# Aetna MED D - SilverScript - Premium Billing Auto Pay Options and Education

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**Description:** Provides the details necessary to educate **SilverScript** beneficiaries about automatic payment options for Premium Billing.

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| Auto Pay Options & Education |

As part of the Premium Billing call flow, the CCR will determine if the beneficiary’s account is set up for monthly premium automatic payments through one of the available Auto Pay options:

* **Social Security Administration (SSA/RRB) Withholding** - Automatic withholding of the Medicare Part D Premium from the beneficiary’s Social Security Administration (SSA/RRB) benefit.
* **Electronic Funds Transfer (EFT) or Automated Clearing House (ACH)** - Electronic check processing, also known as Electronic Funds Transfer (EFT) or Automated Clearing House (ACH). Allows the beneficiary to pay for premiums via a checking or savings account on a recurring basis.
* **Credit Card / Debit Card (RCD)** - Payment of the MED D monthly premium via a major Credit Card or Debit Card. Examples: Visa, MasterCard, American Express, Discover.

**Note:** Beneficiaries are not eligible for automatic payment unless **all** overdue plan premiums have been paid and they are reinstated. Refer to [Aetna MED D SilverScript - Process for Good Cause Determinations For Non-payment of Plan Premiums (063898)](https://thesource.cvshealth.com/nuxeo/thesource/#!/view?docid=307fc8be-d14d-43ff-ab22-92e01762193f).

This step in the Premium Billing call flow will help to ensure the beneficiary maintains continuous enrollment in his/her Medicare Part D plan and the beneficiary is in good standing with regard to his/her Premium Billing.

To determine whether a beneficiary is enrolled in an existing Auto Pay option, the CCR will:

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| **Step** | **Action** | | |
| **1** | Determine if the caller is authorized to make changes to the beneficiary’s premium billing account. Refer to **Authorized Persons who can make changes to the Premium Billing Account** section of [Aetna MED D - SilverScript - Premium Billing General Information, Processes, & Document Index (026695)](https://thesource.cvshealth.com/nuxeo/thesource/#!/view?docid=7072bae5-b9f6-4141-991f-9b3d11e7a5bd). | | |
| **2** | Review the beneficiary’s current Premium Billing Payment Method and Balance.   * From the **Main** screen in **PeopleSafe**, click on the **Medicare D Inquiry** tab. * Click the **Premium History** tab, the **Date Range** will automatically populate. * Set the **Date Range:** To ensure the **Stock ID** section of the **Premium History** screen will display correctly, change the End Date Range field to the end of the next year (**Example:** **12/31/2026**). * Click the **Show** hyperlink next to **Balance Details** and **Billing Cycle & Payment Method**. * Verify the **Stock ID**. | | |
| **If the beneficiary’s current Premium Billing Method is…** | **Then…** | |
| Direct Bill (Pay by Check or Money Order) Stock ID of INV | Proceed to **Step 3**. | |
| Stock ID of SSA/RRB, EFT/ACH or RCD | Proceed to [**Step 8**](#Step8). | |
| **3** | Verify if the beneficiary is receiving or a part of:   * SPAP Subsidy (At any Level). * Employer Group Subsidy (at any level). * **Termed** beneficiaries (with or without an outstanding balance). * Beneficiaries who already have an Auto Pay option in place (including SSA/RRB). | | |
| **If the beneficiary is…** | **Then…** | |
| A Termed Beneficiary  **OR**  Already using an Auto Pay option | Do **NOT** offer the premium Auto Pay options.  Proceed to [**Step 8**](#Step8). | |
| Receiving SPAP **or** EGWP subsidies but **still responsible for a portion of premium or LEP** | In reviewing your profile, I noticed that you are mailing in your premium billing payments each month.   * + Would you be interested in setting up your account to automatically pay your monthly premiums each month?   + If you would like to do so, we can set up your account to have your monthly premium deducted from your checking/savings account, or credit/debit card. Would you like to set up auto pay through any of these options? | |
| **If the beneficiary says…** | **Then…** |
| Yes to EFT/ACH from  Checking/Savings Account. | Proceed to [**Step 4**](#Step4). |
| Yes to Credit Card/Debit Card Auto Pay. | Proceed to [**Step 5**](#Step5). |
| No, I would like to be Direct Billed (Pay by Check or Money Order). | Proceed to [**Step 6**](#Step6). |
| **NOT** receiving premium subsidies or a part of any of the above groups | In reviewing your profile, I noticed that you are mailing in your premium billing payments each month.   * Would you be interested in setting up your account to automatically pay your monthly premiums each month? * If you would like to do so, we can set up your account to have your monthly premium withheld from your SSA/RRB benefit each month. We also can auto draft your monthly premium from your checking/savings account, or credit card/debit card. Would you like to set up auto pay through any of these options? | |
| **If the beneficiary says…** | **Then…** |
| Yes to SSA/RRB Withholding. | Refer to [Aetna MED D - SilverScript - SSA/RRB Premium Withholding (073397)](https://thesource.cvshealth.com/nuxeo/thesource/#!/view?docid=c9595e77-f754-47ac-80a2-24e1a01c6337).  Proceed to[**Step 7**](#Step7). |
| Yes to EFT/ACH from  Checking/Savings Account. | Proceed to [**Step 4**](#Step4). |
| Yes to Credit Card/Debit Card Auto Pay. | Proceed to [**Step 5**](#Step5). |
| No, I would like to be Direct Billed (Pay by Check or Money Order). | Proceed to [**Step 6**](#Step6). |
| **4** | Refer to [Aetna MED D - SilverScript Premium Billing E-Check/EFT Single-Sign-On (SSO) Processes (005923)](https://thesource.cvshealth.com/nuxeo/thesource/#!/view?docid=6c4730ff-7093-47c9-a1b5-87593d686394).  **Important Reminder:** With EFT/ACH payments, remind the beneficiary that his/her entire balance is deducted each month.  **Example:** On the first withdrawal from the bank account, if the beneficiary **owes more than one month** of premiums, the system will take **ALL** that is due and not just one month’s premium.  Refer to the **Viewing Premium Balance** section in  [Aetna MED D - SilverScript - Premium Billing General Information, Processes, and Document Index (026695)](https://thesource.cvshealth.com/nuxeo/thesource/#!/view?docid=7072bae5-b9f6-4141-991f-9b3d11e7a5bd).  You have an account balance of <$xx.xx>and this entire amount will be deducted from your bank account.  **Note:**If the balance owed is greater than $300, the CCR must document in PeopleSafe that the beneficiary agreed to the deduction and document the amount agreed upon.  **Important Reminder:** Under **no circumstance** is it appropriate to list full credit card/debit card numbers or EFT/ACH routing and account numbers in any comments field. This includes but is not limited to RM Task comments/notes & Stop-see comments. Credit/Debit card numbers and EFT/ACH routing and account numbers may **only** be entered in system-specified credit card number/EFT/ACH routing and account number fields. All comment fields are periodically checked for compliance. Users who fail to abide by policy may be subject to disciplinary action.  Proceed to [**Step 7**](#Step7). | | |
| **5** | Refer to [Aetna MED D - SilverScript Premium Billing Credit Card Single-Sign-On (SSO) Processes (098901)](https://thesource.cvshealth.com/nuxeo/thesource/#!/view?docid=56e63826-3e28-4427-b5e9-1dc4a5140209).  **Important Reminder:** With RCD recurring credit card/debit card payments, the beneficiary’s entire balance is deducted each month.  **Example:** On the first charge to the credit card/debit card, if the beneficiary **owes more than onemonth** of premiums, the system will take **ALL** that is due and not just one month’s premium.  Refer to the **Viewing Premium Balance** section in [Aetna MED D - SilverScript - Premium Billing General Information, Processes, and Document Index (026695)](https://thesource.cvshealth.com/nuxeo/thesource/#!/view?docid=7072bae5-b9f6-4141-991f-9b3d11e7a5bd).  You have an account balance of <$xx.xx>and this entire amount will be deducted from your credit card/debit card.  **Note:**If the balance owed is greater than $300, the CCR must document in **PeopleSafe** that the beneficiary agreed to the deduction and document the amount agreed upon.  **Important Reminder:**  Under **no circumstance** is it appropriate to list full Credit/Debit card numbers or EFT/ACH routing and account numbers in any comments field. This includes but is not limited to RM Task comments/notes, Stop-see comments and Emails. Credit/Debit card numbers and EFT/ACH routing and account numbers may **only** be entered in system-specified credit card number/EFT/ACH routing and account number fields. All comment fields are periodically checked for compliance. Users who fail to abide by policy may be subject to disciplinary action.  Proceed to [**Step 7**](#Step7). | | |
| **6** | Thank you for allowing me to provide these available automatic payment methods. If you decide to add one of these options to your profile at a later time, please contact MED D Customer Care and one of our representatives will be happy to assist you.     * As a reminder, your entire balance is due each month by the invoice due date. * Monthly premiums are due on the date listed on the invoice for that month’s premium. * To view the beneficiary’s specific due date, access his/her actual invoice in **ONEclick**. * If your payment has **NOT** been received and posted to your account by the invoice due date, you could receive an initial notice for nonpayment that begins the Dunning and Disenrollment process.   **Note:** For additional questions about the Dunning process, refer to [Aetna MED D - SilverScript - Premium Billing Dunning and Disputes Process (026593)](https://thesource.cvshealth.com/nuxeo/thesource/#!/view?docid=c9ae8d9a-2459-4cb4-8b20-90ae27a97756).  Proceed to **Step 8**. | | |
| **7** | As a reminder, please continue to pay your monthly premiums until your Auto Pay option is effective.   * Monthly premiums are due on the date listed on the invoice for that month’s premium.   + To view the beneficiary’s specific due date, access his/her actual invoice in **ONEclick**. * If your direct payment has **NOT** been received and posted to your account by the invoice due date, you could receive an initial notice for nonpayment that begins the Dunning and Disenrollment process. Note that autopay payments will draft at a later set date, but will apply as if received on the 1st and not place the member is the Dunning process   **Note:** For additional questions about the Dunning process, refer to [Aetna MED D - SilverScript - Premium Billing Dunning and Disputes Process (026593)](file:///C:\Users\c167917\Downloads\CMS-2-026593). | | |
| **8** | Proceed to address and resolve the beneficiary’s Premium Billing inquiry. | | |
| **9** | Ask if there are any other questions.   * Address any other issues and document/close the call according to existing policies and procedures; refer to [MED D - Call Documentation Including Viewing and Adding Comments in PeopleSafe (067665)](https://thesource.cvshealth.com/nuxeo/thesource/#!/view?docid=e9cdb772-9c04-4e42-b87a-ae4d2c2e1f62) * Log Activity:   + 209 = Payment Inquiry   + 1327 = Premium Billing | | |

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| Resolution Time |

Refer to the **Premium Billing Processing Times** section in [Aetna MED D - SilverScript - Premium Billing General Information, Processes, and Document Index (026695)](https://thesource.cvshealth.com/nuxeo/thesource/#!/view?docid=7072bae5-b9f6-4141-991f-9b3d11e7a5bd) and [Compass and PeopleSafe - General Resolution Times/Turn Around Times (TAT) and Related Documents (028775)](https://thesource.cvshealth.com/nuxeo/thesource/#!/view?docid=863acba1-4370-4da9-9f6b-4cadf8633fbf).

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| FAQs |

The CCR will address any additional questions about Premium Billing Auto Pay options using the following table:

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| **Number#** | **Question** | **Answer** | |
| **1** | **What is Auto Pay?** | Auto Pay options ensure your premium is paid on time each month and your benefits are protected from possible disenrollment that can occur from nonpayment of premiums.  For your convenience, you can pay your monthly MED D premiums automatically using one of the following options:   * Charge your premium to the credit card/debit card of your choice. * Have your premium withdrawn from your checking or savings account. * Withhold your premium from your Social Security or Railroad Board Retiree benefit. | |
| **2** | **Is Auto Pay required?** | No. It is not required to enroll in an Auto Pay option. By enrolling in an Auto Pay option, you ensure your premium is paid on time each month and your benefits are protected from possible disenrollment that can occur from nonpayment of premiums.   * There is no cost for postage. * Verification of your Premium Billing payments will appear on either your Credit Card/Debit Card or Bank statement. * Auto Pay options are meant to give you peace of mind when it comes to your MED D Premium Billing payment. | |
| **3** | **Once I send this EFT form in, when will my Auto Pay option begin?** | Once we receive the form, we will process your request. Each payment method takes a different amount of time to set up. Once in place, you will no longer receive a monthly invoice.  **Notes:**   * Auto Pay Welcome Letters and EFT confirmation letters are located in **ONEclick;** advise the beneficiary if & when the letter was mailed to them. * Premium Billing Auto Pay Welcome Letters including the Auto Pay effective date will be mailed to beneficiaries who have selected to enroll in one of the Auto Pay options. Refer to the following Sample Premium Billing Auto Pay Welcome Letters:   + [SilverScript EFT/ACH & RCD Auto Pay Welcome Letter - English (011579)](https://thesource.cvshealth.com/nuxeo/thesource/#!/view?docid=619e9469-cdf2-4924-890b-c4cb54bb70f0)   + [SilverScript EFT/ACH & RCD Auto Pay Welcome Letter - Spanish (018195)](https://thesource.cvshealth.com/nuxeo/thesource/#!/view?docid=4a381997-2cdd-4ee1-aa25-dad8055fdbc1) | |
| **4** | **Where do I send the (EFT/ACH) form?** | **SilverScript Insurance Company**  **PO Box 30004**  **Pittsburgh, PA 15222-0330** | |
| **5** | **Can you help me fill out the (EFT/ACH) form?** | I will be happy to assist you.  Refer to the following forms:   * [MED D - EFT/ACH Application Form (English) (085586)](https://thesource.cvshealth.com/nuxeo/thesource/#!/view?docid=56b3b477-7647-450e-967a-f80b09409cd0) * [MED D - EFT/ACH Application Form (Spanish) (064590)](https://thesource.cvshealth.com/nuxeo/thesource/#!/view?docid=a2cdcfc1-9dcc-4f6c-9faf-a063da2f7bc4) | |
| **6** | **I already submitted my request for EFT/SSA/RCD. Why has my Auto Pay NOT started?** | I will be happy to research the status of that request.   * Review comments in the MED D tab for a noted reason for why the Auto Pay hasn’t started. * If nothing is located within the comments OR the beneficiary still has questions, refer to the following for next steps: | |
| **If...** | **Then...** |
| **EFT** | Submit the following RM Task:  **Task Category:** Billing/Payment  **Task Type:** Premium Billing Inquiry Medicare D  **Queue:** Finance - Scottsdale Premium Billing  **Reason for Dispute:** EFT SETUP REQUEST  **Task Notes:** Document the following:   * **EFT005**, EFT RESEARCH - Provide details of the beneficiary’s concern(s). * Beneficiary’s contact number.   **Note:** Turn Around Time (TAT) for resolution of this RM Task Type is **5** business days. A plan representative will contact the beneficiary with research results. (Confirm phone number is current).  Do **NOT** list full account or routing numbers in the RM Task or Account Notes/Comments. |
| **SSA** | Refer to [Aetna MED D - SilverScript - SSA/RRB Premium Withholding (073397)](https://thesource.cvshealth.com/nuxeo/thesource/#!/view?docid=c9595e77-f754-47ac-80a2-24e1a01c6337).  **Note:** If submitting an RM Task, SSA RESEARCH must be noted within the Task for proper routing. Turn Around Time (TAT) for resolution of this RM Task Type is **5 to 7** days. A plan representative will contact the beneficiary with research results. (Confirm phone number is current). |
| **RCD** | Submit the following RM Task:  **Task Category:** Billing/Payment  **Task Type:** Premium Billing Inquiry Medicare D  **Queue:** Finance - Scottsdale Premium Billing  **Reason for Dispute:** Credit Card Payment  **Task Notes:** Document the following:   * **CCP003**, Provide details of the beneficiary’s concern(s). * Beneficiary’s contact number.   **Note:** Turn Around Time (TAT) for resolution of this RM Task Type is **5** business days. A plan representative will contact the beneficiary with research results. (Confirm phone number is current).  Do **NOT** list full Credit Card/Debit Card numbers in the RM Task or Account Notes/Comments. |

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| Related Documents |

[Aetna MED D - SilverScript - Premium Billing General Information, Processes, & Document Index (026695)](https://thesource.cvshealth.com/nuxeo/thesource/#!/view?docid=7072bae5-b9f6-4141-991f-9b3d11e7a5bd)

**Grievance Standard Verbiage:** Grievance Standard Verbiage (for use in Discussion with Beneficiary) section in [MED D - Grievances Index (007931)](https://thesource.cvshealth.com/nuxeo/thesource/#!/view?docid=71364003-a41f-4b84-be24-1e85435462b2)

**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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