/view?docid=5b354e50-0d15-42d0-b9c2-0711ea02d9ce) to determine who is authorized make changes on behalf of the member.

Perform the steps below:

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| **Step** | **Action** | |
| **1** | Access the **Order Placement** screen and verify the Auto Refill status of the prescriptions listed on the screen by viewing the Auto Refill check box. | |
| **If…** | **Then…** |
| Prescription is currently enrolled in Auto Refill | Corresponding **Auto Refill** check box (s) is selected for the prescription. |
| Drug is not eligible for the Auto Refill Program | Corresponding **Auto Refill** check box is deactivated (grayed out).  Hover mouse over the check boxes to determine the reason the drug is not eligible.  **Note:** Medicare B drugs are not eligible for enrollment in Auto Refill. |
| Prescription is eligible for Auto Refill, but has not yet been signed up | The corresponding **Auto Refill** check box(s) is available for selection. |
| Prescription was enrolled in Auto Refill, but is now expired or out of refills | Sort the prescription list (by prescription name) for the prescription and its new Rx number.  The corresponding **Auto Refill** check box(s) is selected for the prescription. |
| **2** | Check the appropriate check boxes for the eligible prescriptions that the member would like to enroll in the Auto Refill Program.    **Note:** The Order Placement screen displays all the member’s prescriptions available to be filled through Mail Order, however only those that are eligible for Auto Refill can be selected. If a prescription is ineligible, Auto Refill check box will be deactivated.  If the medication is not showing on the main Order Placement screen, then enroll Rx by clicking on the **Ready Fill at Mail** tab.  **Reminder:** Enrolling a prescription in the Auto Refill program is not a guarantee that a new Rx will be obtained after the old one expires. It is the prescriber’s responsibility to respond to our attempts to refill the prescription. Not responding in a timely manner will result in a delayed order.  When a new prescription is received and is too soon to fill, it will be placed in the Order Placement screen. It will not be eligible for ARP until it has been filled once. The member will then be able to see it and enroll on caremark.com once it has been filled.  **Note:** An Auto fax (1st Fax) is sent to the prescriber requesting the same quantity as prescribed on the previously filled Rx within 24 hours of the initial request. If “No Response” within 24hrs; a second fax is sent to the prescriber. If “No Response” after two (2) business days has passed, the order will be placed into Future Fill or a Delayed Prescriber Queue and placed on hold for 30 calendar days from the day the first request was placed and a notification will be sent to the member depending on the [MP preferences (027674)](https://thesource.cvshealth.com/nuxeo/thesource/#!/view?docid=918203d3-2d76-4044-b2d9-0ced0504d471). The prescriber on record for the prescription is sent the request, so if the prescriber has changed, the request will not reach current prescriber.  Refer to [Change in Prescriber or Medication](#_Change_in_Prescriber). | |
| **3** | Click **Continue** button.  **Result:** ARP Summary screen displays. In the RXs selected for ARPsection at the top of the screen, the selected prescriptions and the selected program displays. | |
| **4** | Verify the shipping address shown on the screen.   * If changes need to be made, click the **Change** button under the Shipping Address & Message Preferencessection to make the appropriate changes. Refer to [Address, Email and Phone Number Changes (004566)](https://thesource.cvshealth.com/nuxeo/thesource/#!/view?docid=a09925d4-9dbb-407b-b579-c17eec6e62ee).   **Minor Child Note:** If enrolling a minor child’s prescriptions in Auto Refill, the orders must be sent to either the cardholder or spouse’s primary mail service address. A minor child cannot have Auto Refill prescriptions sent to a different address on the account that is not shared by either the cardholder or spouse.  **Example:** All of child’s orders must be sent to grandparent’s house due to custody reasons, and then Auto Refill should not be used for the minor child’s prescriptions. | |
| **5** | Confirm the default payment account shown on the screen by verifying the following information:   * Last four (4) digits and expiration date for credit cards. * Financial institution and account type for electronic checks.   + If changes need to be made, click **Change** button under the Payment Account section. Refer to [Payment Maintenance Add, Edit and Remove (Credit Card and eCheck) (010987)](https://thesource.cvshealth.com/nuxeo/thesource/#!/view?docid=b0d1693e-3ebd-45e7-811a-adbe7e2c9f83). | |
| **6** | Using the Rx’s selected for ARP section at the top of the screen; verify the Auto Refill selections are correct (check the details like dosage form, strength, quantity and day supply to avoid class 1 errors). | |
| **If…** | **Then…** |
| Yes | Continue to next step. |
| No | Click on the **Back** button. Return to [Step 3 of the Enrolling a Member’s Prescriptions in Auto Refill section](#Step5_Enrolling_Rx_RFAM) to resume ARP enrollment. |
| **7** | Select the **Save** button.  **Result:** The message enrollment changes confirmed displays, confirming the enrollment of the selected prescription(s) into the selected Auto Refill program.  **Note:** You can verify the Rx is set up for ARP correctly if you click on the **Ready Fill at Mail** tab in the order placement screen. | |
| **8** | 1. Inform the member their prescription(s) have been enrolled in the program and they will receive a notification (via the communication channel they selected) before the next order is sent, allowing them to cancel if the prescription(s) is no longer needed. 2. Advise the member that if the dosage or drug changes, they should notify us immediately either by using Caremark.com to unenroll that prescription from the program or by contacting Customer Care.   **MED D beneficiaries:** CMS requires that we obtain express consent from the beneficiary for each order. The beneficiary should not receive Auto Refill notifications if they are a Medicare D beneficiary and eligible for Shipped Consent Hold. Refer to [MED D - Expressed Consent (Ship Consent) (083036)](https://thesource.cvshealth.com/nuxeo/thesource/#!/view?docid=3f0adae9-ad4d-4e9c-9707-301d785da1cf). | |

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| Member Opts-Out or Unenrolls |

* If the member has selected Telephone Calls and or Text Messages as the preferred method for [Obtaining an Email Address and Managing Messaging Platform Alerts (027674)](https://thesource.cvshealth.com/nuxeo/thesource/#!/view?docid=918203d3-2d76-4044-b2d9-0ced0504d471), they will receive written notification 30 days in advance of the anticipated ship date (in addition to their standard MP Messaging). The letter will contain an Opt-Out Form.
* Refunds will be issued for late cancelations via the form if the form was received within the timeframe documented on the form if the request was not completed by offline support on-time.
*  Unenrolling prescriptions from the Auto-Refill/Renewal program will put any in process orders on indefinite hold, including orders in future fill status.
  +  When provider contact has been initiated and the provider approved the auto-renewal and the member requests to remove the Rx from ARP, it will remain scheduled until the future fill date, after which it will be placed on indefinite hold.

**Note:** Refer to the [HIPAA Grid (028920)](https://thesource.cvshealth.com/nuxeo/thesource/#!/view?docid=5b354e50-0d15-42d0-b9c2-0711ea02d9ce) to determine who is authorized make changes on behalf of the member.

Perform the steps below to unenroll a member from Rx Autofill:

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| **Step** | **Action** | | |
| **1** | Review the PeopleSafe Main screen for any OPEN ORDER with a prescription that the member would like to remove from the Auto Refill program. | | |
| **If you…** | **Then…** | |
| Locate an open order with a prescription the member wants to unenroll from ARP | Verify if the member would like the prescription to continue processing. | |
| **If…** | **Then…** |
| Yes | Educate the member the Rx(s) cannot be disenrolled from the Auto-Refill/Renewal program at this time, as unenrolling would automatically place the order on a hold. Once the order is received, the member may go to Caremark.com or call Customer Care to disenroll from the program. |
| No | * If member would like to stop the entire order, proceed to the [Canceling an AutoFill Order](#_3/8/18_Canceling_an) section below. * If member would like to stop just the prescription that was enrolled in the ARP proceed to Step 2.   **Note:** If the order is in dispensing send a stop tote to request the individual prescription be placed on hold after following the unenrollment process outline in this section. Refer to [PeopleSafe - How to Send a Pharmacy Stop Tote Request (017745)](https://thesource.cvshealth.com/nuxeo/thesource/#!/view?docid=1232023a-60c7-4441-9013-17ecbd554451) as needed. |
| Do NOT locate any open orders with an Rx the member wants to unenroll from Rx AutoFill | Proceed to Step 2. | |
| **2** | Access the **Order Placement** screen and remove the check mark from the checkbox next to the prescription(s) that the member would like to remove from the Auto Refill program.    **Note:** You can also select the **Ready Fill at Mail** button at the bottom of the screen to verify the prescription(s) currently enrolled. | | |
| **3** | Select the **Continue** button.  **Result:** Removes the prescription(s) from Auto Refill Program. The ARP Summary screen will display.   * In the Rx’s selected ARP section, the Enrollment Change status of UNENROLL displays under the appropriate ARP program. * Once all information has been verified select **Save** at the bottom left corner to complete the unenrollment process and save the changes.     **Notes:**   * When unenrolling a prescription from ARP in conjunction with placing a refill order, CCR will be navigated to the Order Placement – Refill Summary screen to complete the plan member’s prescription refill order. * If caller wants the order to continue notate the following in Order level Comments: “Removed (Rx name) from ARP. (Caller Name) requested to have order continue processing and ship.” | | |

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| Canceling an AutoFill Order |

Members are given the opportunity to cancel an ARP order within sixteen (16) days of receiving the Messaging Platform (CMP) notification that a refill is ready for processing. During this time, members can cancel the order via the secure member website at Caremark.com or by calling Customer Care. Messaging Platform (CMP) notifications will forward the call to Customer Care if the member selects the option to cancel the order.

**** Canceling an ARP order will remove the prescription from the Auto Refill Program. The member will need to contact us if they want to fill the prescription in the future.

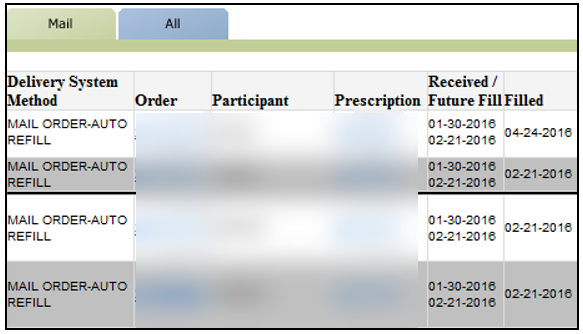
Perform the following steps:

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| **Step** | **Action** | |
| **1** | Follow the standard procedure for canceling the order. Refer to the Cancel an Order section of [Cancel Order or Prescription Refill or New Prescription (004761)](https://thesource.cvshealth.com/nuxeo/thesource/#!/view?docid=c67b914f-1f29-4331-9bf1-d79214260f5f).  **Note:** CANCEL the entire order. Do NOT place the prescription on indefinite hold. If the caller does not want to cancel the entire order, refer to the [Member Opt-Out or Unenrolling](#_3/8/18_Member_Opts-Out) section above. | |
| **2** | Advise the member that the prescription will be removed from the Auto Refill Program. If the prescription is needed in the future, the plan member will need to manually initiate the request, either by placing an order through the IVR, the secure member website at Caremark.com, or by calling Customer Care.  **Note:** The prescription can then be re-enrolled in the Auto Refill Program at that time. | |
| **If…** | **Then…** |
| The prescription was in the Auto Refill Program and the prescriber did not respond to the fax refill request | 1. Advise the member to notify their prescriber that they no longer need the prescription and should not respond to the fax request. 2. Enter a [Stop See comment (007009)](https://thesource.cvshealth.com/nuxeo/thesource/#!/view?docid=6a481d2d-cc6d-40f0-af30-1858db02b7a4) to ensure that if the prescriber does respond later, the prescription will not be filled. |

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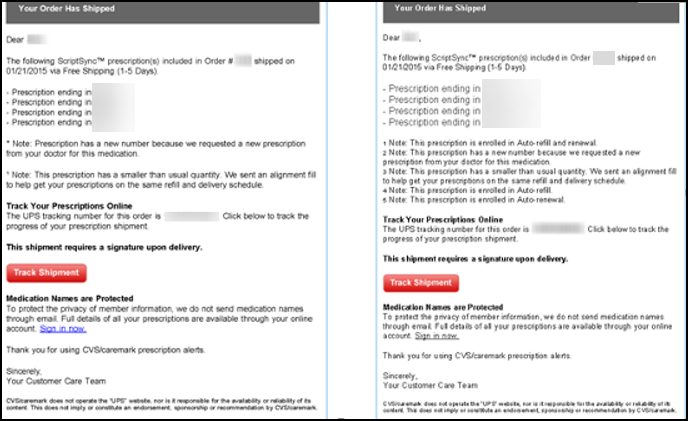
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| Auto Refill Order Status |

When an order for an Auto Refill prescription is generated in the system, it displays on the Main screen in PeopleSafe and can be easily identified by the Delivery System Method MAIL ORDER-AUTO REFILL.



When a member is enrolled in Auto Refill, we attempt to notify the member prior to filling an automatic refill. Members choose to receive notifications by email, phone call or text message via the Messaging Platform (CMP). After the notification goes out, we wait a set number of days (16) prior to processing the order. This time frame ensures members who no longer want the prescription to be filled are able to cancel the order.

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| **Question** | **Answer** |
| **How do I know when an order will be created?** | Automatic comments are added to the View Comments screen at the prescription level following enrollment into Auto Refill. These comments provide the date in which Auto Refill creates the order. They also indicate how the Rx was enrolled or unenrolled, either through Customer Care (displays the CCR name) or Caremark.com (displays portal). |
| **How will the member know when an order will be created?** | When enrolled on the Auto Refill Program, the member receives their preferred Messaging Platform (MP) alert notifying them that an order has been created. They can then track the order progress via the Caremark.com Order Status screen. |
| **Could the auto refill date change from what was originally shown in the prescription level comment or the member’s Rx label?** | Yes, the date could change. The Auto Refill scheduler performs a 365 day look back of all mail pharmacy fill activity for that medication. If the system determines the member has an over or under supply of medications the next auto refill order will be rescheduled accordingly. When this occurs, an automatic comment is added at the prescription level indicating the new auto refill date.  **Note:** Orders moved due to an under supply of medication should be rare.  **Note:** Run a Test Claim to see what the refill dates will be. |
| **How will the member know when an order has been shipped?** | When enrolled in the Auto Refill Program, the member receives their preferred Messaging Platform (MP) alert notifying them that the order has been shipped. They can then track the order progress via the Caremark.com Order Status screen. The messaging identifies if prescriptions in the order are currently enrolled on the Auto Refill Program. |
| **Duplicate Prescriptions** | * If a medication is already enrolled in Auto Refill, the ARP enrollment checkbox for the duplicate prescription will be disabled. When you hover over the disabled enrollment checkbox, hover text will say Duplicate Prescription. * If you try to enroll multiple prescriptions for the same medication (GPI-14) in ARP at the same time, you will receive a pop-up message and be unable to enroll the duplicate prescriptions. * You must unenroll previous RX number from ARP if MD has responded with a new prescription. |



**Auto Refill Order Shipped alerts**

If a member inquiries about the status of an order, perform the following steps:

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| **Step** | **Action** | | | | | | |
| **1** | Verify that the Rx is enrolled in the Auto Refill Program. | | | | | | |
| **2** | Review the PeopleSafe Main screen to determine if an order for the Rx has been generated. | | | | | | |
| **If the order is…** | **Then…** | | | | | |
| Located | Advise the member that the order will be processed on the Future Fill date shown.  **Member Needs Medication Prior than Date Set to Receive:**   * If the member needs a medication sooner than the set date, an override is not always necessary. The date for the Auto Refill order may not coincide with plan's utilization rate. * If in doubt run a Test Claim, if it pays than release the order by accessing the **Manage Diverts** screen, selecting an appropriate drop-down option, and pressing the **Resolve Diverts** button. Refer to [Manage / Resolve Diverts - Immediate Release of Orders](file://C:\Users\C089180\AppData\Local\Microsoft\AppData\Local\Microsoft\Windows\INetCache\Content.Outlook\AppData\Local\Microsoft\windows\AppData\Local\Microsoft\Windows\AppData\Local\Microsoft\Windows\INetCache\Content.Outlook\AppData\Local\Microsoft\Windows\AppData\Local\AppData\Local\Microsoft\Windows\INetCache\AppData\AppData\Local\Microsoft\Windows\INetCache\AppData\Local\Microsoft\Windows\INetCache\AppData\Local\Microsoft\Windows\INetCache\AppData\AppData\Local\Microsoft\Windows\Temporary%20Internet%20Files\AppData\AppData\Local\Microsoft\Windows\Temporary%20Internet%20Files\AppData\Local\Microsoft\Windows\INetCache\AppData\Local\Microsoft\Windows\Temporary%20Internet%20Files\Downloads\CMS-PRD1-117593) for proper procedures to release Auto Refill orders. | | | | | |
| **If…** | | | **Then…** | | |
| Member needs the order sooner due to travel, etcetera. | | | Review the CIF to determine if an early refill override is possible. | | |
| Order was created late, or appears to be stuck in Future Fill | | | Send an RM task to Order Status Expedite Order in Process. | | |
| Not found | Refill date may not have been reached. Run a Test Claim to see what the refill date is. Check for comments at the prescription level to determine when the order will be created: | | | | | |
| **Step** | **Action** | | | | |
| **1** | Click on the prescription number on the PeopleSafe Main screen then click **View Comments** button. | | | | |
| **2** | Choose the prescription number from the Type drop down then click the **Search** button and review the Comments for scheduling information.  **Example 1:** Displays that the prescription was enrolled by the member on the portal (Caremark.com), and the auto refill order creates on that date, Messaging Platform (MP) notifies the member that the prescription is about to be refilled. Sixteen days later the order begins processing in the pharmacy.    **Example 2:**  Displays the Auto Refill was rescheduled for a later date due to accumulation of medication from prior fills. | | | | |
| **If the Refill Date has…** | **Then…** | | | |
| Not been reached | Inform the member that their prescription is not due for refill at this time, and that the system will automatically create their order when it is due. | | | |
| Been reached, but the order was never created | Inform the member that you will place an order for the prescription right away then determine how much medication the member has on hand. | | | |
| **If the member has…** | | **Then…** |
| At least seven (7) day supply | | Place the order via the refill screen. |
| Less than seven (7) day supply | | * Place the order via the refill screen. * Provide [Bridge Supply Short Term Prescription (Rx) Refills (017906)](https://thesource.cvshealth.com/nuxeo/thesource/#!/view?docid=0d316a1d-f02d-4849-9b36-eb56a6ce9b57) to ensure the member does not run out of medication. |

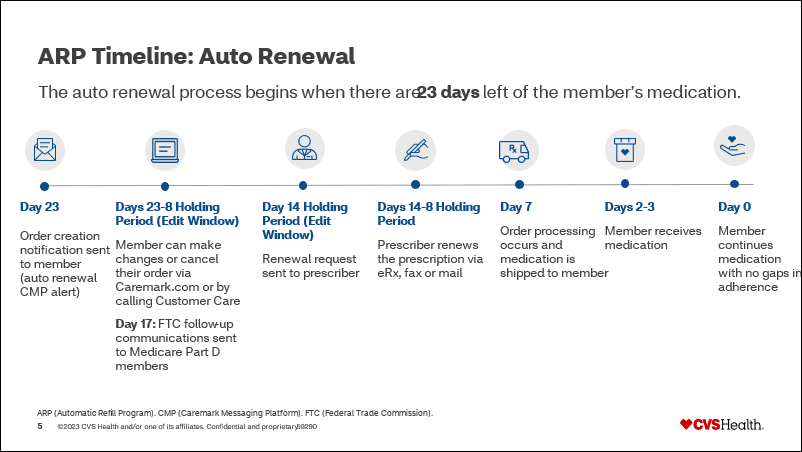
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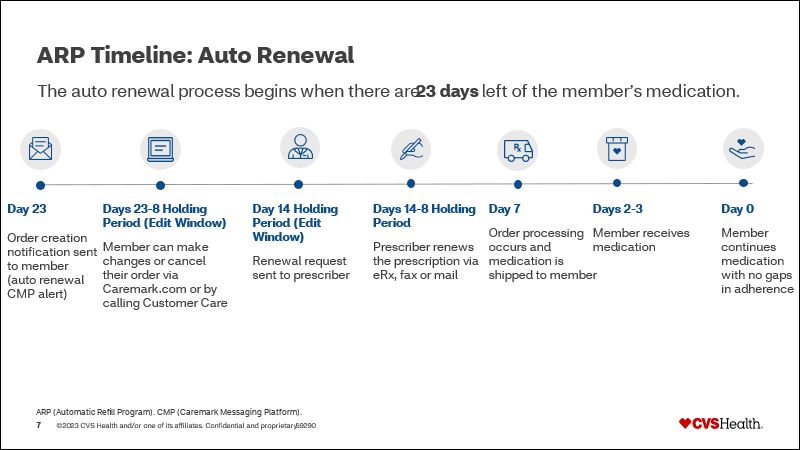
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| AutoFill Timeline and Messaging Platform (MP) Notifications |

* When an ARP order is generated, it is placed into Future Fill and the MP notification is sent to the member.
* Auto refill orders use the accumulation date to determine when the next automatic refill order should begin. Run a Test Claim to see what that date will be.
* All Auto Refill orders will start 23 days prior to anticipated date the member is scheduled to run out of medication (calculated by the mail pharmacy’s software application).

Refer to the timeline description table below:

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| --- | --- |
| **Days Prior to Running Out of Medication** | **Description** |
| 23 | Order is created and notification is sent to the member via their selected deliver method for ARP notifications (email, call, or text).  **Note:** Members should be encouraged to select **Email** as the preferred method of contact for these notifications if they do not wish to also receive written communications via mail notifying them of their Auto Refill notifications. Ask for email address (if not already on file). |
| 8-23 | Member can make changes or cancel their order via Caremark.com or by calling Customer Care.   * Prescribers are contacted 6 days before the order is released from the FTC holding period. |
| 7 | Order processing occurs and medication is shipped to member. |
| 2-3 | Member receives the medication(s). |





**How do I know when an order will be created?**

Automatic comments are added to the View Comments screen at the prescription level following enrollment into Auto Refill. These comments provide the date in which ARP will create the order. They also indicate how the Rx was enrolled or unenrolled, either through Customer Care (displays the CCR name) or the secure member website at Caremark.com (displays portal).

**Note:**  This date can differ from the plan coverage date. Run a test claim to be sure.

**How will the member know when an order will be created?**

Prescriptions that are enrolled in ARP will include dates on the Rx label that are relevant to ARP instead of the next refill date.

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| Returned Goods |

If a member returns two Auto Refill prescriptions within a rolling one-year time period without a valid reason (i.e., error made by CVS Caremark), the member will be restricted from using the program in the future.

* The member will receive a letter stating that they have been removed from the program and will need to manually request their prescription refills in the future.
* The Auto Refill screen in PeopleSafe displays the message PARTICIPANT RESTRICTED, and all checkboxes for eligible prescriptions will be disabled, preventing them from being enrolled in the program.

**Note:** As a general rule, no credits will be issued for returned orders.

If a call becomes escalated because a member has been restricted from the program and wants to discuss re-enrollment in the program, perform the following steps:

|  |  |
| --- | --- |
| **Step** | **Action** |
| **1** | Create a task in Resolution Manager as follows:   * Task Category: **Order Placement** * Task Type: **Refill Request – Manual** * Queue: **Order Placement – Participant Services** |
| **2** | Review to ensure that the task contains the following:   * Message “Forward request to PS Supervisor” * Reference the program and the reason for requesting removal of the restriction * Reason the medication was returned by the member |
| **3** | Advise member that you have forwarded their concern for review. If needed, a Supervisor will call them back to discuss. |

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| Educating the Member About the Auto Refill Program (ARP) |

Ensure the plan participates and the medication being discussed are eligible before educating caller on ARP.

Offer/recommend ARP only when:

* The opportunity is listed in the PeopleSafe View Opportunities screen, OR
* The member asks about automatically refilling their prescriptions
* The CCR is sending a new RX request
* Placing a refill

**Note:** Refer to the [HIPAA Grid (028920)](https://thesource.cvshealth.com/nuxeo/thesource/#!/view?docid=5b354e50-0d15-42d0-b9c2-0711ea02d9ce) to determine who is authorized to make changes on behalf of the member.

Perform the following steps:

|  |  |  |
| --- | --- | --- |
| **Step** | **Action** | |
| **1** | Review the opportunities available to the member within the **View Opportunities** (HEE) screen. | |
| **If** **Auto Refill is…** | **Then…** |
| Listed | Present the opportunity using the HEE talk track when appropriate during the call then document the member’s response under the opportunity.   * If the member wants to take action by enrolling their prescriptions in the program, proceed to [Enrolling a Member’s Prescriptions in Rx AutoFill](#_Using_Fax_Workflow). |
| Not listed | Do not offer ARP unless the member asks about automatically refilling their prescriptions at some point during the call, sending a new RX request, or placing a refill.   * If the member does ask, proceed to Step 2. |
| **2** | Navigate to the **Order Placement** screen. | |
| **3** | Determine if client and member are eligible for the ARP program: | |
| **If…** | **Then the screen will display…** |
| Client is not part of the ARP program | **Auto Refill** checkbox will be deactivated and the following hover message will be viewable:  **Program Not Available for Client**  Do not offer the ARP program to the member. |
| Member has been unenrolled from the ARP program | **Auto Refill** checkbox will be deactivated and the following hover message will be viewable:  **Participant Restricted**  Do not offer the ARP program to the member. |
| Member does not currently have any prescriptions eligible for Rx AutoFill | **Auto Refill** checkboxwill be deactivated and a reason will be viewable when the CCR hovers their mouse over the deactivated checkbox.  **Messages will vary.**  Advise member to check back in the future if new prescriptions are filled.  **Note:**   * Medicare B drugs are not eligible for enrollment in Rx AutoFill. * Members cannot have multiple prescriptions for the same medication (GPI-14) enrolled in the Auto Refill program. If a medication is already enrolled in Rx AutoFill, the Auto Refill enrollment checkbox for the duplicate prescription will be disabled. When you hover over the disabled enrollment checkbox, hover text will say “Duplicate Prescription”. |
| Member is eligible for the ARP program | None of the above messages will be displayed.  Proceed to next step. |
| **4** | Ask the member if they would like to hear more about our Auto Refill Program. | |
| **If the member replies…** | **Then…** |
| No | Proceed as normal with the call. |
| Yes | Explain the benefits of the program. Suggested verbiage:  We have an automatic refill program to help ensure you don’t run out of your medication. We’ll send you an email, call, or text 23 days before your refill is due. Once you receive that message, you have 16 days to cancel or make changes to your order before it is processed and shipped to you. When your prescription expires or is out of refills, we will contact your doctor to get a renewal.  **Note:** The term “Automatic Renewal” is not well understood by members. Bundle automatic refill and renewal into a single description for the member. If the member agrees to enrollment, enroll the member in both Automatic Refill and Automatic Renewal. |
| **5** | Ask the member:  Would you like me to enroll your eligible prescriptions in Automatic Refills? | |
| **If the member replies…** | **Then…** |
| No | Proceed as normal with the call. |
| Yes | 1. Ask the member to provide you with the Rx names they wish to enroll in the program. If they are unable to provide the Rx names and you have authenticated the member, you may release only those Rx names that qualify for Rx AutoFill. 2. Proceed with [verifying member enrollment requirements](#_Enrollment_Criteria), followed by [enrolling eligible prescriptions.](#_Enroll_a_Member’s)   **Note:** Anyone who is fully authenticated and is authorized to order a refill for a member, can enroll or unenroll a member in Rx AutoFill.   * In order to protect patient privacy, the caller must positively identify, without prompting, all medications by Rx name and/or Rx number that they would like to be enrolled or unenrolled for the member. |
| **Note:** If the **Order Placement** screen displays the message **No Prescription Found**, then the member does not currently have any prescriptions eligible for the ARP program. Advise member to check back in the future if new prescriptions are filled. | |

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| Change in Prescriber or Medication |

If a member indicates that they have a new prescriber or their medication has changed (new drug, strength, dosage, etcetera.) for a prescription currently enrolled in Auto Refill, perform the following steps:

|  |  |
| --- | --- |
| **Step** | **Action** |
| **1** | Unenroll the prescription in question from the Auto Refill Program. Refer to [Cancelling a Member’s Prescriptions from Auto Refill Program](#_Voiding_the_Prescription(s)). |
| **2** | Offer the FastStart program to obtain a new prescription. Refer to [Obtaining a New Prescription (Rx) for the Member (058827)](https://thesource.cvshealth.com/nuxeo/thesource/#!/view?docid=a1443f4f-499e-442c-be11-fd2b207bf86c). |
| **3** | Educate the member on the opportunity if the **Auto Refill** checkbox is present and available.    We have an automatic refill program to help ensure you don’t run out of your medication. We’ll send you an email, call, or text 23 days before your refill is due. Once you receive that message you have 16 days to cancel or make changes to your order before it is processed 7 days before running out of medication and shipped to you. When your prescription expires or runs out of refills; we will contact your doctor to get a renewal.  **Note:** The terms “Automatic Renewals” is not well understood by members. Bundle automatic refill and renewal into a single description for the member. If the member agrees to enrollment, enroll the member in both Automatic Refill and Automatic Renewal.”  Refer to [Auto Refill Program (ARP) Including Questions and Answers (086374)](https://thesource.cvshealth.com/nuxeo/thesource/#!/view?docid=dbbd827c-6422-4d74-9564-18d510c03aee) for answers to general program questions and FAQ’s.  **Note:** Anyone who is fully authenticated and is authorized to order a refill for a member, can enroll or unenroll a member in Auto Refill.   * In order to protect patient privacy, the caller must positively identify, without prompting, all medications by Rx name and/or Rx number that they would like to be enrolled or unenrolled for the member. * **Minor Child’s Prescriptions**: If enrolling a minor child’s prescriptions in Auto Refill, the orders must be sent to either the cardholder or spouse’s primary mail service address. A minor child cannot have Auto Refill prescriptions sent to a different address on the account that is not shared by either the cardholder or spouse. If this is not an option (**Example:** All of child’s orders must be sent to grandparent’s house due to custody reasons), then Auto Refill should not be used for the minor child’s prescriptions.   Ask the member to check the invoice when they receive their medication to confirm the prescription was enrolled into the program.   * If the confirmation is not present, instruct the member to contact us. |

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| Reporting Auto Refill Issues |

The Auto Refill Issue Reporting Tool has been retired. If the member wishes to file a formal complaint about Auto Refill, follow the standard process documented in [Handling Member Complaints, Suggestions or Compliments (026703)](https://thesource.cvshealth.com/nuxeo/thesource/#!/view?docid=03e1a9ae-7ffa-4472-8204-64920f27615c).

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| Carrier to Carrier Moves & Auto Refill Enrollment |

**Internal Information:**

From year to year some clients make benefit changes that require we transition their members from one carrier code to another.

As an internal process for **Auto Refill,** our systems do require that we re-enroll our members for auto refills under their new account. We have a team that handles this although we can only re-enroll them on a prescription by prescription basis after a prescription has been filled for the first time on the new account.

Because of this, prescriptions that have not yet been filled but are signed up for auto refill or will not appear to be signed up online for members or in PeopleSafe for Care Representatives on the new account. Once the prescription is filled on the new account, the member will be re-enrolled in Auto Refill for the filled prescriptions within 30 days of the prescription fill and then all Auto Refill info for the prescription will be visible to members online and for representatives in PeopleSafe.

**Note:** During this time, representatives are able to pull up the members account under the prior carrier in PeopleSafe if there is a need to validate the prescriptions enrolled in ARP.

**Advising Our Members:**

Please apologize to members for any inconvenience this may cause. Due to new benefit updates in our systems, prescriptions may not appear to be enrolled in Auto Refill online for a time period during a new year until they are filled.

Assure the member that Auto Refill will continue for any prescriptions that have previously been enrolled and that they will eventually be able to see the Auto Refill enrollment status of their prescriptions online within 30 days after the first fill of each prescription.

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| Questions & Answers |

Enrollment questions and answers follow:

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| **Number** | **Question/Statement** | **Answer** |
| **Q1:** | **Are there additional costs for enrolling in the Auto Refill Program (ARP)?** | No. The program is offered free of charge. |
| **Q2:** | **How do I enroll in the ARP program?** | I can enroll your prescriptions right now over the phone. Or if you prefer, you can enroll them online on the secure member website at Caremark.com at your convenience. |
| **Q3:** | **Can all my medications be included in the Auto Refill Program?** | The automatic refill option is available for common maintenance medications, such as those that are taken for chronic conditions or for long-term therapy. Certain medications, such as controlled substances, specialty drugs, and others are not included in the auto refill program. |
| **Q4:** | **I tried to enroll my prescriptions in the Auto Refill program online, but the website said I was restricted from the program.** | I apologize for the inconvenience; however, the goal of the Auto Refill Program is to ensure that you receive your medications automatically when you need them. Since you have returned prescriptions to us that were sent out as part of the Auto Refill Program, this indicates that the automated program isn’t a good fit for you. For future orders, you will need to manually request the refills to ensure that you only receive your prescriptions when you need them. |
| **Q5:** | **When signing up for the Auto Refill Program (ARP) for a spouse, would the spouse need to give the approval to us before doing so, not just asking the procedural verification question of the caller “Are they aware you are calling on their behalf?”** | Refer to the [HIPAA Grid (028920)](https://thesource.cvshealth.com/nuxeo/thesource/#!/view?docid=5b354e50-0d15-42d0-b9c2-0711ea02d9ce) to determine who is authorized to make changes behalf of the member. |
| **Q6:** | **I have a new member that participated in an automatic refill program at another pharmacy benefit manager (PBM). Will drug level automatic refill/ renewal program enrollments be transferred to Caremark?** | No, it is not possible to transfer the enrollment of a prescription from an automatic refill/ renewal program at another PBM to Caremark’s Automatic Refill Program. Members coming from another PBM will have to re-enroll prescription(s) in the program after their first order or each medication ships from the Caremark mail pharmacy. |

General program questions and answers follow:

|  |  |  |
| --- | --- | --- |
| Number | Question/Statement | Answer |
| Q7: | Will you contact me when it is time to refill my prescription? | Yes. You can select the type of communication that you would receive when your medication is due for refill. Options include an email, text message or phone call (automated voice message). Keep in mind that you will only receive notifications for medications that you have chosen to include in the program. |
| **Q8:** | **After I receive my refill message, how long will it take for the order to arrive?** | You can expect to receive your prescription within four weeks of being notified. Keep in mind that prescription refills require authorization from the prescriber. Refill processing times may vary depending on your prescriber’s response times. |
| **Q9:** | **What should I do if I need to cancel a refill request?** | You will receive a notification via your preferred method of communication sixteen (16) days prior to an order being started in the system. During this time, you will have the opportunity to cancel the order by logging on to the secure member website at Caremark.com or by contacting Customer Care. Keep in mind that if you cancel an order, the prescription will no longer be enrolled in the Auto Refill Program.  If you need to order the prescription again in the future, you will need to manually place an order using the IVR, Portal, or by calling Customer Care. At that time, the prescription can be re-enrolled in the Auto Refill Program if desired. |
| **Q10:** | **What if my prescriber responds to the fax or call after I’ve already had a new prescription written out? Should I still mail you the new prescription?** | No. If we have successfully obtained authorization from your prescriber to refill the prescription, you will not need to mail in the new prescription. If you have already mailed in the new prescription, our system will recognize that there is a duplicate order for the medication, and it will be returned to you. |
| **Q11:** | **What should I do if my prescription doesn’t arrive as indicated?** | You can log on to the secure member website at Caremark.com and proceed to the Order Medications page. Then click on **Order Medications Online** and **Refill Mail Service Prescriptions** or you can call the toll-free Customer Care number on the back of your prescription benefit ID card. |
| **Q12:** | **My prescriber changed my medication, how do I remove the previous medication from the program and replace it with the new prescription?** | You can log on to the secure member website at Caremark.com and proceed to the Order Medications page. Then click on **Order Medications Online** and **Refill Mail Service Prescriptions**. You can click on the box for your previous prescription to deselect it from the refill program. After deselecting the box, click **Continue** and proceed to the confirmation screen or you can call the toll-free Customer Care number on the back of your prescription benefit ID card.  To enroll the new medication, proceed to the Refill Mail Service Prescriptions page on the secure member website at Caremark.com and select the prescriptions you want to enroll, or you can call the toll-free Customer Care number on the back of your prescription benefit ID card. |
| **Q13:** | **Is a provider required to respond to a renewal request using the CVS Caremark form or e-prescription communication to maintain ARP enrollment?** | No, the prescriber is not required to respond using the CVS Caremark renewal form or renewal e-prescription outreach. LINKS reviews all incoming prescription based on 11 unique criteria shown below. This allows the mail pharmacy to capture renewal requests regardless of if the form or initial e-prescription renewal outreach message is used:   1. Same Patient (BNF\_ID) 2. Fill days within the look back days 3. Not deleted Prescriptions 4. Active Prescriptions (with discontinue date > current date) 5. Dispense Quantity 6. Units Per Dose 7. Doses Per Day 8. Days Quantity 9. Non-Compounds 10. Same GPI 11. Same Brand/Generic Indicator   If the new prescription and old prescription match on all criteria above, then ARP enrollment will be transferred from the old prescription to the new prescription and the old prescription will be discontinued. If the new prescription does not match all 11 criteria above it will be treated as a new prescription and not enrolled into the Automatic Refill Program. |
| **Q14:** | **Could the auto refill date change?** | Auto Refill date could change depending on quantity vs time of the drug. This is also specific to certain CIF. Run test claim to determine next fill date. |

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| Related Documents |

* [Auto Refill Program Including Questions and Answers (086374)](https://thesource.cvshealth.com/nuxeo/thesource/#!/view?docid=dbbd827c-6422-4d74-9564-18d510c03aee)
* [Universal Care – Caller Authentication (004568)](https://thesource.cvshealth.com/nuxeo/thesource/#!/view?docid=bcb8da72-5501-4631-b9fd-fe675bc4a1fd)
* [Universal Care - Consultative Call Flow (CCF) Process (095822)](https://thesource.cvshealth.com/nuxeo/thesource/#!/view?docid=c954b131-7884-494c-b4bb-dfc12fdc846f)
* [Log Activity/Capture Activity Codes (005164)](https://thesource.cvshealth.com/nuxeo/thesource/" \l "!/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)

**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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