# Compass MED D - Blue MedicareRx (NEJE) - Premium Billing Missing Check Payment Research

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**Description:** Provides the MED D Customer Care Representative (CCR) with details necessary to assist the **Blue MedicareRx (NEJE)** MED D beneficiary with searching for a cashed check, money order, cashier’s check, or bill pay check (payment sent directly from the beneficiary’s bank) payment submitted for their Premium Billing account to our lockbox payment processing center.

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| Process |

Complete the steps below:

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| **Step** | **Action** | |
| **1** | Verify the call is regarding a check submitted for a premium billing account. | |
| **2** | Search all accounts in the beneficiary’s name to see if the check, money order, cashier’s check, or bill pay payment has posted (this includes closed accounts). | |
| **3** | Search the beneficiary’s Mail Order account for the check by clicking the **Current Balance** hyperlink in the **Quick Actions** panel of the **Claims Landing Page**.    **Result:** The Mail Order Payment History screen displays.   * **If check was located in the Mail Order Account**,then open a Support Task for Payment Transfer.Send the following Support Task:   **Task Type:** Premium Billing Inquiry Medicare D  **Complete all required and applicable fields**  **Reason For Dispute:** Check Payment Research  Complete **Check Number** field  Complete **Member Phone** field  **Task Notes:** Document the following:   * + Payment needs to be <Moved **OR** Split between multiple accounts>. * Payment ID of accounts where the payment applies. * Payment ID of accounts the funds should be applied to. * Amount applied to each account.   Provide the **Target Completion Turn Around Time** listed in the task.  **Important:**   * Only send **ONE** Support task for this matter. * Do **NOT** sendone Support Task under each account.   Important IconA Task or Route that simply says “Please Research” is **UNACCEPTABLE**.   * **If the check was NOT located in the Mail Order account,** proceed to **Step 4**. | |
| **4** | Read the **Medicare D Alerts** in the **Medicare D Landing Page** (**Medicare D Alerts** panel) to verify if any rejected checks have been returned to the beneficiary.  **Note:** The letter for the returned item will be in ONEclick.   * **If the check was returned to the beneficiary**, explain to the beneficiary that the check was not accepted due to the reason stated in the **Details** column notation, and the check was returned to them in the mail. Document the account and close the call. * **If the check was NOT returned to the beneficiary**, proceed to **Step 5**. | |
| **5** | Ask the beneficiary for the following information:   * Was the payment mailed to the plan by the beneficiary, or did the beneficiary make the payment through their bank’s bill pay? * Has the check been cashed and can they provide the check number, check amount, and date the check cleared their bank?   **CCR Process Note:** **If the beneficiary cannot provide a check number, check amount, and date the check was cashed, a Support Task cannot be submitted**. The member will need to call back with all this information. Please note, if the member is near the end of the grace period of dunning, ask to secure a one-time payment over the phone so the member avoids disenrollment. | |
| **If the check has…** | **Then…** |
| Been cashed **and** the beneficiary has check details | A task should be opened to research missing payment and must include check number, check amount, and date cashed. The Support Task must also include the method of the payment (Check, Money Order, or Bank BillPay (payment through the member’s bank).  Send the following Support Task:  **Task Type:** Premium Billing Inquiry Medicare D  **Reason for Dispute:** Check Payment Research  **Task Notes:** Document the following:   * Beneficiary made a (check, Money Order, OR Bank Bill) payment that is not posted to their account. * Beneficiary’s contact number.   Complete the task fields as applicable:  **Amount Disputed** **-** Required  **Reason for Dispute -** Required  **Payment Not Applied?** **-** If **Yes**, complete check detail fields below:   * **Check Number -** Required * **Check Amount -** Required * **Check Date** (the date the check was written) **-** Required * **Date Check Cleared Bank** **-** Required   Important IconA Task that simply says “Please Research” is **UNACCEPTABLE**.  Provide the **Target Completion Turn Around Time** listed in the task. |
| Been cashed **but** the beneficiary does not have check details | Advise the beneficiary to call back at another time when they do have the required details, OR request the following be faxed or mailed in from the beneficiary:   * Fax or mail a legible copy of the front and back side of the cleared check to assist with further research.   **Note:** Only provide this address for missing payment research:  **Blue MedicareRx**  **PO Box 30001**  **Pittsburgh, PA 15222-0330**  **Fax: 1-866-342-7048**  Important IconIf the member is near the end of the grace period of dunning, ask to secure a one-time payment over the phone so the member avoids disenrollment. |
| Not been cashed | **Explain to the beneficiary:**  It can take up to 21 calendar days for checks to be received and applied to the account. If it has been longer than 21 calendar days from the date mailed, refer beneficiary to their bank for recourse. We are unable to search for uncashed checks. |

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| Frequently Asked Questions |

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| **#** | **Question** | **Answers** |
| **1** | **How long does it take to process a check from the time it is mailed?** | It may take up to 21 calendar days for us to receive and process the check through the mail. |
| **2** | **I made a payment online, when will the payment post to my account?** | Payments online through the bank are referred to as a bill pay service, which a physical check is mailed through the postal service. It can take up to 21 calendar days for us to receive and post the check to the beneficiary’s account as this physical check is subject to mail delivery delays. |
| **3** | **What is a bill pay check?** | This is a check issued by the bank when the beneficiary requests the bank to send a payment to the plan through the bank’s on-line service. A physical check is sent directly from the beneficiary’s bank to the plan through the mail. |
| **4** | **Where do I find the check number for a payment made online through my bank?** | Even though the request was done on-line through the beneficiary’s bank, we will receive a physical check. The beneficiary will need to contact their bank to get the check number and to determine if the check was cashed. Advise the beneficiary to request the copy of the front and back of the check from their bank. |
| **5** | **My bank account shows my online check cleared my bank on this date XX/XX/XX, why is my check not applied to my account?** | The date it came out of the beneficiary’s account is close to the day the bank issued the check. Advise the beneficiary this does not include postal delivery time. Please request a copy of the front and back of the cleared check from the bank. |
| **6** | **How long does it take to process items submitted through the beneficiary’s bank’s electronic (bill pay) process?** | Even though this was requested electronically through the beneficiary’s bank, we will receive the payment by check through the mail. These checks may take up to 21 calendar days to receive and post to your account. |
| **7** | **Support** **Task resolution times for missing payment research?** | Premium Billing will research and provide a resolution within 3 business days. |

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| Related Documents |

[Compass MED D - Blue MedicareRx (NEJE) - Premium Billing General Information, Processes, & Document Index (066459)](https://thesource.cvshealth.com/nuxeo/thesource/#!/view?docid=56e6341b-d1ed-4b15-bd10-6eb6a3ed92a5)

**Grievance Standard Verbiage:** Refer to the “Grievance Standard Verbiage (for use in Discussion with Beneficiary)” section in the appropriate work instruction linked to from [Compass MED D - Grievances Index (062962)](https://thesource.cvshealth.com/nuxeo/thesource/#!/view?docid=70034f51-77df-49a4-ae97-7d3d63b216b3)

**Parent Document:** **CALL-0048:** [Medicare Part D Customer Care Call Center Requirements-CVS Caremark Part D Services, L.L.C.](https://policy.corp.cvscaremark.com/pnp/faces/DocRenderer?documentId=CALL-0048)

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

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