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# PATIENT WELCOME HANDBOOK

Specialty Pharmacy Services

Prepared For Patients, Caregivers, and Their Families



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## FAQs

### **How can I fill a new prescription?**

- Have your doctor electronically send a prescription.
- Have your doctor phone in a prescription at (add company phone number).
- Have your doctor fax your prescription (add company fax number).
- Mail new prescription to: (add company address)

### **How can I refill a prescription?**

- Call (add company phone number) during business hours Monday thru Friday (add company hours).

### **How can I have a prescription transferred?**

- Call (add company phone number) during business hours Monday through Friday (add company hours).
- Have your current pharmacy contact us at (add company phone number).

### **How can I obtain my order status or delays?**

- Call (add company phone number) during business hours Monday through Friday (add company hours).

### **What if my prescription is not covered by my insurance plan or has a deductible, co-pays, or co-insurance?**

- Prior to the start of therapy, a (add company name) Specialty Pharmacy Insurance Verification Coordinator will discuss any potential financial responsibility and payment options with you. We will submit claims to your insurance carrier on the date we fill your prescription. If the claim is rejected, someone from our staff will contact you so that we can work together to resolve the issue. You may be required to pay a part of your medication cost in the form of a co-payment. Your co-payment can sometimes include a deductible or co-insurance that will need to be paid. We want to ensure there are no financial barriers to you getting your medication. Our staff will assist you with financial assistance options that include drug coupons, assistance from manufacturers, and funding from foundations if available.

### **How can I obtain the cash price of a prescription?**

- (add company phone number) during business hours Monday through Friday (add company hours) and a pharmacy representative will assist you.

### **How can I communicate a suspected medication issue, complaint, error, concern, or compliment requiring resolution/attention?**

- Call (add company phone number) to speak directly with a member of pharmacy staff.
- Emailing us at (add company email address)
- By visiting our website at (add company website url)
- Or by writing to: (add company address)

### **Can I return my medication and/ or supplies?**

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The return of any medications or supplies for credit or reuse on another patient is prohibited by state pharmacy board, best practices, safety, and infection control standards.

## SHARPS Disposal



### Always Use A Sharps Container

Used sharps are hazardous waste. When not discarded properly, they can cut and infect others. Protect your community by always discarding your used sharps in a sharps disposal container.

FREE sharps containers may be available from your doctor, hospital, health insurance, or medication supplier. You can also buy a sharps container from your pharmacist or Online.

### If You Cannot Get An FDA-Cleared Sharps Container, Follow These Guidelines:



Use an empty household container with these features:

- Stays upright
- Made of heavy-duty plastic
- Tight-fitting lid that cannot be punctured
- Does not leak

**DO NOT USE: milk containers, water bottles, glass containers, or soda cans.**

These containers can break or puncture easily.

**Discarding a household container:**

1. Close lid and tape shut. Label container.
2. Bring container to a sharps disposal program.



**If you cannot find a disposal program, put container in center of full trash bag and discard in regular trash.\***

\*In some areas, it is illegal to dispose of sharps in the trash.

**Please follow your community guidelines.**

### Always Remember

- **DO NOT** throw loose sharps in trash
- **DO NOT** put sharps in recycling
- **DO NOT** flush sharps down toilet
- **KEEP OUT** of reach of children

For information about rules and laws in your community, contact the Coalition for Safe Community Needle Disposal at: 800-643-1643.

Information gathered from FDA.GOV.



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## Dear Specialty Pharmacy Patient,

Welcome to (add company name) Specialty Pharmacy! It's a privilege to serve you for your specialty pharmacy needs.

(Add company name) Specialty Pharmacy is a licensed pharmacy and is dedicated to maximizing the quality of life and dignity of the patients and clients we serve.

The (add company name) Specialty Pharmacy staff understands that your medical condition is complex and requires special knowledge when working with your medical provider and insurance company.

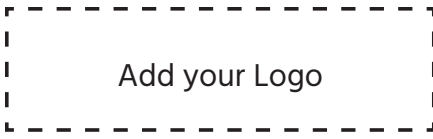
We are dedicated to providing you with the best experience possible. Here are some benefits that you will be receiving while on service with (add company name) Specialty Pharmacy:

- Access to specialized clinical staff 24 hours a day, 7 days a week
- Coordination of prior authorization with your insurance company
- Compliance monitoring
- Co-pay assistance
- Free mailing of medication
- Patient training and education
- Pharmacist counseling
- Refill reminders
- Enrollment in the Patient Management Program

The Patient Management Program provides benefits such as managing side effects, increasing compliance and medication adherence to drug therapy, increasing overall improvement of health, deeming there are no limitations such as patient non-compliance and lack of willingness to follow appropriate direction from the pharmacist and any other medical provider(s) involved directly in the patient's care. The patient can either call the pharmacy directly or write an opt-out statement to let the pharmacy staff know that they are choosing to opt out of the Patient Management Program.

You can also go to our website, **(add website url)** for more information about our services.





**Business Hours:**

Monday—Friday: (add company hours)

Saturday: (add company hours)

Urgent Concerns 24/7 Availability

**Specialty Pharmacy:**

**Phone:** (add company contact info)

**Email:** (add company contact info)

**Website:** (add company contact info)

Your experience with (add company name) Specialty Pharmacy is very important to us. We want you to feel comfortable letting us know how we can better serve you, without fear of reprisal, discrimination or unreasonable interruption of services.

If you are not satisfied with any aspect of the service given by (add company name) Specialty Pharmacy, please call and ask to speak with a supervisor.

(Add company name) Specialty Pharmacy has a formal complaint procedure that makes sure your concerns are reviewed and an investigation is started within 48 hours. You will be contacted within five business days with an update. Every effort will be made to resolve all complaints within 14 days. You will be informed in writing of the resolution of the complaint.

(Add company name) Specialty Pharmacy looks forward to providing you with the best service possible. Thank you for choosing us.

*Sincerely,*

***The (add company name) Specialty Pharmacy Team***

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## Medication Safety

As a patient and/or family member, you are part of the health care team.

Your pharmacists and care team members, along with you and/or your family member(s), play a key role in making sure your therapy is successful.

### Here are some important things to remember:

- Our pharmacists can help with any medication questions. Never hesitate to call with any questions or concerns.
- With the delivery of each new medication shipment, open the box and look at each dose to ensure the correct product and correct patient name is on the product. You are our last quality check to ensure the highest level of patient safety.

### Before taking a dose of medication:

- Read the label and any information you have been given.
- Make sure that the medication you have is the one that your doctor ordered.
- If any of the information you have does not reflect what your doctor has told you, call your pharmacist.

### For example:

Your doctor told you to take your medication 1 time daily but the label says to take it 2 times daily – call your pharmacist.

- Check the product for any leakage, change in color or change in appearance.
- Be sure to store all medications as directed on the label and packaging.

*If your medication has been stored improperly for any length of time, call one of our pharmacists for further instructions.*

Taking an active role in safe medication use has many advantages. Not only will it help prevent medication errors, it will also make you a more informed health care consumer. (Add company name) Specialty Pharmacy welcomes your involvement in your care. With teamwork, we hope to give you the best experience possible.

## Specialty Pharmacy

(Add company name) Specialty Pharmacy provides the most advanced medications that treat chronic, rare, or complex conditions found within the following specialties:

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- Cardiology
- Dermatology
- Endocrinology
- Enzyme Replacement
- Gastroenterology
- Gynecology
- Hemophilia
- Hepatology & Infectious Disease
- Mental Health/ Substance Abuse
- Neurology
- Oncology
- Osteoarthritis
- Osteoporosis
- Rheumatology
- Urology

We know that hearing a diagnosis or starting a new medication can be difficult. We want you to know that we care about you and your health.

To give you the highest quality of care, a dedicated team of professionals will be monitoring your therapy. If at any time an emergency comes up, we are on-call 24 hours a day to help you.

## Billing and Insurance

If you have questions about claims billed to your insurance company or your statement, please call and talk to a billing department team member.

If you have any questions about your insurance benefits or out of pocket costs, please call and talk to an insurance verification coordinator. Please notify us of any changes in your insurance.

## Proof of Delivery

The packing slip included in your delivery package provides you with an itemized list and quantity of medication you have received. The packing slip also serves as proof of delivery and is included as part of your medical record in the event your insurance provider requests this information. Insurance providers can audit medical records at any time for proof of delivery and can deny reimbursement if proof of delivery is not available.

A signature is required on your packing slip if delivered by a (add company name) Specialty Pharmacy driver. If you are not available to sign, the packing slip must be signed, dated and returned ASAP in the envelope provided in this folder. If you receive your shipment from UPS or another delivery company, the tracking number will suffice for proof of delivery.

## Medication and Refills

If you have any problems/ questions with your medicine, please call and talk to a pharmacist.

To place an order for a refill, please call our specialty pharmacy at 740-326-3485 Option 5.

A (add company name) Specialty Pharmacy team member will talk to you prior to refilling your medication. Please notify us of any changes in your medical status.



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## Medication Emergencies

### Storage of Medication

- Store all medicine away from children and pets.
- Check the label on all medicine for storage instructions.
- If your medicine needs to be refrigerated, please keep away from food and food spills.
- Refrigerated medicine should be placed in the refrigerator as soon as possible.
- Place the new medicine behind any previously delivered medicine you may still have in your refrigerator.
- Non-refrigerated medicine should be kept in a cool, dry place away from direct sunlight and above freezing temperatures.

### Disposal of Medication

- Discard all used needles and syringes with needles in a puncture-resistant, hard plastic or metal container. An empty coffee can or empty detergent bottle with a screw-on cap can be used.
- Close the container with its original lid and secure with heavy duty tape.
- Place the tightly sealed container in a paper bag and throw it away with your household trash.
- Discard all used syringes without needles in double-bagged household trash.
- If you need to dispose of any oral medications you received from us that you no longer need, call our specialty pharmacy at 740-326-3485 Option 5. We will mail you a pre-paid envelope to ship your medications to a disposal site to be properly destroyed.

### Return of Medication

[Ohio State Board of Pharmacy prohibits the return of any medication to ANY pharmacy for credit and/or reuse for another patient.](#)

Thermal coolers and ice packs cannot be returned to (add company name) Specialty Pharmacy. (Add company name) Specialty Pharmacy delivery representatives are not allowed to remove these items from your home due to safety and infection control standards.

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## Hand Washing and Hand Sanitizers

***Always wash your hands before getting your medication ready.*** Keeping hands clean through proper hand hygiene is one of the most important steps you can take to avoid getting sick and spreading germs to others. Many illnesses and conditions are spread by not washing hands with soap and clean, running water. If clean, running water is not available, use soap and available water. If soap and water are unavailable, use an alcohol-based hand sanitizer that has at least 60% alcohol. Alcohol-based hand sanitizers can quickly reduce the number of germs on hands in some situations, but sanitizers do NOT eliminate all types of germs and are NOT effective when hands are visibly dirty.



Turn on clean running water and wet your hands. Hot water may cause skin irritation, if you wash your hands often. Apply enough liquid soap to cover the whole surface of your hands and fingers.



Rub hands together to form a lather. Wash hands for at least 30 seconds. Make sure to thoroughly clean front & back of hands, fingers, and fingernails. Rinse the soap off completely with clean running water.



Dry your hands completely with a new unused paper towel. Cloth and reusable towels may harbor germs. Use your used paper towel to turn off the faucet and open the door before discarding.

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## Home Safety

Emergencies and environmental disasters can happen at any time. (Add company name) Specialty Pharmacy will make every effort to continue services without interruption and to let you know where your delivery is during these emergencies. Please listen to radio and television for weather updates and emergency information/instructions.

## Environmental Safety

- Torn, worn or frayed carpeting should be repaired or removed.
- Rugs, runners and mats should be secured to the floor with double-sided adhesive, rubber matting or be rubber-backed.
- Handrails and hand grips should be secure.
- A sturdy step stool should be used to reach items on high shelves.
- Always store heavy items on lower levels.

## Fire and Electrical Safety

- Replace frayed cords.
- Cords should not be placed under furniture and rugs. Extension cords should not be overloaded.
- Electrical outlets should be grounded.
- Multiple outlet adaptors should not be used on electrical outlets.
- Do not use an outlet if it sparks or if smoke appears, or if it is very warm.
- Keep flashlights and extra batteries handy.
- Fire regulations recommend one smoke detector on each level of the home. Check batteries often.
- Develop an evacuation plan to exit the residence in the event of fire.
- Establish clear pathways to all of the exits. Do not block the exits with furniture or boxes.
- Have a key accessible near deadbolt-locked doors.

## Weather-Related Emergency

### Tips

#### Power Outages

- If your power goes out, fill an ice chest with ice to store all refrigerated medications. Please call a pharmacist with any questions.

#### Flooding

- Go to high ground immediately; get out of areas that tend to flood.

#### Tornadoes

- Be prepared to move to the basement, in a corner along an outside wall or under the stairs.
- If there is no basement, go to the lowest level, in a bathroom, closet, inner hallway, or under the stairs.
- Stay away from doors and windows.

#### Winter Storms & Blizzards

- Keep an emergency supply of food and water in the home.
- Dress warmly and in layers.
- Conserve energy; close off unused rooms.
- Use caution when using kerosene and/or electric heaters.

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- Chimneys should be inspected annually to avoid unsafe build up.
- Kerosene heaters, wood stoves and fireplaces should not be left unattended while in use.
- Do not smoke in bed.

## Patient's Bill of Rights & Responsibilities

### Patients have the right to:

- Be advised on policies and procedures regarding the disclosure of patient's records.
- Confidentiality and privacy of all information in the patient record and protected health information.
- Speak to a health professional.
- Identify the staff member of the program and their job title, and to speak with a supervisor of the staff member, if requested.
- Receive appropriate care without discrimination.
- Have one's property and person treated with respect, consideration, and recognition of patient's dignity and individuality.
- Voice grievance/complaints regarding treatment or care or lack of respect of property, or recommend changes in policy, personnel, or care/services without restraint, interference, coercion, or reprisal and have the grievance/complaints investigated.
- Be free from mistreatment, neglect, or verbal, mental, sexual, and physical abuse) including injuries of unknown source and misappropriation of client/patient property.
- Be informed of any financial benefits when referred to an organization.
- Be informed in advance of care being provided and their financial responsibilities.
- Receive information about the scope of services provide and limitations on these services.
- Refuse care or treatment after the consequences of refusing care or treatment are fully presented.
- Receive information about Insert your pharmacy name and the therapy management program.
- Have personal health information shared with the therapy management program, providers and caregivers only in accordance with the state and federal law.
- Know the philosophy and characteristics of the therapy management program.
- Receive administrative information regarding changes in or termination of the therapy management program.

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- Decline participation, revoke consent or disenroll at any point in time.
- Be fully informed about care/services to be provided, any modifications to the plan of care, and participate in the development and periodic revision of the plan of care.
- Be fully informed of one's responsibilities.

### **Your Responsibility as a Patient**

- Give accurate and complete clinical, health and contact information and notify the Insert your pharmacy name staff of changes in this information.
- Submit any forms that are necessary to participate in the program, to the extent required by law.
- Notify the treating provider of participation in the patient management program
- Be honest and direct.
- Ask questions about anything you do not understand.
- Follow your treatment plan and accept the consequences if you do not.
- Be considerate of other patients and pharmacy staff.
- Know your health care team.
- Pay promptly for services or supplies delivered.
- Provide all requested insurance and financial information.
- Sign the required consent and release for insurance billing.

### **Changes to the Terms of This Notice**

We can change the terms of this notice, and the changes will apply to all information we have about you. The new notice will be available upon request in our office.

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## Notice of Privacy Practices

(Add company Notice of Privacy Practices)

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Add Website  
QR Code

## Connect with Us

**Phone Number:** (add contact info)

**Fax:** (add contact info)

**Email:** (add contact info)

**Address:** (add company address)

Follow (add company name) Pharmacy Services   

## Serving You Throughout (add area name)!

We are available for questions and support Monday–Friday  
from 8:00 AM–8:00 PM, and Saturday 9:00 AM–6:00 PM.

***Urgent Concerns 24/7 Availability***