**Compass - Client Program Offerings**

**Description:** Provides an overview and comparison of the different CVS Caremark plan designs.

**Reminders:**

* Click the blue **Client Program Offering** hyperlink in the **Quick Actions** panel on the Claims Landing Page.
* Specialty Medications are not subject to Maintenance Choice nor are they available at CVS Retail. View CIF to confirm Specialty coverage and pharmacy details. Refer to [Compass - Specialty Pharmacy (CTS - Caremark Therapeutic Pharmacy Services) Call Handling 058175](https://thesource.cvshealth.com/nuxeo/thesource/#!/view?docid=845064bd-8ae0-4d30-af0a-e21d6d81933c).
* This is not an all-inclusive list, use the Client Program Offerings pop up and the CIF for additional program offerings.

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| **Plan Design** | **Description** |
| **Auto Refill Program (ARP)** | The Auto Refill Program (ARP) allows members to automatically receive maintenance prescription refills at the appropriate time, without having to manually place the order. Refer to [Auto Refill Program (ARP) Including Questions and Answers (086374)](https://thesource.cvshealth.com/nuxeo/thesource/#!/view?docid=dbbd827c-6422-4d74-9564-18d510c03aee). |
| **Mandatory Mail** | Members are limited to a certain number of 30 Day retail refills (varies per Client) at in-network retail pharmacies. After this limit is reached, maintenance medications are only covered via Mail Order in 90 Day supplies. Refer to [Compass - Mandatory Mail Order Pharmacy Fills (065654)](https://thesource.cvshealth.com/nuxeo/thesource/#!/view?docid=3b60a22f-46f3-4a63-882c-1e8f680c2d8a) |
| **Incentivized Mail** | This program incentivizes the use of Mail Order for maintenance medications by ensuring lower coinsurance/copays for Mail, whereas Retail refills may either reject or experience an increase in cost/copay.  Refer to:  [Compass - Handling Maintenance Choice Calls (062836)](https://thesource.cvshealth.com/nuxeo/thesource/#!/view?docid=2caace6e-39db-4411-9813-86cc2997a67d)  [Maintenance Choice All Access (010242)](https://thesource.cvshealth.com/nuxeo/thesource/#!/view?docid=14ae0958-12e7-48ef-bdb1-8f903f3c48ae) |
| **Retail 90** | Members can refill 90 day supplies at any participating in-network retail pharmacy.   * Some clients allow the option to continue to fill 30 day supplies at retail. * Some pharmacies offer Retail Home Delivery. The member should consult with local pharmacy for details and any additional fees. * 90 day supplies under this program are often the same copay, or even less, than the 30 day supply.   + Retail = Copay varies by Client |
| **Maintenance Choice** | * CVS Caremark’s **Maintenance Choice**(MChoice) program helps manage drug costs and reduce trips to the pharmacy by offering members the option of filling maintenance (long-term) medications in 90-day supplies at select participating pharmacies for the **same** mail rate and copay. * MChoice programs may be All Access, Incentivized, Mandatory, Voluntary, and may include an Opt Out option. * MChoice 90-day refills are available via select participating pharmacies, including, but not limited to, CVS Caremark Mail Order, all CVS Retail pharmacies (including those inside Target stores), Costco Pharmacy, Kroger, and select independent pharmacies. * Most plans offer either two or three 30 day retail refills per medication at any in-network pharmacy before moving to 90 days at CVS Retail, CVS Caremark Mail Order, Costco, Kroger, and select independent pharmacies. Refer to CIF (Plan Design Highlights Fill Limitations). * The same copay applies to 84/90 day supplies via Mail Order or 84/90 day supplies via retail MChoice pharmacies. Run Test Claims refer to CIF.   Refer to [Compass - Handling Maintenance Choice Calls (062836)](https://thesource.cvshealth.com/nuxeo/thesource/#!/view?docid=2caace6e-39db-4411-9813-86cc2997a67d). |
| **True Accumulation (Specialty Use Only)** | When a member uses a copay card for a specialty drug filled at a CVS Specialty pharmacy, it ensures only true member cost share (non-third-party dollars) are applied towards member’s accumulations (Deductibles and Out of Pocket). Refer to [Compass - CVS Specialty Copay Plan Design Strategies (058047)](https://thesource.cvshealth.com/nuxeo/thesource/#!/view?docid=61656868-2241-42ad-ac78-516f378f2a43). |
| **MED B COB Mandatory** | This program identifies that the client agrees to be the secondary payer on claims where the member and drug are Med B eligible, the Med B eligible drug requires processing under the Med B plan as primary and the commercial plan as secondary when applicable. |
| **Preferred Pharmacy Network** | A plan benefit exists which may offer a reduced cost share for the member at a preferred pharmacy. Refer to [Compass - Pharmacy Search and Details (057995)](https://thesource.cvshealth.com/nuxeo/thesource/#!/view?docid=ede79ef0-e196-481c-9f1b-c4ea562d9025). |
| **Caremark Cost Saver** | Caremark Cost Saver is a program intended to make lower prices available to members on certain covered products. This solution leverages a partnership with a discount vendor while applying payments to the member’s accumulators and retaining visibility of the claim for clinical management programs. Refer to [Caremark Cost Saver Program (060360)](https://thesource.cvshealth.com/nuxeo/thesource/#!/view?docid=f389b4bb-3337-4b32-af6f-556d7fa03a78). |

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