**NEJE Reinstatement Review for Misdirected Checks Process**

**Description:** Process for NEJE Reinstatement Review for misdirected checks.

Premium Billing conducts a review on the third business day of each month following disenrollments to identify whether check payments have been posted to the accounts of disenrolled members. If a member’s check was inadvertently sent to the St. Louis processing center, resulting in delayed receipt due to mail forwarding from St. Louis to Boston, Premium Billing will take this into account during their review. Members affected by such delays will be considered for reinstatement once payment is received and accurately applied to their account.

Should this be the case, enrollment will be reinstated through the plan error process.

If a member contacts CARE regarding disenrollment prior to the third business day review—and their check had been timely mailed to St. Louis—reach out to the Senior Team to have an email sent to [PBMMedDBilling@cvshealth.com](mailto:PBMMedDBilling@cvshealth.com). The Premium Billing team will assess the reinstatement request and provide a response accordingly.

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