

# **New Supplier: Self On-Boarding**

# **New Supplier: Self On-Boarding**



# New Supplier Email - Introduction

## New Supplier Email

From: CVSHealth@cloudmail.stibo.com <CVSHealth@cloudmail.stibo.com>

Subject: [EXTERNAL] CVS Health - Invitation to register as a new CVS Health supplier

\*\*\*\* External Email - Use Caution \*\*\*\*

Hi Test Supplier,

Your merchandising partner at CVS Health has initiated an invitation for you to register as an agent on our Stibo platform. This platform will allow you to provide all required information to be set-up as a CVS Health supplier.

In the near future you will receive two emails, one with your user name details and instructions and other with your password and one time verification token.

In the interim, please review the information contained at: <https://cvssuppliers.com/> to begin preparing for the registration process.

Thanks,  
CVS Team

\*\*\*important: This is a system-generated notification. Please do not reply this email.

## Description / Steps

- *When an invitation to a new supplier has been finalized an email is sent informing the supplier of two future emails containing the user's ID, temporary password and token for one-time verification.*

## Tips

# New Supplier Email - Username

## New Supplier Email

**From:** CVSHealth@cloudmail.stibo.com <CVSHealth@cloudmail.stibo.com>

**Subject:** [EXTERNAL] CVS Health - Supplier registration credentials

\*\*\*\* External Email - Use Caution \*\*\*\*

Hi Test Supplier,

We have created a new user in our Stibo system. Below are the details

Username: TSUPPLIER

**Note: We recommend that you change your password after your first login.**

URL Details [https://cvs-production.scloud.stibo.com/webui/WEBUI\\_CVSSupplierPortal](https://cvs-production.scloud.stibo.com/webui/WEBUI_CVSSupplierPortal) \*Requires Google Chrome (Preferred), Microsoft Edge or Mozilla Firefox browser

Thanks,  
CVS Team

\*\*\*Important: This is a system-generated notification. Please do not reply this email.

## Description / Steps

- *When an invitation to a new supplier has been finalized and the user has been created, an email will be sent to the new supplier with the Username and URL details*

## Tips

*A separate email is sent containing the user's temporary password and token for one-time verification*

# New Supplier Email – Password and Verification Token

## New Supplier Email

**From:** CVSHealth@cloudmail.stibo.com <CVSHealth@cloudmail.stibo.com>

**Subject:** [EXTERNAL] CVS Health - Supplier verification token

\*\*\*\* External Email - Use Caution \*\*\*\*

Hi Test Supplier,

We have created a new user in our Stibo system. Below are the password and one time verification token details

Password: A&2UZkv1kDd

One Time Verification Token : 205990813

**Note:** We recommend that you change your password after your first login.

URL Details [https://cvs-production.scloud.stibo.com/webui/WEBUI\\_CVSSupplierPortal](https://cvs-production.scloud.stibo.com/webui/WEBUI_CVSSupplierPortal) \*\*Requires Google Chrome (Preferred), Microsoft Edge or Mozilla Firefox browser

Thanks,  
CVS Team

\*\*\*Important: This is a system-generated notification. Please do not reply this email.

## Description / Steps

- *When an invitation to a new supplier has been finalized and the user has been created, an email will be sent to the new supplier with the following:*
- *Temporary password*
- *Verification Token*
- *URL Details*

## Tips

*A separate email is sent containing the username*

*User should change the password after first login*

# User Login

## User Login

The screenshot shows a web browser window with the URL `auth.mdm.stibosystems.com/auth/realms/cvs-uat/protocol/openid-connect/auth?response_type=code&client_id=Step&state=10a5f2c0-2434-4ab7-963a-bb65568a58ec&login=true&scope=openid&redirect_uri=https%3A%2F%2Fcv-uat.scloud.stibo.c...`. The page features the STIBO SYSTEMS logo and the text "MASTER DATA MANAGEMENT". Below the logo, there are two login options: "STEP managed user log in" and "IDP managed user log in". The "STEP managed user log in" section includes a form with fields for "Username" (containing "TSUPPLIER") and "Password" (masked with dots). A "Log In" button is located below the password field. Red callout boxes with numbers 1 through 4 are overlaid on the image: 1 points to the browser address bar, 2 points to the "STEP managed user log in" heading, 3 points to the "Username" field, and 4 points to the "Log In" button.

## Description / Steps

1. Enter URL for Stibo
2. Enter Username from email
3. Enter temporary password from email
4. Click "Log In"

## Tips

# STIBO – Navigation Overview

## Navigation – Tool Bars

The screenshot shows the STIBO navigation tool bar. It features a dark teal sidebar on the left with the CVS Health logo at the top. Below the logo are four search options: 'Global Search', 'Tree', 'Supplier Search', and 'Supplier Search'. A red circle with the number '1' points to the CVS Health logo. A red circle with the number '2' points to a small arrow icon at the top of the sidebar. A red circle with the number '3' points to the three stacked horizontal lines (hamburger menu) at the top of the sidebar. A red circle with the number '4' points to the 'Supplier Search' option. The main content area is titled 'Welcome to the STEP Web UI' and contains six panels: 'Links', 'New Supplier Onboarding', 'New Agent Onboarding', 'Supplier Maintenance', 'Clarification Workflow', and 'Manage Your Account'. The 'Manage Your Account' panel shows the user is logged in as KYLA MULLIN and has a 'Logout' button.

This close-up shows the top portion of the navigation sidebar. It features three stacked horizontal lines (hamburger menu) at the top, followed by a square icon, a magnifying glass icon, a grid icon, and another magnifying glass icon. A red circle with the number '3' points to the hamburger menu icon.

## Description / Steps

1. Click CVS logo to get to this homepage
2. Click the Arrow to collapse the menu for additional workspace
3. Click the 3 stacked lines to expand the menu back to size
4. Click the Supplier Search to search for a vendor

## Tips

# STIBO – Navigation Overview

## Navigation - Workflow

Welcome to the STEP Web UI

Supplier self onboarding process guidelines  
Link to CVSSuppliers.com  
Advanced Search

New Supplier Onboarding

One Time Agent Verifica...	0
Supplier Self OnBoarding	6
Total	6

New Agent Onboarding

One time Agent Verifica... 0

Supplier Maintenance

Maintain Supplier Data 1

Clarification Workflow

Review 0

Manage Your Account

Logged in:  
KYLA MULLIN

User Details

Logout

## Description / Steps

1. *Self onboarding training documents*
2. *One Time verification – first time sign in only*
3. *Self Onboarding to complete*
4. *Supplier Maintenance to complete*
5. *Clarification workflow*

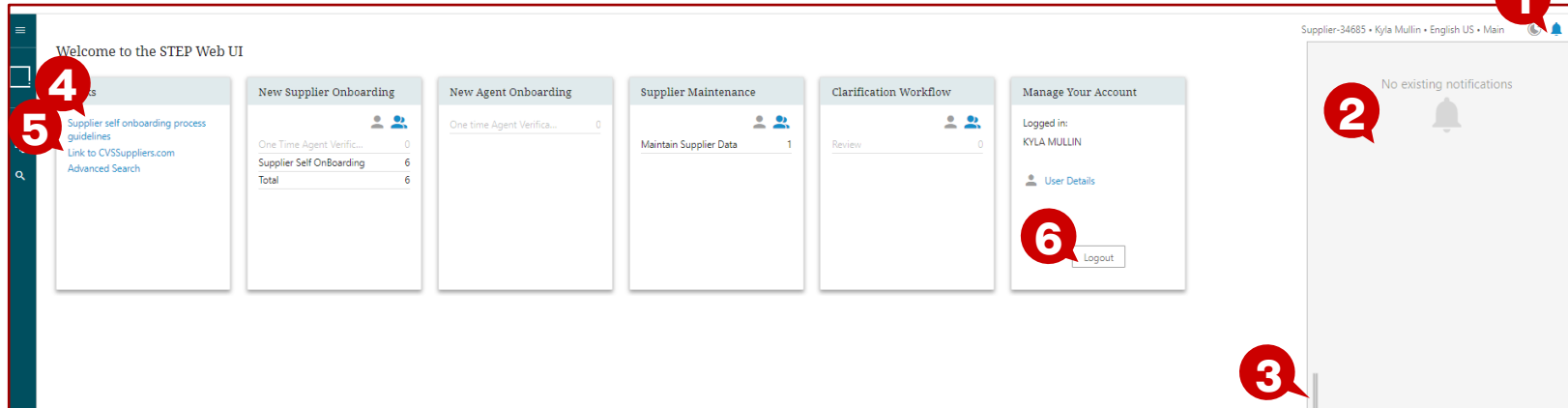
## Tips

Each section will show the number of requests with outstanding tasks



# STIBO – Navigation Overview

## Navigation - Notifications





## Description / Steps

1. *Notifications will be identified by a Red Bell*
2. *Click the bell to expand the notification box*
  - *Click the Bell again to collapse the notification box*
3. *Drag the bar to close the Notification box*
4. *Supplier training document link – Available for download*
5. *Link to CVSSuppliers.com site – short cut to the vendor set up section*
6. *Log out of Stibo*

# Password Change

## User Details

Welcome to the STEP Web UI

Supplier-17908912 • Test Supplier • English US • Main  

### Links

- Supplier self onboarding process guidelines
- Link to CVSSupplier.com
- Advanced Search

### New Supplier Onboarding

One Time Agent Verific...	1
Supplier Self OnBoarding	0
<b>Total</b>	<b>1</b>

### New Agent Onboarding

One time Agent Verifica...	0
----------------------------	---

### Supplier Maintenance


Maintain Supplier Data	0
------------------------	---

### Clarification Workflow

Review	0
--------	---

### Manage Your Account

Logged in:  
TEST SUPPLIER

**1**  User Details

Logout

## Description / Steps

1. Click "User Details" within the Manage Your Account section

## Tips

# Password Change

## User Details

**User Details**

User ID: TSUPPLIER

\* Email Address:  **1**

Old password:  **2**

New password:  **3**

Repeat new password:  **3**

**4**

Use the save button to reset your password. The reset will log you out of the system Please log in with your new credentials.

## Description / Steps

1. Enter temporary password from email
2. Enter new password of your choice
3. Reenter new password of your choice
4. Click "Save"

**Note:** You will be logged out and required to log in with your new password

## Tips

Password should follow strong password guidelines:

- A minimum of 8 characters
- Contain at least 1 alpha character
- Contain at least 1 number
- Contain at least 1 special character

# User Login – After Password Change

## User Login

The screenshot shows a web browser window with the URL `auth.mdm.stibosystems.com/auth/realms/cvs-uat/protocol/openid-connect/auth?response_type=code&client_id=Step&state=10a5f2c0-2434-4ab7-963a-bb65568a58ec&login=true&scope=openid&redirect_uri=https%3A%2F%2Fcv-uat.scloud.stibo.c...`. The page features the STIBO SYSTEMS logo and a login form. A red circle with the number '1' is positioned in the top left corner of the browser window. The login form is titled 'STEP managed user log in' and includes the text 'Please log in using the form'. It contains a 'Username' field with the value 'TSUPPLIER' and a 'Password' field with masked characters. A red circle with the number '2' is next to the 'Please log in using the form' text, a red circle with the number '3' is next to the 'Username' field, and a red circle with the number '4' is next to the 'Password' field. A 'Log In' button is located below the password field. Below the login form, there is a section for 'IDP managed user log in' with a link for 'CVS Internal Colleagues - Click here'.

## Description / Steps

1. Enter URL for Stibo
2. Enter Username from email
3. Enter newly created password
4. Click "Log In"

## Tips

# One Time Agent Verification

## Welcome to the STEP Web UI

Welcome to the STEP Web UI

Supplier-17908912 • Test Supplier • English US • Main

**Links**

- Supplier self onboarding process guidelines
- Link to CVSSupplier.com
- Advanced Search

**New Supplier Onboarding**

One Time Agent Verific...	1
Supplier Self OnBoarding	0
<b>Total</b>	<b>1</b>

**New Agent Onboarding**

One time Agent Verifica...	0
----------------------------	---

**Supplier Maintenance**

Maintain Supplier Data	0
------------------------	---

**Clarification Workflow**

Review	0
--------	---

**Manage Your Account**

Logged in:  
TEST SUPPLIER

User Details

Logout

## Description / Steps

Upon login the user will be in the Stibo home screen

1. Click "One Time Agent Verification" within the New Supplier Onboarding section

## Tips

The next page will provide guidance to verify your access

# One Time Agent Verification

## Supplier Creation – One Time Agent Verification

Supplier Creation - One Time Agent Verification - Available

ID	Supplier Name	Initiated By	Team Name	Date Of Entry	No Of days In Queue
<a href="#">Supplier-17908912</a>	TEST SUPPLIER	RPDM CM 1	CVS Internal Team	Mon Jan 03 2022 09:57:09 GMT-0500 (EST)	1 hr 3 min

## Description / Steps

1. Click the “Supplier-#####” hyperlink

## Tips

*The next page will provide guidance to verify your access*

# One Time Agent Verification

## Supplier Details

**Supplier Details**

ID: Supplier-17908912

Supplier Name: TEST SUPPLIER

**CVS Recommends Password reset on first login**

\* Have you changed your password upon first time login? Y 1

\* One Time Verification Token: 205990813 2

3 Verify

## Description / Steps

1. Select "Y" from the dropdown (password was changed)
2. Enter the token number provided in the email
3. After entering the token and clicking outside of the entry box, click the "Verify" button

## Tips

After verifying your token, you will be taken to the home screen.

The next page will provide guidance to begin your supplier self onboarding

# Supplier Self Onboarding

## Welcome to the STEP Web UI

Welcome to the STEP Web UI Supplier-17908912 • Test Supplier

**Links**

- [Supplier self onboarding process guidelines](#)
- [Link to CVSSupplier.com](#)
- [Advanced Search](#)

**New Supplier Onboarding**

One Time Agent Verific...	0
Supplier Self OnBoarding	1
<b>Total</b>	<b>1</b>

**New Agent Onboarding**

One time Agent Verifica...	0
----------------------------	---

**Supplier Maintenance**

Maintain Supplier Data	0
------------------------	---

**Clarification Workflow**

Review	0
--------	---

**Manage Your Account**

Logged in:  
TEST SUPPLIER

[User Details](#)

[Logout](#)

## Description / Steps

1. Click "Supplier Self Onboarding" within the New Supplier Onboarding option

## Tips

The number next to the Supplier Self Onboarding option indicates that there is 1 task to perform



# Supplier Self Onboarding

## Supplier Creation – Supplier Self Onboarding

Supplier Creation - Supplier Self OnBoarding - Available

Clear all filters

ID	Supplier Name	Supplier Type	Supplier Sub Type	Status of Registration	Initiated By	Team Name	Date Of Entry	No Of days In Queue
<a href="#">Supplier-17908912</a>	TEST SUPPLIER	Merchandise Warehouse	Domestic	Pending Supplier Response	Test Supplier	Supplier	Mon Jan 03 2022 11:15:41 GMT-0500 (EST)	3 min

## Description / Steps

1. Click the “Supplier-#####” hyperlink

## Tips

*The next page will provide continued guidance to begin the Supplier Self Onboarding process*

# Supplier Self Onboarding – Navigation Tips

## Supplier Overview

**1** Supplier

TEST SUPPLIER SUPPLIER PROFILE • ID: Supplier-17908912  
 CVS Reference ID: • Status: Pre-Active • Pay Name: TEST SUPPLIER • PO Name: TEST SUPPLIER • Primary Category: 04-ORAL HYGIENE • Type: Merch Warehouse • Sub Type: Domestic

**2**

**3**

Supplier Overview **2** Address Payment & Banking Supply Chain **1** Ship Lane Compliance **4** EDI **1** Contact Documents Ownership

▼ Details

\* Supplier Name   
 Name of the Supplier that might appear on the Purchase Order or Remittance

\* Supplier Type Merchandise Warehouse  
 Status Pre-Active

\* Supplier Sub Type Domestic

PO Name

\* Pay Name   
 Name of the Pay Supplier

DBA   
 Doing Business As- Informational Only

\* Legal Status   
 The field defines the legal status of the supplier's company.

\* Product/Service Description   
 Please provide a brief description about the Product & Services that you plan to offer to CVS

Supplier Status Date 03-Jan-2022

\* Is this Supplier onboarding due to Merger? N

\* Supplier Manages Data Y

Parent Supplier N

CVS Comments

Supplier Comments

▼ Category

Clear all filters

Code	Name	Is Primary ?
04	ORAL HYGIENE	Y
71	TRIAL TRAVEL	

Number of items: 2

▼ Pay Supplier

Select all Clear all filters Add Pay Supplier Remove Pay Supplier

Supplier Reference	Name
No existing records	

Number of items: 0; Selected items: 0

Do you want to copy Pay Supplier's Pay Name as PayName?

**4**

Save Submit Clone Supplier

## Description / Steps

- 1. Supplier Profile** – provides general information about the supplier
- 2. Blurbs** – these call-outs are guides and **DO NOT** indicate all mandatory entries to complete the Self Onboarding
- 3. Worksheets / Tabs** – System is designed to navigate to each worksheet from left to right prior to submitting the registration
- 4. Save** – provides the ability to save your progress as you go

## Tips

The next page will provide continued guidance to begin the Supplier Self Onboarding process

# Supplier Self Onboarding

## Supplier Overview

**Supplier**  
**TEST SUPPLIER** SUPPLIER PROFILE • ID: Supplier-17908912  
 CVS Reference ID : • Status : Pre-Active • Pay Name : TEST SUPPLIER • PO Name : TEST SUPPLIER • Primary Category : 04-ORAL HYGIENE • Type : Merchandise Warehouse • Sub Type : Domestic

Supplier Overview <sup>2</sup> Address Payment & Banking Supply Chain <sup>1</sup> Ship Lane Compliance <sup>4</sup> EDI <sup>1</sup> Contact Documents Ownership

**1** Details

\* Supplier Name   
Name of the Supplier that might appear on the Purchase Order or Remittance

\* Supplier Type   
Merchandise Warehouse

Status   
Pre-Active

\* Supplier Sub Type   
Domestic

PO Name   
TEST SUPPLIER

Pay Name   
Name of the Pay Supplier

DBA   
Doing Business As- Informational Only

Legal Status   
The field defines the legal status of the supplier's company.

Product/Service Description   
Please provide a brief description about the Product & Services that you plan to offer to CVS

Supplier Status Date   
03-Jan-2022

\* Is this Supplier onboarding due to Merger?   
N

\* Supplier Manages Data   
Y

Parent Supplier   
N

CVS Comments   
CVS Comments

Supplier Comments   
Supplier Comments

**7** Category

Number of items: 2

Code	Name	Is Primary ?
04	ORAL HYGIENE	Y
71	TRIAL TRAVEL	

Pay Supplier

Number of items: 0; Selected items: 0

Do you want to copy Pay Supplier's Pay Name as PayName?

Save Submit Clone Supplier

## Description / Steps

Required entries:

- Supplier Name** – review / update
- PO Name** – review / update
- Pay Name** – review / update
- DBA** – review / update
- Legal Status** – select from dropdown
- Product/Service Description** – enter a brief description about the product you plan to offer

### Best Practice:

- Pay Supplier** (for existing vendors self-onboarding a **new** PO Vendor number) – Add the Pay Supplier number associated with your company

## Tips

The next page will provide continued guidance to begin the Supplier Self Onboarding process

# Supplier Self Onboarding

## Supplier Overview - Complete

**Supplier**  
**TEST SUPPLIER** SUPPLIER PROFILE • ID: Supplier-17908912  
 CVS Reference ID: • Status: Pre-Active • Pay Name: TEST SUPPLIER • PO Name: TEST SUPPLIER • Primary Category: 04-ORAL HYGIENE • Type: Merchandise Warehouse • Sub Type: Domestic

Supplier Overview | Address | Payment & Banking | Supply Chain <sup>1</sup> | Ship Lane | Compliance <sup>4</sup> | EDI <sup>1</sup> | Contact | Documents | Ownership

**1** Details

\* Supplier Name: TEST SUPPLIER  
Name of the Supplier that might appear on the Purchase Order or Remittance

\* Supplier Type: Merchandise Warehouse  
 Status: Pre-Active

\* Supplier Sub Type: Domestic

PO Name: TEST SUPPLIER

\* Pay Name: TEST SUPPLIER  
Name of the Pay Supplier

DBA: TEST SUPPLIER  
Doing Business As- Informational Only

Legal Status: C-Corporation  
The field defines the legal status of the supplier's company.

**2** **3** **4** **5** **6** Product/Service Description: Oral Care Products  
Please provide a brief description about the Product & Services that you plan to offer to CVS

Supplier Status Date: 03-Jan-2022

\* Is this Supplier onboarding due to Merger?: N

\* Supplier Manages Data: Y

Parent Supplier: N

CVS Comments

Supplier Comments

Save Submit Clone Supplier

**7** Category

Clear all filters

Code	Name	Is Primary?
04	ORAL HYGIENE	Y
71	TRIAL TRAVEL	

Number of items: 2

Pay Supplier

Select all Clear all filters Add Pay Supplier Remove Pay Supplier

Supplier Reference	Name
No existing records	

Number of items: 0; Selected items: 0

Do you want to copy Pay Supplier's Pay Name as PayName?

## Description / Steps

Required entries:

- Supplier Name** – review / update
- PO Name** – review / update
- Pay Name** – review / update
- DBA** – review / update
- Legal Status** – select from dropdown
- Product/Service Description** – enter a brief description about the product you plan to offer

Optional entry:

- Pay Supplier** (for existing vendors self-onboarding a new PO Vendor number) – Add the Pay Supplier number associated with your company

## Tips

Click “Save” to save your progress before updating the next worksheet / tab

The next page will provide continued guidance to enter addresses

# Supplier Self Onboarding

## Address

Supplier

TEST SUPPLIER SUPPLIER PROFILE • ID: Supplier-17908912  
CVS Reference ID : 38340 • Status : Active • Pay Name : TEST SUPPLIER • PO Name : TEST SUPPLIER Name Change • Primary Category : 04-ORAL HYGIENE • Type : Merchandise Warehouse • Sub Type : Domestic

Comments Supplier Overview **Address** Payment & Banking Supply Chain Ship Lane Compliance EDI Contact Documents Ownership

**NOTE: Click on 'Create New Address' to create a new address and click 'Save New Address' to use in additional address fields below**

▼ Create New Address

Select all Clear all filters Create New Address Save New Address

Name	*Line 1	Line 2	*City	*Country	*State	*Zip	Zip Extension
No existing records							
Number of items: 0; Selected items: 0							

**NOTE: Click on 'Create New Address' to create a new address and click 'Save New Address' to use in additional address fields below**

▼ HQ Address

Select all Clear all filters Add Existing Address Remove Address

Name	*Line 1	Line 2	*City	*Country	*State	*Zip	Zip Extension
No existing records							
Number of items: 0; Selected items: 0							

## Description / Steps

Required Addresses:

- **HQ (Headquarters)**
- **Remit / Pay**
- **PO Address** (if shipping to our Distribution Center)
- **Ship From Address** (if shipping to our Distribution Center --- Multiple addresses can be added if shipping from multiple locations)
- **W9 Address**

## Tips

Use the scroll bar on the right to move down the page to different address types

Use the triangle to the left of the address type to compress / expand the section

MCR address is optional

# Supplier Self Onboarding – Create New Address

## Address

Supplier

TEST SUPPLIER SUPPLIER PROFILE • ID: Supplier-17908912  
 CVS Reference ID : 38340 • Status : Active • Pay Name : TEST SUPPLIER • PO Name : TEST SUPPLIER Name Change • Primary Category : 04-ORAL HYGIENE • Type : Merchandise Warehouse • Sub Type : Domestic

Comments Supplier Overview **Address** Payment & Banking Supply Chain Ship Lane Compliance EDI Contact Documents Ownership

**NOTE: Click on 'Create New Address' to create a new address and click 'Save New Address' to use in additional address fields below**

▼ Create New Address

Select all
  Clear all filters
 **1** ▶ Create New Address
**2** ▶ Save New Address

Name	*Line 1	Line 2	*City	*Country	*State	*Zip	Zip Extension
No existing records							

Number of items: 0; Selected items: 0

## Description / Steps

Within the “Create New Address” area:

- Click “Create New Address”
  - Enter street address in “Line 1”
  - Enter City name in “City”
  - Select “Country” from the dropdown
    - For Domestic suppliers, “United States of America” will be pre-populated
  - Select “State” from the dropdown
  - Enter zip code in “Zip”
- Click “Save New Address”
  - Repeat Steps 1 & 2 for each address that is needed to represent your company

## Tips

After entering information, the “Name” will populate

# Supplier Self Onboarding – Add Existing Address

## Address

Supplier

**TEST SUPPLIER** SUPPLIER PROFILE • ID: Supplier-17908912  
 CVS Reference ID : • Status : Pre-Active • Pay Name : TEST SUPPLIER • PO Name : TEST SUPPLIER • Primary Category : 04-ORAL HYGIENE • Type : Merchandise Warehouse • Sub Type : Domestic

Supplier Overview **Address** Payment & Banking Supply Chain Ship Lane Compliance <sup>4</sup> EDI <sup>1</sup> Contact Documents Ownership

**NOTE: HQ Address, Pay/Remit Address, & W-9 Address are required. To re-use a newly entered address, please click SAVE as you go through each address.**

**If you are shipping Products to a CVS Distribution Center/ Warehouse, PO Address, Ship from Address are also required.**

▶ HQ Address

▼ Remit/Pay Address

**NOTE : If factor company or different pay supplier is linked then the Remit/Pay Address will be inherited from linked factor company or pay supplier on click of Save or Submit**

Is Same Pay Supplier Linked ? <sup>Y</sup>

Select all Clear all filters Create Address **Add Existing Address**

Name	*Line 1	Line 2	*City	*Country
No existing records				

Number of items: 0; Selected items: 0

**Add Existing Address**

Reference Type: Remit/Pay Address

Reference Target: 999 Main Street, Anytown, RI (Address-17908927)

Cancel OK

## Description / Steps

For the address that was previously created apply it to all required address types

1. Click “Add Existing Address”
2. Enter the address that was previously created by typing in the “Reference Target” field.
3. Select the address and click “OK”

## Tips

Continue adding addresses for the remaining required address types

When complete, click “Save”

Guidance on completing the “Payment & Banking” worksheet begins on the next page

# Supplier Self Onboarding

## Payment & Banking

Supplier

TEST SUPPLIER SUPPLIER PROFILE • ID: Supplier-17908912  
CVS Reference ID: • Status: Pre-Active • Pay Name: TEST SUPPLIER • PO Name: TEST SUPPLIER • Primary Category: 04-ORAL HYGIENE • Type: Merchandise Warehouse • Sub Type: Domestic

Supplier Overview Address **Payment & Banking** Supply Chain <sup>1</sup> Ship Lane Compliance <sup>2</sup> EDI <sup>1</sup> Contact Documents Ownership

▼ Details

**NOTE: If factor company or different pay supplier is linked then Payment Type ,EDI Invoicing and Banking Attributes will be inherited from linked pay supplier or factor company on click of Save or Submit**

EDI Invoicing N

EDI Begin Date

**1** Are you a Supplier providing alcohol products to CVS using this new Supplier number?

**2** Do you want Pcard capability for Payments?

\* Payment Type CHECK

**3** Are you ACH Capable?

▼ Payment Terms

Please confirm your choice by double-clicking and selecting "Y" on the CHOICE box against the Term.

If the offered Payment terms are not the agreed payment terms, please reach out to the Category Manager on the CVS team

Clear all filters

Choice	Name	Short Desc	Discount %	Due Days	Net Days
<input type="checkbox"/>	N75 DAYS	75	0.000	000	75
<input type="checkbox"/>	2% DSC IN 40 DAYS; N41	24041	2.000	040	41
<input type="checkbox"/>	.25% DSC IN 64 D; N65	.256465	0.25	64.00	65.00

Number of items: 3

Preferred Payment Terms

▼ Factor Supplier

\* Do you use a Factor Company for processing your payments?

Save Submit Clone Supplier

## Description / Steps

Required entries:

- 1. Alcohol Supplier**– update
- 2. PCard Capability** – update
- 3. Are you ACH Capable** – review / update
- 4. Payment Terms** – select one
- 5. Factor Company** – review / update

## Tips

The next page provides guidance to complete the “Details” section of the “Payment & Banking” worksheet.



# Supplier Self Onboarding

## Payment & Banking - Details

▼ Details

**NOTE : If factor company or different pay supplier is linked then Payment Type ,EDI Invoicing and Banking Attributes will be inherited from linked pay supplier or factor company on click of Save or Submit**

EDI Invoicing                      N

EDI Begin Date

**1** Are you a Supplier providing alcohol products to CVS using this new Supplier number?      N

**2** Do you want Pcard capability for Payments?      N

\* Payment Type                      CHECK

**3** Are you ACH Capable?      N

## Description / Steps

Required entries:

- 1. Alcohol Supplier** – update
- 2. PCard Capability** – update
- 3. Are you ACH Capable** – review / update (If the selection = “Y”, then you will be prompted to provide additional banking information and IAT Affirmation)

## Tips

The next page provides guidance to complete the “Payment Terms” and “Factor Company” sections

# Supplier Self Onboarding

## Payment & Banking – Payment Terms and Factor Company

▼ Payment Terms

Please confirm your choice by double-clicking and selecting "Y" on the CHOICE box against the Term.

If the offered Payment terms are not the agreed payment terms, please reach out to the Category Manager on the CVS team

Clear all filters

Choice	Name	Short Desc	Discount %	Due Days	Net Days
1 Y	N75 DAYS	75	0.000	000	75
	2% DSC IN 40 DAYS; N41	24041	2.000	040	41
	.25% DSC IN 64 D; N65	.256465	0.25	64.00	65.00

Number of items: 3

Preferred Payment Terms 2

▼ Factor Supplier

\* Do you use a Factor Company for processing your payments? 3 N

## Description / Steps

Required entries:

- 1. Payment Terms (Required)** – double-click in the “Choice” field of the payment terms that the supplier accepts and select “Y”.
- 2. Preferred Payment Terms (Not Required)** – If a Supplier would like to request alternate payment terms, supplier must indicate “Y” on an existing payment term and enter a comment requesting alternate payment terms for CVS Health to consider.
- 3. Factor Company** – change to “Y” if the supplier uses a Factor Company to process payments. You will be prompted to details

## Tips

The next page shows the completed “Payment & Banking” worksheet

# Supplier Self Onboarding – Payment & Banking Completed

## Payment & Banking - Complete

Supplier

TEST SUPPLIER SUPPLIER PROFILE • ID: Supplier-17908912  
CVS Reference ID: • Status: Pre-Active • Pay Name: TEST SUPPLIER • PO Name: TEST SUPPLIER • Primary Category: 04-ORAL HYGIENE • Type: Merchandise Warehouse • Sub Type: Domestic

Supplier Overview Address **Payment & Banking** Supply Chain <sup>1</sup> Ship Lane Compliance <sup>2</sup> EDI <sup>1</sup> Contact Documents Ownership

▼ Details

**NOTE: If factor company or different pay supplier is linked then Payment Type, EDI Invoicing and Banking Attributes will be inherited from linked pay supplier or factor company on click of Save or Submit**

EDI Invoicing N

EDI Begin Date

**1** Are you a Supplier providing alcohol products to CVS using this new Supplier number? N

**2** Do you want Pcard capability for Payments? N

\* Payment Type CHECK

**3** Are you ACH Capable? N

▼ Payment Terms

Please confirm your choice by double-clicking and selecting "Y" on the CHOICE box against the Term.

If the offered Payment terms are not the agreed payment terms, please reach out to the Category Manager on the CVS team

Clear all filters

Choice	Name	Short Desc	Discount %	Due Days	Net Days
<b>4</b> Y	N75 DAYS	75	0.000	000	75
	2% DSC IN 40 DAYS; N41	24041	2.000	040	41
	.25% DSC IN 64 D; N65	.256465	0.25	64.00	65.00

Number of items: 3

Preferred Payment Terms

▼ Factor Supplier

**5** \* Do you use a Factor Company for processing your payments? N

Save Submit Clone Supplier

## Description / Steps

Completed Required entries:

- 1. Alcohol Supplier** – update
- 2. PCard Capability** – update
- 3. Are you ACH Capable** – review / update
- 4. Payment Terms** – select one
- 5. Factor Company** – review / update

## Tips

Click “Save” to save progress

The next page provides guidance to complete the “Supply Chain” worksheet

# Supplier Self Onboarding

## Supply Chain

Supplier

TEST SUPPLIER SUPPLIER PROFILE • ID: Supplier-17908912  
CVS Reference ID: • Status: Pre-Active • Pay Name: TEST SUPPLIER • PO Name: TEST SUPPLIER • Primary Category: 04-ORAL HYGIENE • Type: Merchandise Warehouse • Sub Type: Domestic

Supplier Overview Address Payment & Banking **Supply Chain** Ship Lane Compliance EDI Contact Documents Ownership

**1** Details

**2** Do you plan to offer Saleable products to CVS?

**3** RX DEA Number   
A DEA (Drug Enforcement Administration) number is a series of numbers assigned to the Suppliers providing items involving Controlled Substances DEA number is solely to be used for tracking controlled substances.

**4** List 1 Chemical DEA#   
A DEA (Drug Enforcement Administration) number is a series of numbers assigned to the Suppliers providing items involving Controlled Substances DEA number is solely to be used for tracking controlled substances. This is specific for List 1 Chemical substances

**5** Damage Disposition Code   
Disposition of Product Instructions.

Damage Payment Type   
How funds will be received

Return Handling Fees

**6** Freight Terms

Please confirm your choice by double-clicking and selecting "Y" on the CHOICE box against the Term.

If the offered Freight terms are not the agreed Freight terms, please reach out to the Category Manager on the CVS team

Clear all filters

Choice	Name
<input type="checkbox"/>	Prepaid

Number of items: 1

Preferred Freight Terms

Save Submit Clone Supplier

## Description / Steps

Required entries:

- 1. Saleable Products** – select Y or N
- 2. Rx DEA Number (if applicable)**
- 3. List 1 Chemical DEA # (if applicable)**
- 4. Damage Disposition Code** – options based on the Damage Payment Type selected
- 5. Damage Payment Type** – select from options
- 6. Freight Terms** – enter “Choice” of Y or leave blank and complete the “Preferred Freight Terms”

## Tips

The next page provides guidance to complete the “Details” section of the “Supply Chain” worksheet


# Supplier Self Onboarding

## Supply Chain - Details

▼ Details

**1** \* Do you plan to offer Saleable products to CVS?

**2** RX DEA Number   
A DEA (Drug Enforcement Administration) number is a series of numbers assigned to the Suppliers providing items involving Controlled Substances DEA number is solely to be used for tracking controlled substances.

**3** List 1 Chemical DEA#    
A DEA (Drug Enforcement Administration) number is a series of numbers assigned to the Suppliers providing items involving Controlled Substances DEA number is solely to be used for tracking controlled substances. This is specific for List 1 Chemical substances

**4** Damage Disposition Code   
Disposition of Product Instructions.

**5** Damage Payment Type   
How funds will be received

Return Handling Fees\*

## Description / Steps

Completed required entries:

- 1. Saleable Products** – select Y or N
- 2. Rx DEA Number (if applicable)**
- 3. List 1 Chemical DEA # (if applicable)**
- 4. Damage Disposition Code** – options based on the Damage Payment Type selected
- 5. Damage Payment Type** – select from options

## Tips

The next page provides guidance to complete the “Freight Terms” section of the “Supply Chain” worksheet

# Supplier Self Onboarding

## Supply Chain – Freight Terms

▼ Freight Terms

Please confirm your choice by double-clicking and selecting "Y" on the CHOICE box against the Term.

If the offered Freight terms are not the agreed Freight terms, please reach out to the Category Manager on the CVS team

Clear all filters

Choice	Name
Y	Prepaid

Number of items: 1

Preferred Freight Terms

## Description / Steps

Completed required entries:

- 1. Freight Terms** – double-click in the “Choice” box and enter your choice of Y or enter “Preferred Freight Terms”. Please enter a choice only if Supplier accepts the offered Freight term.
- 2. Preferred Freight Terms (Not Required)** – If Supplier would like to request an alternate freight term, supplier may enter a comment requesting alternate freight terms for CVS Health to consider

## Tips

If only one Freight Term is presented a selection of Y or N is still required

The next page shows the completed “Supply Chain” worksheet

# Supplier Self Onboarding – Supply Chain Completed

## Supply Chain - Complete

Supplier

TEST SUPPLIER SUPPLIER PROFILE • ID: Supplier-17908912  
CVS Reference ID: • Status: Pre-Active • Pay Name: TEST SUPPLIER • PO Name: TEST SUPPLIER • Primary Category: 04-ORAL HYGIENE • Type: Merchandise Warehouse • Sub Type: Domestic

Supplier Overview Address Payment & Banking **Supply Chain** Ship Lane Compliance <sup>4</sup> EDI <sup>1</sup> Contact Documents Ownership

**1** Details

**2** Do you plan to offer Saleable products to CVS?

**3** RX DEA Number

A DEA (Drug Enforcement Administration) number is a series of numbers assigned to the Suppliers providing items involving Controlled Substances DEA number is solely to be used for tracking controlled substances.

**4** List 1 Chemical DEA#

A DEA (Drug Enforcement Administration) number is a series of numbers assigned to the Suppliers providing items involving Controlled Substances DEA number is solely to be used for tracking controlled substances. This is specific for List 1 Chemical substances

**5** Damage Disposition Code

Disposition of Product Instructions.

Damage Payment Type

How funds will be received

Return Handling Fees<sup>fx</sup>

**6** Freight Terms

Please confirm your choice by double-clicking and selecting "Y" on the CHOICE box against the Term.

If the offered Freight terms are not the agreed Freight terms, please reach out to the Category Manager on the CVS team

Clear all filters

Choice	Name
<input type="text" value="Y"/>	Prepaid

Number of items: 1

Preferred Freight Terms

Save Submit Clone Supplier

## Description / Steps

Completed required entries:

- 1. Saleable Products**
- 2. Rx DEA Number**
- 3. List 1 Chemical DEA #**
- 4. Damage Disposition Code**
- 5. Damage Payment Type**
- 6. Freight Terms**

## Tips

Click "Save" to save progress

The next page provides guidance to complete the "Ship Lane" worksheet

# Supplier Self Onboarding

## Ship Lane

Supplier

TEST SUPPLIER SUPPLIER PROFILE • ID: Supplier-17908912  
 CVS Reference ID: • Status: Pre-Active • Pay Name: TEST SUPPLIER • PO Name: TEST SUPPLIER • Primary Category: 04-ORAL HYGIENE • Type: Merchandise Warehouse • Sub Type: Domestic

Supplier Overview Address Payment & Banking Supply Chain **Ship Lane** Compliance <sup>4</sup> EDI <sup>1</sup> Contact Documents Ownership

Save **1** Clear all filters **2** Create New Ship Lane Remove Reference Populate all DC's **3**

Address	Warehouse	Freight Term	Minimum Dollars	Minimum Unit	Minimum Unit Multiple	Lead Time(days)	Order Multiple	Permit #	Port Of Origin	CVS Warehouse
No existing records										

Number of items: 0; Selected items: 0

## Description / Steps

The “Ship Lane” worksheet allows the new supplier to indicate which CVS Warehouses will be shipped.

Required field entries:

1. Address (where the supplier ships from)
2. Warehouse (CVS Distribution center)
3. Lead Time (days) - in calendar days

## Tips

The next page provides continued guidance to complete the “Ship Lane” worksheet



# Supplier Self Onboarding – Add Ship From Address

## Ship Lane

Supplier

TEST SUPPLIER SUPPLIER PROFILE • ID: Supplier-17908912  
 CVS Reference ID: • Status: Pre-Active • Pay Name: TEST SUPPLIER • PO Name: TEST SUPPLIER • Primary Category: 04-ORAL HYGIENE • Type: Merchandise Warehouse • Sub Type: Domestic

Supplier Overview Address Payment & Banking Supply Chain **Ship Lane** Compliance <sup>4</sup> EDI <sup>1</sup> Contact Documents Ownership

Select all Clear all filters **1** Create New Ship Lane Remove Reference Populate all DC's

Address	Warehouse	Freight Term	Minimum Dollars	Minimum Unit	Minimum Unit Multiple	Lead Time(days)	Order Multiple	Permit #	Port Of Origin	CVS Warehouse
999										
999 Main Street, Anytown, RI (Address-17908927)										
999 Main Street, Anytown, RI (Address-17908927)										

**2** **3**

## Description / Steps

1. Click "Create New Ship Lane"
2. Double-click in "Address" field
  - Begin typing an address that was previously created and added to the Ship From address type
3. Select Address that was found

## Tips

The next page provides guidance to add a "Warehouse" to complete the "Ship Lane" worksheet

# Supplier Self Onboarding – Add Warehouse

## Ship Lane

Supplier

TEST SUPPLIER SUPPLIER PROFILE • ID: Supplier-17908912  
 CVS Reference ID: • Status: Pre-Active • Pay Name: TEST SUPPLIER • PO Name: TEST SUPPLIER • Primary Category: 04-ORAL HYGIENE • Type: Merchandise Warehouse • Sub Type: Domestic

Supplier Overview Address Payment & Banking Supply Chain **Ship Lane** Compliance <sup>4</sup> EDI <sup>1</sup> Contact Documents Ownership

Select all Clear all filters Create New Ship Lane Remove Reference Populate all DC's

\*Address **1** \*Warehouse **2**

999 Main Street, Anytown, RI

Select Node(s)

Browse Search

**3** Warehouse Root (Warehouse\_Root)

**4** Bessemer, AL (Warehouse-141792)

Chemung, NY (Warehouse-141806)

Conroe, TX (Warehouse-141798)

Ennis, TX (Warehouse-141793)

Fredericksburg, VA (Warehouse-141791)

Honolulu, HI (Warehouse-141804)

Indianapolis, IN (Warehouse-141799)

Kansas City, MO (Warehouse-141808)

Knoxville, TN (Warehouse-141795)

La Habra, CA (Warehouse-141801)

Lumberton, NJ (Warehouse-141789)

Medley, FL (Warehouse-141809)

North Augusta, SC (Warehouse-141796)

Novi, MI (Warehouse-141800)

Ontario, CA (Warehouse-141805)

**5**

Cancel OK

## Description / Steps

1. Double-click in “Warehouse” field
2. Click the “tree” icon within the field
3. Expand “Warehouse Root”
4. Select a CVS distribution center
5. Click “OK” to add the location

## Tips

The next page provides guidance to add “Lead Time (days)” to complete the “Ship Lane” worksheet

# Supplier Self Onboarding – Add Lead Time

## Ship Lane

Supplier

TEST SUPPLIER SUPPLIER PROFILE • ID: Supplier-17908912  
 CVS Reference ID: • Status: Pre-Active • Pay Name: TEST SUPPLIER • PO Name: TEST SUPPLIER • Primary Category: 04-ORAL HYGIENE • Type: Merchandise Warehouse • Sub Type: Domestic

Supplier Overview Address Payment & Banking Supply Chain **Ship Lane** Compliance <sup>4</sup> EDI <sup>1</sup> Contact Documents Ownership

Select all  Clear all filters

	*Address	*Warehouse	Freight Term	Minimum Dollars	Minimum Unit	Minimum Unit Multiple	Lead Time(day)	Order Multiple	Permit #	Port Of Origin	CVS Warehouse
<input type="checkbox"/>	999 Main Street, Anytown, RI	Bessemer, AL					12				

## Description / Steps

1. Double-click in “Lead Time” field
2. Type in the number of calendar days the supplier requires to have the product arrive at the CVS warehouse from the day that the purchase order is received

## Tips

*If the supplier will be shipping to more than one warehouse, the next page will show how to add multiple warehouses*

# Supplier Self Onboarding – Add Additional Warehouses

## Ship Lane

Supplier

TEST SUPPLIER SUPPLIER PROFILE • ID: Supplier-17908912  
CVS Reference ID: • Status: Pre-Active • Pay Name: TEST SUPPLIER • PO Name: TEST SUPPLIER • Primary Category: 04-ORAL HYGIENE • Type: Merchandise Warehouse • Sub Type: Domestic

Supplier Overview Address Payment & Banking Supply Chain **Ship Lane** Compliance <sup>4</sup> EDI <sup>1</sup> Contact Documents Ownership

Clear all Clear all filters Create New Ship Lane Remove Reference **Populate all DC's**

**1**

*Address	*Warehouse	Freight Term	Minimum Dollars	Minimum Unit
<input checked="" type="checkbox"/> 999 Main Street, Anytown, RI	Bessemer, AL			

**2**

Supplier

TEST SUPPLIER SUPPLIER PROFILE • ID: Supplier-17908912  
CVS Reference ID: • Status: Pre-Active • Pay Name: TEST SUPPLIER • PO Name: TEST SUPPLIER • Primary Category: 04-ORAL HYGIENE • Type: Merchandise Warehouse • Sub Type: Domestic

Supplier Overview Address Payment & Banking Supply Chain **Ship Lane** Compliance <sup>4</sup> EDI <sup>1</sup> Contact Documents Ownership

Select all Clear all filters Create New Ship Lane Remove Reference Populate all DC's

*Address	*Warehouse	Freight Term	Minimum Dollars	Minimum Unit	Minimum Unit Multiple	Lead Time(days)
<input type="checkbox"/> 999 Main Street, Anytown, RI	Bessemer, AL					12
<input type="checkbox"/> 999 Main Street, Anytown, RI	Chemung, NY					12
<input type="checkbox"/> 999 Main Street, Anytown, RI	Conroe, TX					12
<input type="checkbox"/> 999 Main Street, Anytown, RI	Ennis, TX					12
<input type="checkbox"/> 999 Main Street, Anytown, RI	Fredericksburg, VA					12
<input type="checkbox"/> 999 Main Street, Anytown, RI	Honolulu, HI					12
<input type="checkbox"/> 999 Main Street, Anytown, RI	Indianapolis, IN					12
<input type="checkbox"/> 999 Main Street, Anytown, RI	Kansas City, MO					12
<input type="checkbox"/> 999 Main Street, Anytown, RI	Knoxville, TN					12
<input type="checkbox"/> 999 Main Street, Anytown, RI	La Habra, CA					12
<input type="checkbox"/> 999 Main Street, Anytown, RI	Lumberton, NJ					12
<input type="checkbox"/> 999 Main Street, Anytown, RI	Medley, FL					12
<input type="checkbox"/> 999 Main Street, Anytown, RI	North Augusta, SC					12
<input type="checkbox"/> 999 Main Street, Anytown, RI	Novi, MI					12
<input type="checkbox"/> 999 Main Street, Anytown, RI	Orlando, FL					12
<input type="checkbox"/> 999 Main Street, Anytown, RI	Patterson, CA					12

Number of items: 21; Selected items: 0

Save Submit Clone Supplier

**3**

## Description / Steps

1. Select the check box at the beginning of the record
  2. Click “Populate all DC’s”
  3. All warehouses will be populated with the same information as entered for the first warehouse. Click “Save”
- If the ship from address or lead time is different by warehouse, enter the updated information for each warehouse

## Tips

The next page shows a completed “Ship Lane” worksheet

# Supplier Self Onboarding – Completed

## Ship Lane

Supplier

TEST SUPPLIER SUPPLIER PROFILE • ID: Supplier-17908912  
 CVS Reference ID: • Status: Pre-Active • Pay Name: TEST SUPPLIER • PO Name: TEST SUPPLIER • Primary Category: 04-ORAL HYGIENE • Type: Merchandise Warehouse • Sub Type: Domestic

Supplier Overview Address Payment & Banking Supply Chain **Ship Lane** Compliance <sup>4</sup> EDI <sup>1</sup> Contact Documents Ownership

Select all  Clear all filters [▶ Create New Ship Lane](#) [⊗ Remove Reference](#) [▶ Populate all DC's](#)

<input type="checkbox"/>	*Address	*Warehouse	Freight Term	Minimum Dollars	Minimum Unit	Minimum Unit Multiple	Lead Time(days)	Order Multiple	Permit #	Port Of Origin	CVS Warehouse
<input type="checkbox"/>	999 Main Street, Anytown, RI	Bessemer, AL					12				AL <a href="#">fx</a>
<input type="checkbox"/>	999 Main Street, Anytown, RI	Chemung, NY					12				YK <a href="#">fx</a>
<input type="checkbox"/>	999 Main Street, Anytown, RI	Conroe, TX					12				CR <a href="#">fx</a>
<input type="checkbox"/>	999 Main Street, Anytown, RI	Ennis, TX					12				EN <a href="#">fx</a>
<input type="checkbox"/>	999 Main Street, Anytown, RI	Fredericksburg, VA					12				MA <a href="#">fx</a>
<input type="checkbox"/>	999 Main Street, Anytown, RI	Honolulu, HI					12				HI <a href="#">fx</a>
<input type="checkbox"/>	999 Main Street, Anytown, RI	Indianapolis, IN					12				IN <a href="#">fx</a>
<input type="checkbox"/>	999 Main Street, Anytown, RI	Kansas City, MO					12				KC <a href="#">fx</a>
<input type="checkbox"/>	999 Main Street, Anytown, RI	Knoxville, TN					12				TN <a href="#">fx</a>
<input type="checkbox"/>	999 Main Street, Anytown, RI	La Habra, CA					12				LA <a href="#">fx</a>
<input type="checkbox"/>	999 Main Street, Anytown, RI	Lumberton, NJ					12				NJ <a href="#">fx</a>
<input type="checkbox"/>	999 Main Street, Anytown, RI	Medley, FL					12				XM <a href="#">fx</a>
<input type="checkbox"/>	999 Main Street, Anytown, RI	North Augusta, SC					12				SC <a href="#">fx</a>
<input type="checkbox"/>	999 Main Street, Anytown, RI	Novi, MI					12				DT <a href="#">fx</a>
<input type="checkbox"/>	999 Main Street, Anytown, RI	Orlando, FL					12				OR <a href="#">fx</a>
<input type="checkbox"/>	999 Main Street, Anytown, RI	Patterson, CA					12				UC <a href="#">fx</a>

Number of items: 21; Selected items: 0

[▶ Save](#) [Submit](#) [▶ Clone Supplier](#)

## Description / Steps

Required entries completed for all warehouses

## Tips

If you want to remove a record, select the check box at the beginning of the record and click "Remove Reference"

Click "Save" when ready to move to next worksheet

The next page will provide guidance on the "Compliance" worksheet.

# Supplier Self Onboarding

## Compliance

## Description / Steps

Supplier

**TEST SUPPLIER** SUPPLIER PROFILE • ID: Supplier-17908912  
 CVS Reference ID : • Status : Pre-Active • Pay Name : TEST SUPPLIER • PO Name : TEST SUPPLIER • Primary Category : 04-ORAL HYGIENE • Type : Merchandise Warehouse • Sub Type : Domestic

Supplier Overview Address Payment & Banking Supply Chain Ship Lane **Compliance** EDI Contact Documents Ownership

▼ Details

1 \* Is your Employer Tax Identification Number also an individual's Social Security Number ?

2 \* Tax Name TEST SUPPLIER  
 Tax Name if different from the Vendor Name

3 \* Do you service CVS Hawaii stores?

4 \* Do you service CVS Puerto Rico stores?

5 \* Are you a Broker?

Please enter Broker information in the contact tab if you choose "Are you a Broker?" as Y

6 Diverse Certification  
 Women Owned, Minority Owned etc.

7 Puerto Rico Waiver Certificate N

Are you a Manufacturer? N

Save Submit Clone Supplier

Required entries:

1. **Tax ID # also Social Security #** – select Y or N
2. **Tax Name** – review / update
3. **Hawaii Supplier?** – select Y or N
4. **Puerto Rico Supplier?** – select Y or N
5. **Are you a Broker?** – select Y or N
6. **Diverse Certification** – leave blank unless you are a certified diverse supplier
7. **Puerto Rico Waiver Certificate** – review / update

## Tips

The next page will provide continued guidance on completing the "Compliance" worksheet

# Supplier Self Onboarding - Completed

## Compliance

**Supplier**  
**TEST SUPPLIER** SUPPLIER PROFILE • ID: Supplier-17908912  
 CVS Reference ID: • Status: Pre-Active • Pay Name: TEST SUPPLIER • PO Name: TEST SUPPLIER • Primary Category: 04-ORAL HYGIENE • Type: Merchandise Warehouse • Sub Type: Domestic

Supplier Overview Address Payment & Banking Supply Chain Ship Lane **Compliance** EDI <sup>1</sup> Contact Documents Ownership

▼ Details

**1** \* Is your Employer Tax Identification Number also an individual's Social Security Number?

Please enter your Tax Identification Number (TIN)

TIN#

The format should be equivalent to 00-0000000

**2** \* Tax Name

Tax Name if different from the Vendor Name

**3** \* Do you service CVS Hawaii stores?

**4** \* Do you service CVS Puerto Rico stores?

**5** \* Are you a Broker?

Please enter Broker information in the contact tab if you choose "Are you a Broker?" as Y

**6** Diverse Certification

Women Owned, Minority Owned etc.

**7** Puerto Rico Waiver Certificate

Are you a Manufacturer?

## Description / Steps

Completed Required entries:

- 1. Tax ID # also Social Security #** – If “N” enter TIN#
- 2. Tax Name** – review / update
- 3. Hawaii Supplier?** – select Y or N
- 4. Puerto Rico Supplier?** – select Y or N
- 5. Are you a Broker?** – select Y or N
- 6. Diverse Certification** – select Y or N
- 7. Puerto Rico Waiver Certificate** – review / update

## Tips

Click “Save”

The next page will provide guidance on completing the “EDI” worksheet

# Supplier Self Onboarding – EDI Capable = “N”

## EDI

**Supplier**  
**TEST SUPPLIER** SUPPLIER PROFILE • ID: Supplier-17908912  
 CVS Reference ID: • Status: Pre-Active • Pay Name: TEST SUPPLIER • PO Name: TEST SUPPLIER • Primary Category: 04-ORAL HYGIENE • Type: Merchandise Warehouse • Sub Type: Domestic

Supplier Overview Address Payment & Banking Supply Chain Ship Lane Compliance **EDI** Contact Documents Ownership

▼ Details

**NOTE : Please enter EDI TRANSMISSION CONTACT responsibility in Contact tab, if you choose “Are you EDI Transmission capable?” as Y**

\* Are you EDI Transmission capable?

▲ Are you EDI Transmission capable? is mandatory  
 Indicates if supplier has the ability to trade documents via EDI

▼ Details

**NOTE : Please enter EDI TRANSMISSION CONTACT responsibility, if you choose “Are you EDI Transmission capable?” as Y**

\* Are you EDI Transmission capable?

Indicates if supplier has the ability to trade documents via EDI

EDI-enablement is a critical component of doing business with CVS Health. If you do not have internal EDI capabilities, we strongly suggest that you work with an appropriate EDI provider to send and receive Purchase Orders, Invoices, and other business transactions. If you do not have EDI, you will automatically be placed on a 30-Day Trial Account with Graceblood, LLC an unaffiliated third-party EDI provider. Please download the introductory letter for more information.

▶ Save Submit ▶ Clone Supplier

## Description / Steps

*Required entries – conditional based on the answer to “Are you EDI Transmission Capable”?*

- If the supplier is not EDI Transmission capable, supplier will be directed to find an EDI provider or use a 30-Day Trial Account with Graceblood, LLC.*

## Tips

*Click “Save”*

*The next page will provide guidance on completing the “EDI” worksheet for suppliers that are EDI Capable*



# Supplier Self Onboarding – EDI Capable = “Y” using a VAN

EDI

**Supplier**  
**TEST SUPPLIER** SUPPLIER PROFILE • ID: Supplier-17908912  
 CVS Reference ID: • Status: Pre-Active • Pay Name: TEST SUPPLIER • PO Name: TEST SUPPLIER • Primary Category: 04-ORAL HYGIENE • Type: Merchandise Warehouse • Sub Type: Domestic

Supplier Overview   Address   Payment & Banking   Supply Chain   Ship Lane   Compliance   **EDI**   Contact   Documents   Ownership

▼ Details

**NOTE : Please enter EDI TRANSMISSION CONTACT responsibility in Contact tab, if you choose “Are you EDI Transmission capable?” as Y**

1 \* Are you EDI Transmission capable?   
Indicates if supplier has the ability to trade documents via EDI

2 EDI ISA/GS ID   
It is imperative that you engage your EDI and data transmission professionals for proper completion of the following screens. Any incorrect information may result in a delay in your onboarding process.  
ISA ID - provides the identity of who is transmitting the documents

3 EDI ISA Qualifier   
Associated with the ISA ID - prefix that is part of the EDI ID

4 EDI Communication Protocol

5 Vendor Value Added Network (VAN)   
VAN - where the suppliers mailbox resides

▶ Save Submit ▶ Clone Supplier

## Description / Steps

*Required entries – conditional based on the answer to “Are you EDI Transmission Capable?”*

1. *If the supplier is EDI Transmission capable, additional information is required*
2. *EDI ISA/GS ID*
3. *EDI ISA Qualifier*
4. *EDI Communication Protocol*
5. *Vendor Value Added Network*

## Tips

*Click “Save”*

*The next page will provide guidance on completing the “EDI” worksheet for suppliers that use SFTP*

# Supplier Self Onboarding – EDI Capable = “Y” using SFTP

## EDI

EDI Communication Protocol

SFTP

CVS Health prefers SSH Key Authentication, Password Authentication considered on an exception basis. CVS EDI will

### EDI SFTP PRODUCTION ENVIRONMENT

SFTP PROD File Locations

prod/file\_loc

Ex: <root>, /<sub-directory> , other

SFTP PROD Server Host Name / IP Address

b2b-prod.testsupplier.com

EDI details if Communication Protocol is SFTP

SFTP PROD Server Login Username

CVS\_B2B

SFTP PROD Server Port 22

22

CVSHealth requires SFTP over standard port 22, non-standard ports considered on an exception basis

You will be contacted by CVS EDI for SSH Key exchange and further setup information.

### EDI SFTP TEST ENVIRONMENT

SFTP TEST File Locations

test/file\_loc

Ex: <root>, /<sub-directory> , other

SFTP TEST Server Host Name / IP Address

b2b-test.testsupplier.com

EDI details if Communication Protocol is SFTP

SFTP TEST Server Login Username

CVS\_B2B

SFTP TEST Server Port 22

22

CVSHealth requires SFTP over standard port 22, non-standard ports considered on an exception basis

## Description / Steps

*If the supplier is using SFTP as the EDI Communication Protocol*

1. SFTP PROD File Locations
2. SFTP PROD Server Host Name / IP
3. SFTP PROD Server Login Username
4. SFTP PROD Server Port 22
5. SFTP Test File Locations
6. SFTP Test Server Host Name / IP
7. SFTP TEST Server Login Username
8. SFTP Test Server Port 22

## Tips

Click “Save”

The next page will provide guidance on completing the “EDI” worksheet for suppliers that use AS2

# Supplier Self Onboarding – EDI Capable = “Y” using AS2

EDI	
<b>A</b>	EDI Communication Protocol <input type="text" value="AS2"/>
CVS Health EDI will exchange digital certificates and encryption information with your provided transmission team contact	
<b>B</b>	AS2 Identifier Prod <input type="text" value="TESTSUPPLIER_B2B_PROD"/>
<b>C</b>	Max Retries Prod <input type="text" value="5"/>
<b>D</b>	Retry Interval Prod <input type="text" value="300"/>
<b>E</b>	URI Prod <input type="text" value="/as2"/>
<b>F</b>	URL and Port Prod <input type="text" value="https://b2b-prod.yourcompany.com"/>
<b>G</b>	MDN Receipt Prod <input type="text" value="Y"/>
EDI AS2 related attributes (Message Disposition Notification)  CVS Health EDI requests Message Disposition Notifications (MDN) for data transmitted over AS2.  You will be contacted by CVS EDI for digital certificate exchange and further AS2 setup information.	
<b>H</b>	AS2 Identifier Test <input type="text" value="TESTSUPPLIER_B2B_TEST"/>
<b>I</b>	Max Retries Test <input type="text" value="5"/>
<b>J</b>	Retry Interval Test <input type="text" value="300"/>
<b>K</b>	URI Test <input type="text" value="/as2"/>
<b>L</b>	URL and Port Test <input type="text" value="https://b2b-test.yourcompany.com"/>
<b>M</b>	MDN Receipt Test <input type="text" value="Y"/>
EDI AS2 related attributes (Message Disposition Notification)  CVS Health EDI requests Message Disposition Notifications (MDN) for data transmitted over AS2.	
<input type="button" value="Save"/> <input type="button" value="Submit"/> <input type="button" value="Clone Supplier"/>	

## Description / Steps

*If the supplier is using AS2 as the EDI Communication Protocol*

- A. EDI Communication Protocol
- B. AS2 Identifier Prod
- C. Max Retries Prod
- D. Retry Interval Prod
- E. URL Prod
- F. URL and Port Prod
- G. MDN Receipt Prod
- H. AS2 Identifier Test
- I. Max Retries Test
- J. Retry Interval Test
- K. URL Test
- L. URL and Port Test
- M. MDN Receipt Test

## Tips

Click “Save”

Guidance on completing the “Contact” tab begins on the next page

# Supplier Self Onboarding

## Contact

Supplier

TEST SUPPLIER SUPPLIER PROFILE • ID: Supplier-17908912  
CVS Reference ID: • Status: Pre-Active • Pay Name: TEST SUPPLIER • PO Name: TEST SUPPLIER • Primary Category: 04-ORAL HYGIENE • Type: Merchandise Warehouse • Sub Type: Domestic

Supplier Overview Address Payment & Banking Supply Chain Ship Lane Compliance EDI **Contact** Documents Ownership

**NOTE: Warehouse NFR, Warehouse and DSD Suppliers: SALES REPRESENTATIVE, A/R CONTACT & INVENTORY CONTACTS are required to be filled. If EDI Capable, EDI TRANSMISSION CONTACT is required to be filled.**

Select all  Clear all filters [▶ Create New Contact](#) [+ Add Existing Contact](#) [- Remove Contact](#)

◀	*Responsibility	*First Name	*Last Name	M.I	*Primary Phone Number	*Email	Cellphone	Fax	Extension	Primary Contact	Name	▶
<input type="checkbox"/>	SALES REPRESENTATIVE	Test	Supplier		401-999-9999	Test_Supplier@Test.com				Y	Test Supplier	<a href="#">✕</a>

Number of items: 1; Selected items: 0

[▶ Save](#) [Submit](#) [▶ Clone Supplier](#)

## Description / Steps

*Required Contacts (Responsibility):*

- *Sales Representative*
- *A/R Contact*
- *Inventory Contacts*
- *EDI Transmission Contact (if supplier is EDI Capable)*

## Tips

*The Sales Representative contact is typically used when CVS invites a new supplier to self onboard, if it is not present, it must be added*

*The next page shows the steps to create a new contact*

# Supplier Self Onboarding – Create New Contact

## Contact

Supplier

TEST SUPPLIER SUPPLIER PROFILE • ID: Supplier-17908912  
CVS Reference ID: • Status: Pre-Active • Pay Name: TEST SUPPLIER • PO Name: TEST SUPPLIER • Primary Category: 04-ORAL HYGIENE • Type: Merchandise Warehouse • Sub Type: Domestic

Supplier Overview Address Payment & Banking Supply Chain Ship Lane Compliance EDI **Contact** Documents Ownership

NOTE: Warehouse NFR, Warehouse and Suppliers: SALES REPRESENTATIVE, A/R CONTACT & INVENTORY CONTACTS are required to be filled. If EDI Capable, EDI TRANSMISSION CONTACT is required to be filled.

Select all Clear all filters Create New Contact Add Existing Contact Remove Contact

*Responsibility	*First Name	*Last Name	M.I	*Primary Phone Number	*Email	Cellphone	Fax	Extension	Primary Contact	Name
<input type="checkbox"/>									Y	
<input type="checkbox"/>	SALES REPRESENTATIVE	Test	Supplier	401-999-9999	Test_Supplier@Test.com				Y	Test Supplier

Value editor - 1 item selected

Number of items: 2; Selected items: 0

A/R CONTACT

Value editor - 1 item selected

A/R CONTACT

Add value

Cancel Save

Save Submit Clone Supplier

## Description / Steps

1. Click “Create New Contact”
2. Double-click in the “Responsibility” field and select the type of contact
3. Click “Save”

• Enter required fields:

- First Name,
- Last Name,
- Primary Phone Number
- Email

## Tips

The next page shows the steps to Add Multiple Responsibilities to a contact

# Supplier Self Onboarding – Add multiple responsibilities

## Contact

Supplier

TEST SUPPLIER SUPPLIER PROFILE • ID: Supplier-17908912  
CVS Reference ID: • Status: Pre-Active • Pay Name: TEST SUPPLIER • PO Name: TEST SUPPLIER • Primary Category: 04-ORAL HYGIENE • Type: Merchandise Warehouse • Sub Type: Domestic

Supplier Overview Address Payment & Banking Supply Chain Ship Lane Compliance EDI **Contact** Documents Ownership

**NOTE: Warehouse NFR, Warehouse and DSD Suppliers: SALES REPRESENTATIVE, A/R CONTACT & INVENTORY CONTACTS are required to be filled. If EDI Capable, EDI TRANSMISSION CONTACT is required to be filled.**

Select all Clear all filters Create New Contact Add Existing Contact Remove Contact

Responsibility	First Name	Last Name	M.I.	Primary Phone Number	Email	Cellphone	Fax	Extension	Primary Contact	Name
<input checked="" type="checkbox"/> A/R CONTACT	Test	Account		401-999-8888	Test_Account@Test.com				Y	Test Account
<input type="checkbox"/> SALES REPRESENTATIVE	Test	Supplier		401-999-9999	Test_Supplier@Test.com				Y	Test Supplier

Number of items: 2; Selected items: 0

Value editor - 1 item selected

A/R CONTACT ✕

INVENTORY ✕

Add value Sequence values...

Cancel Save

Save Submit Clone Supplier

## Description / Steps

*There exists the ability to add multiple responsibilities to the same contact*

1. Double-click the “Responsibility” of the contact to add
2. Click “Add Value”
3. Select value from the dropdown
4. Click “Save”

## Tips

*The next page shows the steps to complete the “Documents” worksheet*

# Supplier Self Onboarding

## Documents

**Supplier**

**TEST SUPPLIER** SUPPLIER PROFILE • ID: Supplier-17908912  
 CVS Reference ID: • Status: Pre-Active • Pay Name: TEST SUPPLIER • PO Name: TEST SUPPLIER • Primary Category: 04-ORAL HYGIENE • Type: Merchandise Warehouse • Sub Type: Domestic

Supplier Overview   Address   Payment & Banking   Supply Chain   Ship Lane   Compliance   EDI   Contact   **Documents**   Ownership

▼ Required Documents

Required Documents	
	Certificate Of Insurance
	W-8 Or W-9
	Company Letter Head

▼ Documents

- Additional Documents +
- Bank Letter Confirming Account Number +
- Certificate Of Insurance +
- Company Letter Head +
- Evidence Of FCPA Compliance +
- Factor & Supplier Relationship Letter +
- Indemnification Agreement +
- Packing List Sample +
- PR Waiver +
- Product Liability +
- QA Agreement +
- Signed MSA +
- Signed NDA +
- Store Brand Agreement +
- Supplier Contract/Purchase Agreement +
- Vendor Profile Letter +
- W-8 Or W-9 +

▶ Save   Submit   ▶ Clone Supplier

## Description / Steps

The “Documents” worksheet identifies required documents that must be uploaded to CVS to activate a new supplier.

The required documents are identified by Category Management and listed in the “Required Documents” section on the left

## Tips

The next page will provide guidance on uploading required documents

# Supplier Self Onboarding – upload required documents

**Documents**

**Supplier**  
**TEST SUPPLIER** SUPPLIER PROFILE • ID: Supplier-17908912  
 CVS Reference ID: • Status: Pre-Active • Pay Name: TEST SUPPLIER • PO Name: TEST SUPPLIER • Primary Category: 04-ORAL HYGIENE • Type: Merchandise Warehouse • Sub Type: Domestic

Supplier Overview   Address   Payment & Banking   Supply Chain   Ship Lane   Compliance   EDI   Contact   **Documents**   Ownership

▼ Required Documents

Required Documents	Certificate Of Insurance
	W-8 Or W-9
	Company Letter Head

▼ Documents

- Additional Documents +
- Bank Letter Confirming Account Number +
- Certificate Of Insurance +
- Company Letter Head +
- Evidence Of FCPA +
- Factor & Supplier +
- Indemnification Agreement +
- Packing List Sample +
- PR Waiver +
- Product Liability +

Select file

Classification Supplier-7075 3 assets

File Choose File No file chosen

Cancel
Upload

▶ Save
▶ Submit
▶ Clone Supplier

## Description / Steps

1. For each required document, one at a time, click the “plus” icon
2. Select “Upload and insert asset” option
3. Click the “Choose File” option

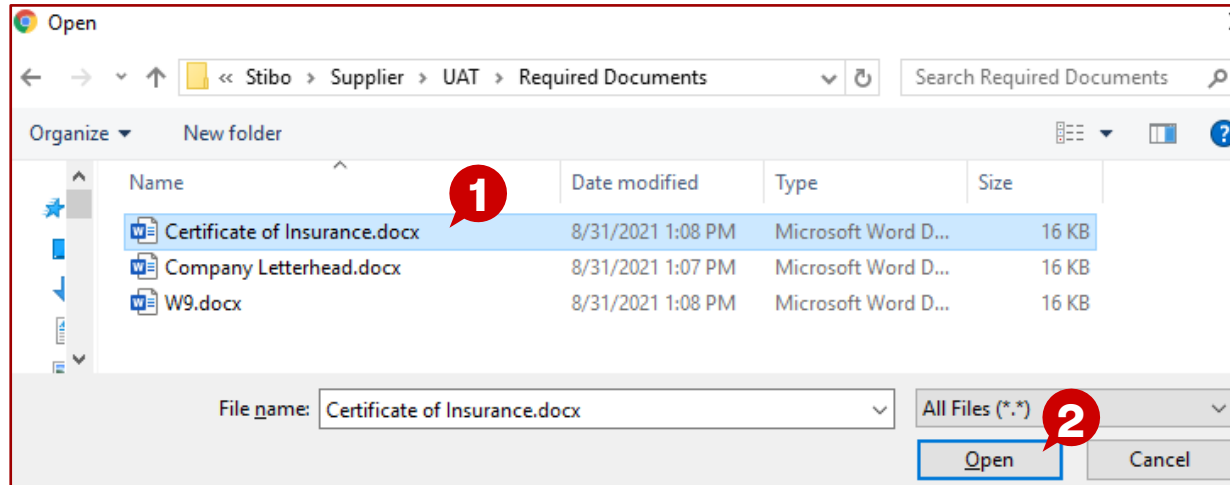
## Tips

The next page will provide continued guidance on uploading required documents



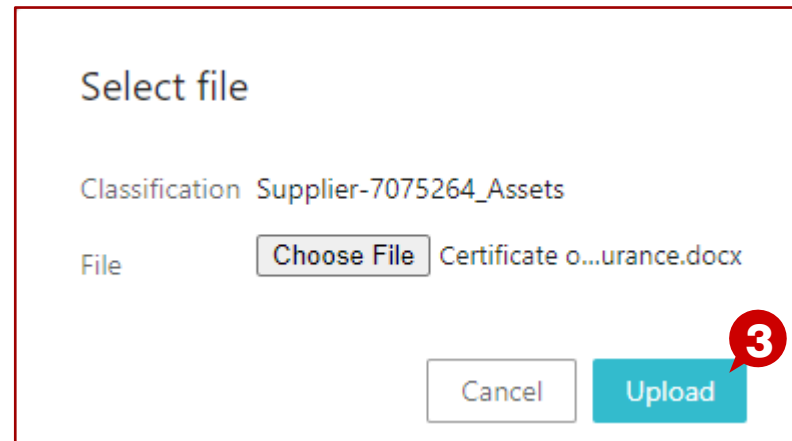
# Supplier Self Onboarding – upload required documents

## Documents



## Description / Steps

1. Browse for the document on your local computer or company's network to upload and select it
2. Click the "Open" option
3. Click "Upload"



## Tips

The next page will provide guidance on the "Ownership" worksheet

# Supplier Self Onboarding

## Ownership

Supplier

TEST SUPPLIER SUPPLIER PROFILE • ID: Supplier-17908912  
 CVS Reference ID: • Status: Pre-Active • Pay Name: TEST SUPPLIER • PO Name: TEST SUPPLIER • Primary Category: 04-ORAL HYGIENE • Type: Merchandise Warehouse • Sub Type: Domestic

Supplier Overview Address Payment & Banking Supply Chain Ship Lane Compliance EDI Contact Documents **Ownership**

▼ Buyer

Clear all filters

Code	Name	DMM	VPM
1	THOMAS SULLIVAN	STEVE DIVIRGIO	MALY BERNSTEIN

Number of items: 1

▶ Save Submit ▶ Clone Supplier

## Description / Steps

The “Ownership” worksheet is for reference only and will provide the names of the:

- Category Manager
- Divisional Merchandise Manager
- Vice President Merchandise Manager

## Tips

The next page will provide guidance to “Submit” the information for CVS Health’s review

# Supplier Self Onboarding – “Submit”

## SUBMIT

Supplier

TEST SUPPLIER SUPPLIER PROFILE • ID: Supplier-17908912  
 CVS Reference ID: • Status: Pre-Active • Pay Name: TEST SUPPLIER • PO Name: TEST SUPPLIER • Primary Category: 04-ORAL HYGIENE • Type: Merchandise Warehouse • Sub Type: Domestic

Supplier Overview Address Payment & Banking Supply Chain Ship Lane Compliance EDI Contact Documents **Ownership**

▼ Buyer

Clear all filters

Code	Name	DMM	VPMM
1	THOMAS SULLIVAN	STEVE DIVIRGILIO	MALY BERNSTEIN

Number of items: 1

Have You Reviewed all the information after clicking the save button ?

Submit message

Cancel OK

1

2

Save Submit Clone Supplier

## Description / Steps

When all required entries have been completed:

1. Click “Submit”
2. Click “OK”

## Tips

The next page will provide guidance if information was not provided

# Supplier Self Onboarding – Missing one piece of information

## SUBMIT

Supplier-17908912 • Test Supplier • English US • Main

Supplier

**TEST SUPPLIER** SUPPLIER PROFILE • ID: Supplier-17908912  
CVS Reference ID: • Status: Pre-Active • Pay Name: TEST SUPPLIER • PO Name: TEST SUPPLIER

Supplier Overview Address Payment & Banking **Supply Chain** Ship Lane Compliance EDI Contact Documents Ownership

**1** TEST SUPPLIER  
Submit error: Reference Remit/Pay Address is mandatory for TEST SUPPLIER

▼ Details

\* Do you plan to offer Saleable products to CVS?

RX DEA Number

List 1 Chemical DEA#

Damage Disposition Code

Damage Payment Type

Return Handling Fees<sup>⚡</sup> 0.36

▼ Freight Terms

Please confirm your choice by double-clicking and selecting "Y" on the CHOICE box against the Term.

If the offered Freight terms are not the agreed Freight terms, please reach out to the Category Manager on the CVS team

Clear all filters

Choice	Name
<input checked="" type="checkbox"/>	Prepaid

Number of items: 1

Preferred Freight Terms

Save Submit Clone Supplier

## Description / Steps

*If information was not provided prior to clicking "Submit" you will be alerted to the information to provide*

- If only one piece of information is missing it will indicate the requirement on the main screen*

## Tips

*The next page will provide guidance on missing multiple pieces of information*

# Supplier Self Onboarding – Missing multiple information

## SUBMIT

The screenshot shows the 'Supplier Self Onboarding' interface. At the top, there is a 'Supplier' profile for 'TEST SUPPLIER' with ID: Supplier-17908912. A warning message 'Warning - cannot be submitted' is displayed, with a 'Click for details' link. A notification bell icon in the top right corner shows 3 alerts. A table below lists the buyer information:

Code	Name	DMM
1	THOMAS SULLIVAN	STEVE DIVIRGLIO

At the bottom of the page, there are buttons for 'Save', 'Submit', and 'Clone Supplier'.

## Description / Steps

*If information was not provided prior to clicking "Submit" you will be alerted to the information to provide*

- 1. If multiple pieces of information are missing it will display a warning*
- 2. Select "Click for details"*
- 3. Clicking the "bell" or the "Click for details" will display the messages for correction*

## Tips

*If the messages are being displayed, clicking the "bell" will hide the messages*

*The next page will provide guidance on a successful submission*

# Supplier Self Onboarding – “Submit” Successful

## SUBMIT

The screenshot displays the STEP Web UI interface. At the top right, it shows 'Supplier-17908912 • Test Supplier • English US'. A notification box in the center reads 'Submit' and 'Item was successfully submitted.' with a close button (X). Below the notification, the dashboard is divided into several sections:

- Links:** Supplier self onboarding process guidelines, Link to CVSSupplier.com, Advanced Search.
- New Supplier Onboarding:** A table with columns for task name and count. The tasks listed are 'One Time Agent Verific...' (0), 'Supplier Self OnBoarding' (0), and 'Total' (0). A red circle with the number '2' highlights the 'Supplier Self OnBoarding' row.
- New Agent Onboarding:** A table with 'One time Agent Verifica...' (0).
- Supplier Maintenance:** A table with 'Maintain Supplier Data' (0).
- Clarification Workflow:** A table with 'Review' (0).
- Manage Your Account:** Shows 'Logged in: TEST SUPPLIER' and a 'User Details' link. A 'Logout' button is at the bottom.

A red circle with the number '1' highlights the notification box.

## Description / Steps

When all required entries have been completed and the new supplier has successfully submitted the self onboarding:

1. “Item was successfully submitted” message presented
2. “Supplier Self Onboarding” has zero tasks to be performed

## Tips

A workflow notification will be sent to the Category Manager to either:

- Approve the self onboarding information
- Review and indicate updates that are required before it can be approved

# Supplier Self Onboarding – Additional information needed

## Comments

**From:** CVSHealth@cloudmail.stibo.com <CVSHealth@cloudmail.stibo.com>

**Subject:** [EXTERNAL] CVS Health - Supplier registration updates needed

\*\*\*\* External Email - Use Caution \*\*\*\*

Hi Test Supplier,

One or more supplier attributes requires your attention. Please login using your Stibo credentials and update your information.

URL Details: [https://cvs-production.scloud.stibo.com/webui/WEBUI\\_CVSSupplierPortal](https://cvs-production.scloud.stibo.com/webui/WEBUI_CVSSupplierPortal) \*Requires Google Chrome (Preferred), Microsoft Edge or Mozilla Firefox browser

Thanks,

CVS Team

\*\*\*Important: This is a system-generated notification. Please do not reply this email.

## Description / Steps

*Example of email sent to supplier indicating clarification is needed to "Approve"*

## Tips

*Login and provide updates based on the comments from the Category Manager*

# User Login

## User Login

The screenshot shows a web browser window with the URL `auth.mdm.stibosystems.com/auth/realms/cvs-uat/protocol/openid-connect/auth?response_type=code&client_id=Step&state=10a5f2c0-2434-4ab7-963a-bb65568a58ec&login=true&scope=openid&redirect_uri=https%3A%2F%2Fcv-uat.scloud.stibo.c...`. The page features the STIBO SYSTEMS logo and the text "MASTER DATA MANAGEMENT". Below the logo, there are two login options: "STEP managed user log in" and "IDP managed user log in". The "STEP managed user log in" section includes a form with fields for "Username" (containing "TSUPPLIER") and "Password" (masked with dots). A "Log In" button is located below the password field. Red callout boxes with numbers 1 through 4 are overlaid on the image: 1 points to the browser address bar, 2 points to the "Please log in using the form" text, 3 points to the "Username" field, and 4 points to the "Log In" button.

## Description / Steps

1. Enter URL for Stibo
2. Enter Username from email
3. Enter password
4. Click "Log In"

## Tips



# Supplier Self Onboarding

## Welcome to the STEP Web UI

Welcome to the STEP Web UI Supplier-17908912 • Test Supplier

**Links**

- [Supplier self onboarding process guidelines](#)
- [Link to CVSSupplier.com](#)
- [Advanced Search](#)

**New Supplier Onboarding**

One Time Agent Verific...	0
Supplier Self OnBoarding	1
<b>Total</b>	<b>1</b>

**New Agent Onboarding**

One time Agent Verifica...	0
----------------------------	---

**Supplier Maintenance**

Maintain Supplier Data	0
------------------------	---

**Clarification Workflow**

Review	0
--------	---

**Manage Your Account**

Logged in:  
TEST SUPPLIER

[User Details](#)

[Logout](#)

## Description / Steps

1. Click "Supplier Self Onboarding" within the New Supplier Onboarding section

## Tips

The number next to the Supplier Self Onboarding option indicates that there is 1 task to perform

# Supplier Self Onboarding

## Supplier Creation – Supplier Self Onboarding

Supplier Creation - Supplier Self OnBoarding - Available

Clear all filters

ID	Supplier Name	Supplier Type	Supplier Sub Type	Status of Registration	Initiated By	Team Name	Date Of Entry	No Of days In Queue
<a href="#">Supplier-17908912</a>	TEST SUPPLIER	Merchandise Warehouse	Domestic	Pending Supplier Response	Test Supplier	Supplier	Mon Jan 03 2022 11:15:41 GMT-0500 (EST)	3 min

## Description / Steps

1. Click the “Supplier-#####” hyperlink

## Tips

*The next page will provide continued guidance to continue the Supplier Self Onboarding process*

# Supplier Self Onboarding – Review “CVS Comments”

## Supplier Creation

**Supplier**  
**TEST SUPPLIER** SUPPLIER PROFILE • ID: Supplier-17908912  
 CVS Reference ID: • Status: Pre-Active • Pay Name: TEST SUPPLIER • PO Name: TEST SUPPLIER • Primary Category: 04-ORAL HYGIENE • Type: Merchandise Warehouse • Sub Type: Domestic

Supplier Overview | Address | Payment & Banking | Supply Chain | Ship Lane | Compliance | EDI | Contact | Documents | Ownership

**Details**

\* Supplier Name: TEST SUPPLIER  
 Name of the Supplier that might appear on the Purchase Order or Remittance

\* Supplier Type: Merchandise Warehouse  
 Status: Pre-Active

\* Supplier Sub Type: Domestic

PO Name: TEST SUPPLIER

\* Pay Name: TEST SUPPLIER  
 Name of the Pay Supplier

DBA: TEST SUPPLIER  
 Doing Business As- Informational Only

\* Legal Status: C-Corporation  
 The field defines the legal status of the supplier's company.

\* Product/Service Description: Oral Care Products  
 Please provide a brief description about the Product & Services that you plan to offer to CVS

Supplier Status Date: 03-Jan-2022

\* Is this Supplier onboarding due to Merger?: N

\* Supplier Manages Data: Y

Parent Supplier: N

CVS Comments: Please add EDI Transmission Contact

Supplier Comments:

▶ Save | Submit | ▶ Clone Supplier

## Description / Steps

1. Scroll to the bottom of the page and review the “CVS Comments”

## Tips

2. New Supplier has the ability to send comments back to CVS

Based on the comments, update the requested information.

When update has been made, click “Save”

After clicking “Save” then click “Submit”

# Supplier Self Onboarding – “Submit” again

## Supplier Overview

**Supplier**  
**TEST SUPPLIER** SUPPLIER PROFILE • ID: Supplier-17908912  
 CVS Reference ID: • Status: Pre-Active • Pay Name: TEST SUPPLIER • PO Name: TEST SUPPLIER • Primary Category: 04-ORAL HYGIENE • Type: Merchandise Warehouse • Sub Type: Domestic

Supplier Overview | Address | Payment & Banking | Supply Chain | Ship Lane | Compliance | EDI | Contact | Documents | Ownership

**Details**

\* Supplier Name: TEST SUPPLIER  
 Name of the Supplier that might appear on the Purchase Order or Remittance

\* Supplier Type: Merchandise Warehouse  
 Status: Pre-Active

\* Supplier Sub Type: Domestic

PO Name: TEST SUPPLIER

\* Pay Name: TEST SUPPLIER  
 Name of the Pay Supplier

DBA: TEST SUPPLIER  
 Doing Business As- Informational Only

\* Legal Status: C-Corporation  
 The field defines the legal status of the supplier's company.

\* Product/Service Description: Oral Care Products  
 Please provide a brief description about the Product & Services that you plan to offer to CVS

Supplier Status Date: 03-Jan-2022

\* Is this Supplier onboarding due to Merger?: N

\* Supplier Manages Data: Y

Parent Supplier: N

CVS Comments: Please add EDI Transmission Contact

Supplier Comments:

Category

Clear all filters

Code
04
71

Number of items: 2

Pay Supplier

Select all Clear

Suppl
<input type="checkbox"/>

Number of items: 1; Selected ite

Do you want to copy Pay Sup  
 Pay Name as PayName?

Save Submit Clone Supplier

## Description / Steps

1. Scroll to the bottom of the page and enter “Supplier Comments” if needed
2. Click “Submit”

## Tips

CVS Category Management will review the updates and Approve if correct

**New Supplier:  
Cloning the attributes of an  
existing supplier**

# Supplier Self Onboarding

## Welcome to the STEP Web UI

Welcome to the STEP Web UI Supplier-17908912 • Test Supplier

**Links**

- [Supplier self onboarding process guidelines](#)
- [Link to CVSSupplier.com](#)
- [Advanced Search](#)

**New Supplier Onboarding**

One Time Agent Verific...	0
Supplier Self OnBoarding	1
<b>Total</b>	<b>1</b>

**New Agent Onboarding**

One time Agent Verifica...	0
----------------------------	---

**Supplier Maintenance**

Maintain Supplier Data	0
------------------------	---

**Clarification Workflow**

Review	0
--------	---

**Manage Your Account**

Logged in:  
TEST SUPPLIER

[User Details](#)

[Logout](#)

## Description / Steps

1. Click "Supplier Self Onboarding" within the New Supplier Onboarding section

## Tips

The number next to the Supplier Self Onboarding option indicates that there is 1 task to perform

# Supplier Self Onboarding – “Clone Supplier”

## Supplier Creation – Supplier Self Onboarding

Supplier Creation - Supplier Self OnBoarding - Available

Clear all filters

ID	Supplier Name	Supplier Type	Supplier Sub Type	Status of Registration	Initiated By	Team Name	Date Of Entry	No Of days In Queue
<a href="#">Supplier-19330907</a>	TEST CLONE SUPPLIER	Merchandise Warehouse	Domestic	Pending Supplier Response	RPDM CM 1	CVS Internal Team	Wed Jan 19 2022 11:10:56 GMT-0500 (EST)	0 min

## Description / Steps

1. Click the “Supplier-#####” hyperlink

## Tips

### Best Practices for cloning a supplier:

- Select a supplier that is **NOT** a Pay Supplier to clone
- Select a supplier whose attributes are complete and accurate and most closely matches the new supplier’s attributes

# Supplier Self Onboarding – “Clone Supplier”

## Supplier Overview

Supplier

TEST CLONE SUPPLIER SUPPLIER PROFILE • ID: Supplier-19330907  
CVS Reference ID: • Status: Pre-Active • Pay Name: TEST CLONE SUPPLIER • PO Name: TEST CLONE SUPPLIER • Primary Category: 01-PAIN RELIEVERS • Type: Merchandise Warehouse • Sub Type: Domestic

Supplier Overview <sup>2</sup> Address Payment & Banking Supply Chain <sup>1</sup> Ship Lane Compliance <sup>4</sup> EDI <sup>1</sup> Contact Documents Ownership

▼ Details

\* Supplier Name TEST CLONE SUPPLIER  
Name of the Supplier that might appear on the Purchase Order or Remittance

\* Supplier Type Merchandise Warehouse  
Status Pre-Active

\* Supplier Sub Type Domestic

PO Name TEST CLONE SUPPLIER

\* Pay Name TEST CLONE SUPPLIER  
Name of the Pay Supplier

DBA TEST CLONE SUPPLIER  
Doing Business As- Informational Only

\* Legal Status  
The field defines the legal status of the supplier's company.

\* Product/Service Description  
Please provide a brief description about the Product & Services that you plan to offer to CVS

Supplier Status Date 19-Jan-2022

\* Is this Supplier onboarding due to Merger? N

\* Supplier Manages Data Y  
Parent Supplier N  
CVS Comments  
Supplier Comments

▼ Category  
Clear all filters

Clone From Supplier

Reference Type Supplier to Clone

Reference Target TEST SUPPLIER (Supplier-17908912)

Cancel OK

Do you want to copy Pay Supplier's Pay Name as PayName?

▼ Clone Supplier <sup>1</sup>  
Select all Clear all filters Clone From Supplier Remove Reference

Supplier Reference	Name
No existing records	

Number of items: 0; Selected items: 0

Number of items: 0; Selected items: 0

Save Submit Clone Supplier <sup>4</sup>

## Description / Steps

If you have access to another supplier number (**Not a Pay Supplier**) you may “Clone” the attributes of another supplier to save time onboarding

1. Click “Clone From Supplier”
2. Enter Supplier Name that is to be cloned
3. Click OK
4. Click “Clone Supplier”

## Tips

The next page will provide continued guidance to “Clone” the attributes of another supplier



# Supplier Self Onboarding – “Clone Supplier”

## Supplier Overview

**Supplier**  
**TEST CLONE SUPPLIER** SUPPLIER PROFILE • ID: Supplier-19330907  
 CVS Reference ID: • Status: Pre-Active • Pay Name: TEST SUPPLIER • PO Name: TEST SUPPLIER Name Change • Primary Category: 04-ORAL HYGIENE • Type: Merchandise Warehouse • Sub Type: Domestic

Supplier Overview | Address | Payment & Banking | Supply Chain | Ship Lane | Compliance | EDI | Contact | Documents | Ownership

▼ Details

\* Supplier Name: TEST CLONE SUPPLIER  
Name of the Supplier that might appear on the Purchase Order or Remittance

\* Supplier Type: Merchandise Warehouse  
Status: Pre-Active

\* Supplier Sub Type: Domestic

1 \* PO Name: TEST SUPPLIER Name Change  
Doing Business As- Informational Only

2 \* Pay Name: TEST SUPPLIER  
Name of the Pay Supplier

3 \* DBA: TEST SUPPLIER  
Doing Business As- Informational Only

\* Legal Status: C-Corporation  
The field defines the legal status of the supplier's company.

\* Product/Service Description: Oral Care Products  
Please provide a brief description about the Product & Services that you plan to offer to CVS

Supplier Status Date: 03-Jan-2022

\* Is this Supplier onboarding due to Merger?: N

\* Supplier Manages Data: Y

Parent Supplier: N

CVS Comments:

Supplier Comments:

▶ Save | Submit | ▶ Clone Supplier

▼ Category

Clear all filters

Code	Name	Is Primary ?
01	PAIN RELIEVERS	Y

Number of items: 1

▼ Pay Supplier

Select all | Clear all filters | Add Pay Supplier | Remove Pay Supplier

Supplier Reference	Name
<input type="checkbox"/> 38340	TEST SUPPLIER

Number of items: 1; Selected items: 0

Do you want to copy Pay Supplier's Pay Name as PayName?

▼ Clone Supplier

Select all | Clear all filters | Clone From Supplier | Remove Reference

Supplier Reference	Name
<input type="checkbox"/> TEST SUPPLIER	38340 TEST SUPPLIER

Number of items: 1; Selected items: 0

## Description / Steps

All of the information from the cloned supplier has populated across all worksheets

1. PO Name – this should be **renamed** as the Supplier Name
2. Pay Name – this should remain as the associated Pay Name
3. DBA – this should be **renamed** as the Supplier Name
4. Product/Service – this should be **changed** to reflect the new supplier's products

## Tips

Any attribute can be updated from the “cloned” version (**Reviewing all attributes before submission is strongly encouraged**)

The following pages indicate attributes that require confirmation before submission

# Supplier Self Onboarding – Payment & Banking

## Supplier Overview

Supplier

TEST CLONE SUPPLIER SUPPLIER PROFILE • ID: Supplier-19330907  
CVS Reference ID: • Status: Pre-Active • Pay Name: TEST SUPPLIER • PO Name: TEST SUPPLIER Name Change • Primary Category: 04-ORAL HYGIENE • Type: Merchandise Warehouse • Sub Type: Domestic

Supplier Overview Address **Payment & Banking** Supply Chain Ship Lane Compliance EDI Contact Documents Ownership

▼ Details

**NOTE : If factor company or different pay supplier is linked then Payment Type ,EDI Invoicing and Banking Attributes will be inherited from linked pay supplier or factor company on click of Save or Submit**

EDI Invoicing N

EDI Begin Date

Are you a Supplier providing alcohol products to CVS using this new Supplier number? N

Do you want Pcard capability for Payments? N

\* Payment Type Bank Open Account

Are you ACH Capable? N

▼ Payment Terms

Please confirm your choice by double-clicking and selecting "Y" on the CHOICE box against the Term.

If the offered Payment terms are not the agreed payment terms, please reach out to the Category Manager on the CVS team

Clear all filters

Choice	Name	Short Desc	Discount %	Due Days	Net Days
Y	N75 DAYS	75	0.000	000	75
	2% DSC IN 40 DAYS; N41	24041	2.000	040	41

Number of items: 2

Preferred Payment Terms

▼ Factor Supplier

\* Do you use a Factor Company for processing your payments? N

Save Submit Clone Supplier

## Description / Steps

1. A Payment Term must be confirmed

## Tips

Any attribute can be updated from the "cloned" version

The following pages indicate attributes that require confirmation before submission

# Supplier Self Onboarding – Supply Chain

## Supplier Overview

**Supplier**  
**TEST CLONE SUPPLIER** SUPPLIER PROFILE • ID: Supplier-19330907  
 CVS Reference ID : • Status : Pre-Active • Pay Name : TEST SUPPLIER • PO Name : TEST SUPPLIER Name Change • Primary Category : 04-ORAL HYGIENE • Type : Merchandise Warehouse • Sub Type : Domestic

Supplier Overview   Address   Payment & Banking   **Supply Chain**   Ship Lane   Compliance   EDI   Contact   Documents   Ownership

▼ Details

\* Do you plan to offer Saleable products to CVS ?

RX DEA Number

List 1 Chemical DEA#

Damage Disposition Code

Damage Payment Type

Return Handling Fees

▼ Freight Terms

Please confirm your choice by double-clicking and selecting "Y" on the CHOICE box against the Term.

If the offered Freight terms are not the agreed Freight terms, please reach out to the Category Manager on the CVS team

Clear all filters

Choice	Name
<input type="text" value="Y"/>	Prepaid

Number of items: 1

Preferred Freight Terms

Save   Submit   Clone Supplier

## Description / Steps

1. A Freight Term must be confirmed

## Tips

Any attribute can be updated from the "cloned" version

The following pages indicate attributes that require confirmation before submission

# Supplier Self Onboarding – Submit

## Supplier Overview

Supplier

TEST CLONE SUPPLIER SUPPLIER PROFILE • ID: Supplier-19330907  
CVS Reference ID: • Status: Pre-Active • Pay Name: TEST SUPPLIER • PO Name: TEST SUPPLIER Name Change • Primary Category: 04-ORAL HYGIENE • Type: Merchandise Warehouse • Sub Type: Domestic

Supplier Overview Address Payment & Banking **Supply Chain** Ship Lane Compliance EDI Contact Documents Ownership

▼ Details

\* Do you plan to offer Saleable products to CVS?

RX DEA Number

List 1 Chemical DEA#

Damage Disposition Code

Damage Payment Type

Return Handling Fees 0.47

▼ Freight Terms

Please confirm your choice by double-clicking and selecting "Y" on the CHOICE box against the Term.

If the offered Freight terms are not the agreed Freight terms, please reach out to the Category Manager on the CVS team

Clear all filters

Choice	Name
<input type="text" value="Y"/>	Prepaid
<input type="text"/>	Collect

Please click OK if you have reviewed all information and ready to Submit.

Submit message

Cancel OK

1 Save Submit Clone Supplier

## Description / Steps

1. After all information has been updated / reviewed click "Submit"
2. A message will appear and click "OK"

## Tips

Supplier has been submitted to CVS for review and approval

**Supplier:  
Data Enrichment &  
Maintenance**

# Supplier Data Enrichment – Search for a supplier

## Stibo Home Screen

The image shows two overlapping screenshots of the Stibo application interface. The background screenshot is the 'UAT MDM PORTAL' home screen. It features a dark teal sidebar with a navigation menu containing 'Tree', 'Quick Search', 'Supplier Reports', and 'Supplier Search'. A red callout bubble with the number '1' points to the 'Supplier Search' menu item. The main content area has a header 'UAT MDM PORTAL' and two panels: 'Quick Links' with an 'Advanced Search' link, and 'Current User' showing 'Logged in: RPDM TRANS 1' and a 'Logout' button. The foreground screenshot is the 'Supplier Search' screen. It has a search input field containing '38340' with a red callout bubble '2' pointing to it. Below the input is a checkbox for 'Find missing values'. At the bottom right are 'Reset' and 'Search' buttons, with a red callout bubble '3' pointing to the 'Search' button.

## Description / Steps

Upon login the user will be in the Stibo home screen

1. Click "Supplier Search"
2. Enter supplier number or name in the "Search" box
3. Click "Search"

## Tips

The next page will provide guidance to update / enrich supplier attributes

# Supplier Data Enrichment

## Supplier Overview

**Supplier**  
**TEST SUPPLIER** SUPPLIER PROFILE • ID: Supplier-17908912  
CVS Reference ID : 38340 • Status : Active • Pay Name : TEST SUPPLIER • PO Name : TEST SUPPLIER • Primary Category : 04-ORAL HYGIENE • Type : Merchandise Warehouse • Sub Type : Domestic

Supplier Overview | Address | Payment & Banking | Supply Chain | Ship Lane | Compliance | EDI | Documents | Ownership

**Details**

Supplier Name: TEST SUPPLIER

\* Supplier Type: Merchandise Warehouse

Status: Active

\* Supplier Sub Type: Domestic

PO Name: TEST SUPPLIER

\* Pay Name: TEST SUPPLIER

DBA: TEST SUPPLIER

\* Legal Status: C-Corporation

\* Product/Service Description: Oral Care Products

Supplier Status Date: 03-Jan-2022

\* Is this Supplier onboarding due to Merger?: N

Parent Supplier: N

\* Supplier Manages Data: Y

**Category**

Clear all filters

Code	Name	Is Primary ?
04	ORAL HYGIENE	Y
71	TRIAL TRAVEL	

Number of items: 2

**Pay Supplier**

Clear all filters

Supplier Reference	Name
38340	TEST SUPPLIER

Number of items: 1

Do you want to copy Pay Supplier's Pay Name as PayName?

**1** ▶ Update

## Description / Steps

1. Click "Update"

## Tips


# Supplier Data Enrichment – Update attributes

## Supplier Profile

Supplier  
TEST SUPPLIER SUPPLIER PROFILE • ID: Supplier-17908912  
CVS Reference ID : 38340 • Status : Active • Pay Name : TEST SUPPLIER • PO Name : TEST SUPPLIER • Primary Category : 04-ORAL HYGIENE • Type : Merchandise Warehouse • Sub Type : Domestic


Comments Supplier Overview Address Payment & Banking Supply Chain Ship Lane Compliance EDI Contact Documents Ownership


▼ Details


\* Supplier Name    
Name of the Supplier that might appear on the Purchase Order or Remittance


\* Supplier Type Merchandise Warehouse  
Status Active


\* Supplier Sub Type Domestic

PO Name  


\* Pay Name    
Name of the Pay Supplier


DBA    
Doing Business As- Informational Only

\* Legal Status    
The field defines the legal status of the supplier's company.

1   2




▼ Category


 Clear all filters

	Code	Name	Is Primary ?
	04	ORAL HYGIENE	Y
	71	TRIAL TRAVEL	

Number of items: 2

▼ Pay Supplier

Select all  Clear all filters  Add Pay Supplier  Remove Pay Supplier

	Supplier Reference	Name
<input type="checkbox"/>	38340	TEST SUPPLIER

Number of items: 1; Selected items: 0

## Description / Steps

After clicking “Update”, you will be taken to the Supplier Profile

Update / Enrich desired attributes

1. Click “Save” to save your changes for future submission to CVS for approval
2. Click “Submit” to submit your changes to CVS for approval

## Tips

Review prior pages for guidance to update / enrich supplier attributes



# Supplier Data Maintenance

## Stibo Home Screen

Welcome to the STEP Web UI

The screenshot displays the Stibo Home Screen with the following sections:

- Links:**
  - Supplier self onboarding process guidelines
  - Link to CVSSupplier.com
  - Advanced Search
- New Supplier Onboarding:**
  - One Time Agent Verific... 0
  - Supplier Self OnBoarding 0
  - Total 0
- New Agent Onboarding:**
  - One time Agent Verifica... 0
- Supplier Maintenance:**
  - Maintain Supplier Data 1

A red circle with the number '1' is placed over the 'Maintain Supplier Data' link in the Supplier Maintenance section.

## Description / Steps

Upon login the user will be in the Stibo home screen. If CVS Health has made a change that requires attention, it will be in the "Supplier Maintenance" workflow


1. Click "Maintain Supplier Data"


## Tips

# Supplier Data Maintenance

## Supplier Maintenance Workflow

### Supplier Maintenance Workflow - Maintain Supplier Data - Available

 Clear all filters

	ID	Supplier Name	Supplier Type	Supplier Sub Type	Status of Registration	Initiated By	Team Name
	<a href="#">Supplier-17908912</a>	TEST SUPPLIER	Merchandise Warehouse	Domestic	CM Approval Completed	Test Supplier	Supplier

## Description / Steps

Upon login the user will be in the Stibo home screen. If CVS Health has made a change that requires attention, it will be in the "Supplier Maintenance" workflow

1. Click hyperlink

## Tips

# Supplier Data Maintenance

## Supplier Maintenance Workflow

Supplier

TEST SUPPLIER SUPPLIER PROFILE • ID: Supplier-17908912  
 CVS Reference ID : 38340 • Status : Active • Pay Name : TEST SUPPLIER • PO Name : TEST SUPPLIER Name Change • Primary Category : 04-ORAL HYGIENE • Type : Merchandise Warehouse • Sub Type : Domestic

Comments Supplier Overview Address Payment & Banking Supply Chain Ship Lane Compliance EDI Contact Documents Ownership

▼ Comments

**NOTE : Please acknowledge you have addressed each comment(s) below before you click on SUBMIT. Your acknowledgement is required to submit your changes for CVS review. Please confirm your choice by clicking and selecting "Y" on the CHOICE box against the Acknowledgement.**

Clear all filters

Acknowledgement	Supplier Comments	CVS Comments	User	Date	Comment History
<input type="checkbox"/>		PO Name Change	RPDM CM 1	05-Jan-2022	RPDM CM 1: 05-Jan-2022 02:12:09: PO Name Change

Save Submit

## Description / Steps

Comments will indicate what has changed and the supplier will be asked to acknowledge the change. Additionally, comments can be sent back to CVS Health

- Based on the comment, supplier can review the change in the appropriate worksheet

1. Double click the Acknowledgement and select "Y" or "N"

2. Enter supplier comments (**optional**)

3. "Submit" acknowledgement / comments

## Tips