



**Hoagland Long Term Care**  
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**Hoagland Pharmacy and DME Department**  
2330 Yew Street  
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<b>Pharmacy</b>	<b>DME Department</b>
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**Hoagland Respiratory Services**  
2330 Yew Street  
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# *Patient Information Packet*



***A Medicare and Medicaid Provider***

***[www.hoaglandpharmacy.com](http://www.hoaglandpharmacy.com)***



## Introduction

Established in 1981, Hoagland Pharmacy is an independently owned and operated business striving to offer comprehensive equipment and services to better meet the needs of our customers. Hoagland Pharmacy offers a full-service retail pharmacy, featuring a compounding center to assist prescribers in individualizing patient care. Hoagland Pharmacy also operates a long-term care pharmacy, which specializes in serving skilled nursing facilities, assisted living facilities, and group homes located throughout Whatcom, Skagit, Island, and Snohomish counties.

Our line of durable medical equipment includes a complete line of canes, walkers, rollators, wheelchairs and bathroom safety items. We also carry compression hosiery, braces, nutritional items, and respiratory equipment and supplies. Many of these items are billable to Medicare, Medicaid, or third-party insurance. Our customer service staff is available to help you on a one-on-one basis.

Our professional staff pharmacists, customer service staff and insurance billing specialists are all available to assist you with any of your questions or needs. Please check with a staff member regarding the availability of delivery service.

## Philosophy and Values

Our Company provides unique and specialized services in the delivery of health care, necessitating a strong emphasis on personalized, professional patient care. Our success, past and future, is dependent on our ability to provide both the technological equipment and a high level of courtesy, care and respect for the patient.

## Mission Statement

To sustainably provide a high quality of pharmacy services and medical equipment, while striving for 100% customer satisfaction. To be a place where customers want to come; a place that clinicians want to refer, and a place where people want to work.

## Grievance Information

You have the right and responsibility to express concerns, dissatisfaction or complaints about services you do or do not receive without fear of reprisal, discrimination or unreasonable interruption of services. Please direct any grievances to the Administrative Director. Hoagland Pharmacy has a formal grievance procedure that ensures that concerns are investigated within (48) hours. Every attempt shall be made to resolve all grievances within (14) days and you will be informed in writing of the resolution.

Medicare beneficiaries with unresolved complaints should notify Medicare directly at (800) 633-4227.

Our accrediting body is the Accreditation Commission for Health Care (ACHC), if you have an unresolved grievance, they can be contacted at (855) 937-2242.

If you feel the need to further discuss your unresolved grievance, the Washington State Attorney General's Consumer Protection Division can be reached from 10am to 3pm Monday through Friday at (360) 738-6185.

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## Emergency Preparedness Plan

Hoagland Pharmacy has a comprehensive emergency preparedness plan in case an emergency occurs. Emergencies may include; a fire within our facilities, chemical spills in the community, major weather events and community evacuations. Our primary goal is to continue to service the community healthcare needs.

If an natural disaster occurs, follow the instructions from civil authorities in your area. Hoagland Pharmacy will utilize every resource available to continue to provide service, however, there may be circumstances where Hoagland Pharmacy cannot meet your needs due to the scope of the disaster. In that case, you must utilize the resources of your local rescue or medical facilities.

## Home Care Safety

Here are some guidelines to assist you in home care safety and help maintain safe habits. The safe way is always the right way to do each job. Shortcuts may hurt. Correct unsafe conditions before they cause an incident. Take responsibility. Keep your home safe. Know your emergency service numbers.

## Hand Washing

Hand washing with soap and running water removes dirt and germs. Dirty hands are the most common way to spread infection and hand washing is the single most important measure for preventing the spread of infection. Always wash your hands before beginning and after completing any of your home care procedures.

1. Remove all rings as these hold dirt and germs. Wear your watch well above your wrist.
2. Turn on the water to a lukewarm temperature. Leave the water running.
3. Put hands and wrists under running water, keeping fingertips pointing down. Be careful not to touch the bottom or sides of the sink or faucets.
4. Once your hands are wet, apply soap. With hands pointing down, begin to scrub. Start with fingers applying special attention to the area under the nails. Work up to your wrists.
5. Wash well for at least 15 seconds.
6. Rinse hands and wrists under running water. Keep your hands down to prevent dirt and soap from running back up your forearms.
7. Dry hands using a paper towel.
8. Turn off faucets with a paper towel.

## Medications

All medications should be labeled clearly and left in the original containers. When taking or giving medications, read the label and measure doses carefully. Know the side effects of any medications you are taking or giving. Do not take or give medications for that were not properly prescribed. If children are in the home, store medications out of reach in childproof containers. Contact the sanitation department concerning requirements for the disposal of medications.



## Lifting

If an item is too large, heavy or awkward to move alone, get assistance. Here are some guidelines that you can do to prevent low back strain or injury:

1. Make sure your path is clear.
2. Stand close to the item with your feet apart for good balance.
3. Bend your knees and “straddle” the load.
4. Keep your back as straight as possible while you lift and carry the item.
5. Avoid twisting your body when carrying the item.

## Falls

Falls are the most common and often, the most serious accidents in the home. Here are some guidelines that you can do to prevent falls in your home:

1. Arrange furniture to provide clear walkways throughout your home.
2. Pick up and clear any items that may get under feet including electrical cords and throw rugs.
3. Keep drawers and cabinet doors closed.
4. Wipe up all spilled water, oil or grease immediately.
5. Install good lighting throughout your home.
6. Keep stairs clear and well lit.
7. Install handrails on all stairs, showers, bathtubs and toilets.
8. Place rubber mats or grids in showers and bath tubs.
9. Use bath benches or shower chairs if you have muscle weakness, shortness of breath or dizziness.

## Electrical Accidents

Watch for early warning signs, including any burning smells or sparks. Unplug the device and have it checked immediately. Here are some guidelines that can be done to assist in preventing electrical accidents:

1. Check electrical cords, electrical plugs and electrical outlets for damage. Do not overload electrical outlets with too many electrical plugs.
2. Keep electrical cords and devices away from water.
3. Do not place electrical cords under rugs, through doorways or near heaters.
4. Extension cords must be rated properly for their use.
5. Use a grounded 3-wire plug to prevent shock. Use three-prong adapters when necessary.

## Natural Gas Leak

1. Leave the building immediately and take others with you. If you are outside, leave the area immediately.
2. Do not do anything that might create a spark including lighting a match, smoking, turning any switches on or off, starting a car or using a land line telephone.
3. Find a phone away from the area and call your natural gas utility or 911.



## Fire Preparedness

Practice your fire escape plan. Look for and plan at least two ways out of your home. If your fire exit is through a window, make sure it opens easily. If you are in an apartment, know where the exit stairs are located. Do not use an elevator in a fire emergency. You may notify the Fire Department ahead of time if you have a disability or special need. Here are some guidelines that can assist in fire preparedness:

1. Install smoke detectors. Test frequently and change batteries yearly.
2. Keep a fire extinguisher in your home and know how to use it.
3. Remove any old newspapers, magazines and boxes.
4. Empty waste containers and trash cans regularly.
5. Do not empty ashtrays or place matches into waste containers or trash cans.
6. Be cautious when using any space heaters or heating pads.
7. Have your fireplace and chimney inspected regularly.
8. Keep flammable items away from fireplace sparks.
9. Have your furnace inspected regularly.
10. If there is oxygen in use, place a "No Smoking" sign in plain view of all persons entering home.

If you have a fire or suspect a fire, take immediate action per your fire escape plan. Evacuation is your top priority. Notify emergency services with no delay. If your fire escape route is cut off, close any doors and seal any cracks to hold back the smoke. Signal for help from any windows.

## Key Staff Members

Director of Operations	Carl Neal
Pharmacy Manager, LTC	Carson Huntoon
Pharmacy Manager, Retail	Sonia Gale
Administrative Director	Carrie Stephens

## Emergency Phone Numbers

Emergency Services	911
Hoagland Pharmacy	(800) 734-5413
Emergency On-Call	(360) 220-6753

Name of your Doctor: \_\_\_\_\_

Doctor's Phone Number: \_\_\_\_\_



## Scope of Services

### **Pharmacy Services**

Full Prescription Services  
Customized Compounded Prescriptions  
Immunization and Travel Vaccines  
Specialty Medication Services  
Vitamins and Minerals  
Over The Counter Products  
Pharmacist Consultation  
Compliance Packaging Services  
Diabetic Supplies

### **Durable Medical Equipment**

Mobility Items  
Wheelchairs  
Walkers  
Crutches  
Braces and Orthotics  
Aids to Daily Living  
Bathroom Safety Products  
Wound Care Supplies

### **Respiratory Services**

CPAP, BiPAP, APAP and ASV Equipment  
Custom Mask Fitting  
Sleep Therapy Supplies  
Nebulizers  
Supply Replacement Reminders  
Compliance Reporting

## Frequently Asked Questions

*Q: How do I get a refill on my medications?*

A: Call your pharmacy team during normal business hours at (360) 685-5000. If you choose to leave a message, make sure you to leave your name, date of birth, and a call back number. If you are a caregiver, please be sure to leave your name as well as the patients name and date of birth.

*Q: How do I fill a new prescription?*

A: New prescriptions can be sent directly from your prescriber electronically or via fax. If your prescriber gives you an original prescription hard copy, please bring it in to our pharmacy during our normal hours of operation.

*Q: How do I get more medication if there is a disaster/emergency?*

A: If there is a disaster or emergency impacting Hoagland Pharmacy, we will utilize our internal emergency preparedness plan to assist in maintaining an uninterrupted supply of your medication.

*Q: How do I check on the status of my prescription?*

A: You may call your Pharmacy team at 360-685-5000.

*Q: How do I report concerns or errors?*

A: You can always reach out the pharmacy team directly at (360) 685-5000. If you feel that the concern or error in question is of a significant nature, you should call the Pharmacy Manager or Administrative Director. If there is an after-hours emergency, please call (360) 220-6753.

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*Q: How do I handle an adverse reaction to a medication?*

A: Some adverse reactions you may have are expected and some are not. You may have been taught how to administer your medication at your physician's office, but you will also have an opportunity to discuss possible reactions with a Pharmacist when you receive your first course of therapy. You may also call the pharmacy team at (360) 685-5000 during normal our normal hours of operation. If your reaction is of a critical nature, you should call 911.

*Q: How do I dispose of unused medication?*

A: It is against the Washington State pharmacy law for pharmacies to take back medications. There is a medication disposal bin at our Hoagland Pharmacy location on Yew Street that can take medications for disposal through a grant provided by the City of Bellingham.

*Q: How does Hoagland Pharmacy handle medication recalls?*

A: Upon notification of a medication recall, Hoagland Pharmacy will reach out to each patient that received the product in question and make necessary arrangements to pick up any product remaining as well as replace the recalled medication. This replacement will be at no charge to the patient.

*Q: How do I obtain medications not available at my current pharmacy?*

A: We have oral, subcutaneous and intramuscular medications. What we can supply to a patient is based on physicians' orders, insurance and manufacturer availability. Some patients may have to order their medications from other mail order Pharmacies. Have your prescriber fax in the prescription to Hoagland Pharmacy and our pharmacy team will call you to review your information and inform you what your next step should be.

*Q: How do I transfer a prescription to another pharmacy?*

A: If the need arises to transfer your prescription to another provider, Hoagland Pharmacy will fax all your needed documents. Provide your pharmacy team with the fax number and a contact name/phone number of the new provider. Let your pharmacy team know what medications you want transferred.

*Q: Are generic medications safe and effective?*

A: Yes, the U.S. Food and Drug Administration (FDA) makes sure of it. The FDA puts each generic medicine through a rigorous quality control review process to ensure that generics are as safe and effective as the original brand name medicine. The manufacturing facilities must also meet specific standards. The FDA inspects more than 3,500 pharmaceutical manufacturing facilities each year to monitor how the medicines are made, processed, tested, packaged, and labeled.

*Q: When do medication substitutions happen?*

A: In Washington State, therapeutic substitution of the AB rated generic version of a brand name medication is mandatory, unless the prescribing physician specifies that they would like the brand name medication to be dispensed by writing on the prescription, "No Substitution". AB rated generic medications are therapeutically equivalent to their branded versions. A prior authorization request may be required by the patient's insurance company for all prescriptions where the prescriber has indicated that he or she would like the brand name version. Hoagland pharmacy will let the patient's physician know that the prescribed medication requires prior authorization.

## **Patient Rights and Responsibilities**

Home care patients have the right to be notified in writing of their rights and obligations before treatment has begun. The patient's family or guardian may exercise the patient's rights when he or she has been judged incompetent. Home care providers have an obligation to protect and promote the rights of their patients, including the following rights.

### **As the patient/caregiver, you have the RIGHT to:**

1. Be treated with dignity and respect.
2. Call after hours with a quick response the next business day.
3. Have patient records and information pertaining to a patient's care be confidential.
4. Be presented with information at admission in order to participate in and make decisions concerning your plan of care and treatment.
5. Be notified in advance of the types of care, frequency of care, and the clinical specialty providing care.
6. Be notified in advance of any change in your plan of care and treatment.
7. Be provided equipment and service in a timely manner.
8. Receive and itemized explanation of charges.
9. Be informed of company ownership.
10. Express grievances without fear of reprisal or discrimination.
11. Receive respect for the treatment of one's property.
12. Refuse or discontinue service or equipment (with timely removal of equipment) within the confines of the law and be informed of the consequences of this action.
13. Be informed of potential reimbursement for services under Medicare, Medicaid, or other third-party insurers based on the patient's condition and insurance eligibility (to the best of the company's knowledge).
14. Be notified of potential financial responsibility for products or services not fully reimbursed by Medicare, Medicaid, or other third-party insurers (to the best of the company's knowledge).
15. Be notified within 30 working days of any changes in charges for which you may be liable.
16. Be admitted for service only if the company can provide safe, professional care at the scope and level of intensity needed, if the company is unable to provide care then the company will provide alternative resources.
17. Purchase inexpensive or routinely purchased durable medical equipment. (For Medicare Patients)
18. Have the manufacturer's warranty for equipment purchased from Hoagland Pharmacy honored.
19. Have equipment rented from Hoagland Pharmacy repaired or replaced at no cost when such repairs are not due to neglect/abuse.
20. Receive essential information in a language or method of communication that you understand.
21. Have his or her cultural, psychosocial, spiritual, and personal values, beliefs, and preferences respected.
22. Be free from mental, physical sexual, and verbal abuse, neglect, and exploitation.
23. Access, request amendment to, and receive an accounting of disclosures regarding his or her own health information as permitted under applicable law.

### **As the patient/caregiver, you are RESPONSIBLE for:**

1. Notifying the company of change of address, phone number, or insurance status.
2. Notifying the company when service or equipment is no longer needed.
3. Notifying the company when you will not be available for services.
4. Notifying the company in a timely manner if extra equipment or services will be needed.
5. Participation as agreed in the plan of care/treatment.
6. Notify the company of any change in condition, physician orders, or physician.
7. Notifying the company of needed medical equipment repair.
8. Notifying the company of an incident involving clinicians or equipment.
9. Notifying the company in a timely manner prior to discharge.
10. Meeting financial obligations of your health care as promptly as possible.
11. Providing accurate and complete information about present complaints, past illness, hospitalizations, medications, and other matters pertinent to your health.
12. Your actions if you do not follow the plan of care.
13. Providing a safe environment for our staff to perform the services outlined in your plan of care.

## ***Hoagland Pharmacy*** **Notice of Privacy Practices**

**This Notice describes how medical information about you may be used and disclosed and how you can get access to this information. Please review it carefully.**

As part of the Federal Health Insurance Portability and Accountability Act of 1996 (HIPAA), the pharmacy has created this Notice of Privacy Practices. This Notice describes the pharmacy's privacy practices and the rights you, the individual, have as they relate to the privacy of your Protected Health Information (PHI). Your PHI is information about you, or information that could be used to identify you, as it relates to your past and present physical and mental health care services. The HIPAA regulations require that the pharmacy protect the privacy of your PHI that the pharmacy has received or created. Hoagland Pharmacy will abide by the terms presented within this Notice. For any uses or disclosures that are not listed below, the pharmacy will obtain a written authorization from you, which you will have the right to revoke at any time. The pharmacy reserves the right to change the pharmacy's privacy practices and this Notice. Revisions to the Notice will be posted in the pharmacy and upon your request, provided to you in a paper format.

### **Uses and Disclosures**

**Treatment:** We will use the PHI that we receive from you to fill your prescription and coordinate or manage your health care.

**Payment:** The pharmacy will disclose your PHI to obtain payment or reimbursement from insurers for your health care services. This includes disclosure to worker's compensation. The pharmacy may use your PHI to contact you in order to gather information to collect reimbursement from insurers or you, the patient.

**Law Enforcement:** The pharmacy is required to use or disclose PHI about you as required and as limited by law. The pharmacy may use or disclose PHI about you to a government authority if it is reasonably believed you are a victim of abuse, neglect, or domestic violence. PHI may also be disclosed in the course of any judicial or administrative proceedings, provided that proper documentation is presented to the pharmacy. The pharmacy may disclose PHI to law enforcement officials for authorized purposes.

**Health Care Operations:** The pharmacy will use your PHI to conduct quality assessments, improvement activities, and evaluate the pharmacy workforce.

**Public Health and Health Oversight Activities:** The pharmacy will use or disclose PHI to a public health authority that is authorized by law to collect for the purpose of preventing or controlling disease, injury, or disability. PHI may also be disclosed to a health oversight agency for oversight activities that is authorized by law to conduct. The pharmacy may use or disclose PHI about you if it is believed in good faith to avert a serious threat to health or safety.

**Business Associates:** The pharmacy may disclose PHI about you to its business associates for services they may provide to or for the pharmacy.

**Information About Treatment Alternatives:** The pharmacy may contact you to notify you of alternative treatments and/or products.

**Health Related Benefits or Services:** The pharmacy may use your PHI to notify you of benefits and services the pharmacy provides.

The pharmacy may use your PHI to contact you in order to fill your prescriptions as requested.

For all other uses and disclosures, the pharmacy will obtain a written authorization from you. The pharmacy will only use or disclose pursuant to such an authorization. In addition, you may revoke such an authorization in writing any time. To revoke a previously authorized use, or disclosure, please contact the Office Manager at Hoagland Pharmacy.

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**Request Restrictions on certain and disclosures of your PHI:** You have the right to request additional restrictions of the pharmacy's use and disclosures of your PHI; however, the pharmacy is not required to accommodate a request. If you wish to request additional restrictions, please obtain the form "Request for Restriction of Uses & Disclosure" from the pharmacy and return the completed form to the Office Manager at Hoagland Pharmacy.

**The right to have your PHI communicated to you by alternative means or locations:** You have the right to request that the pharmacy communicate confidentiality with you using an address or phone number other than your residence. However, state and federal laws require the pharmacy to have an accurate address and home phone number in case of emergencies. The pharmacy will consider all reasonable requests. If you wish to request a change in your communicating address and/or phone number (to something other than your residence), please obtain a form "**Request for Alternative Arrangements for Confidential Communication**" from the pharmacy and return the completed form to the Administrative Director at Hoagland Pharmacy.

**The right to inspect and/or obtain a copy of your PHI:** You have the right to request access and/or obtain a copy of your PHI that is contained in the pharmacy for the duration the pharmacy maintains PHI about you. If you wish to inspect or obtain a copy of your PHI, please obtain a form "**Request for Access to Records**" from the pharmacy and return it to the Administrative Director at Hoagland Pharmacy. There may be a reasonable cost-based charge for photocopying documents. You will be notified in advance of incurring such charges.

**The right to amend your PHI:** You have the right to request and amendment of the PHI the pharmacy maintains about you, if you feel the PHI the pharmacy has maintained is incorrect or otherwise incomplete. **The right to receive an accounting of disclosures of your PHI:** You have the right to receive an accounting of certain disclosures of your PHI made by the pharmacy. If you wish to receive an accounting of disclosures of your PHI, please obtain a form "**Request for Accounting of Disclosures**" from the pharmacy and return it to the Administrative Director at Hoagland Pharmacy. Please be aware that such an accounting excludes uses and disclosures made for treatment, payment, or health care operations purposes.

**The right to receive additional copies of the Pharmacy's Notice of Privacy Practices:** You have the right to receive additional paper copies if this Notice, upon request. If you wish to receive additional copies, please ask a pharmacy staff member and they will provide you with a copy.

**Revisions to the Notice of Privacy Practices:** The pharmacy reserves the right to change and/or revise this Notice and make the new revised version applicable to all PHI received prior to its effective date. The revised Notice will be available upon request. The pharmacy will also post the revised version of the Notice in the pharmacy.

**Complaints:** If you believe your privacy rights have been violated, you may file a complaint with the pharmacy and/or to the Secretary of HHS. If you wish to file a complaint with the pharmacy, please contact the Office Manager. If you wish to file a complaint with the Secretary, please write to:

*The US Department of Health and Human Services  
200 Independence Avenue, SW  
Washington D.C. 20201*

The pharmacy will not take any adverse action against you as a result of filing a complaint.

**Contact Information:** If you have any questions on the pharmacy's privacy practices or for clarification on anything contained within the Notice, please contact:

*Hoagland Pharmacy Administrative Director  
2330 Yew Street  
Bellingham, WA 98229  
(360) 734-5413*

Notice is effective as of April 9, 2003

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## **Medicare Supplier Standards:**

Medicare regulations have defined standards that a supplier must meet to receive and maintain a supplier number. The supplier must certify in its application for billing privileges that it meets and will continue to meet the standards. The supplier standards can be found in 424 CFR Section 424.57 (c).

The following is an abbreviated version of the supplier standards:

1. A supplier must be in compliance with all applicable Federal and State licensure and regulatory requirements and cannot contract with an individual or entity to provide licensed services.
2. A supplier must provide complete and accurate information on the DMEPOS supplier application. Any changes to this information must be reported to the National Supplier Clearinghouse within 30 days.
3. An authorized individual (one whose signature is binding) must sign the application for billing privileges.
4. A supplier must fill orders from its own inventory or must contract with other companies for the purchase of items necessary to fill the order. A supplier may not contract with any entity that is currently excluded from the Medicare program, any State health care programs, or from any other Federal procurement or non-procurement programs.
5. A supplier must advise beneficiaries that they may rent or purchase inexpensive or routinely purchased durable medical equipment, and of the purchase option for capped rental equipment.
6. A supplier must notify beneficiaries of warranty coverage and honor all warranties under applicable State law, and repair or replace free of charge Medicare covered items that are under warranty.
7. A supplier must maintain a physical facility on an appropriate site. This standard requires that the location is accessible to the public and staffed during posted hours of business. The location must be at least 200sf and contain space for storing records.
8. A supplier must permit CMS, or its agents to conduct on-site inspections to ascertain the supplier's compliance with these standards. The supplier location must be accessible to beneficiaries during reasonable business hours and must maintain a visible sign and posted hours of operation.
9. A supplier must maintain a primary business telephone listed under the name of the business in a local directory or a toll-free number available through directory assistance. The exclusive use of a beeper, answering machine, answering service or cell phone during posted business hours is prohibited.
10. A supplier must have comprehensive liability insurance in the amount of at least \$300,000 that covers both the supplier's place of business and all customers and employees of the supplier. If the supplier manufactures its own items, this insurance must also cover product liability and completed operations.
11. A supplier must agree not to initiate telephone contact with beneficiaries, with a few exceptions allowed. This standard prohibits suppliers from contacting a Medicare beneficiary based on a physician's oral order unless an exception applies.
12. A supplier is responsible for delivery and must instruct beneficiaries on use of Medicare covered items and maintain proof of delivery.
13. A supplier must answer questions and respond to complaints of beneficiaries and maintain documentation of such contacts.
14. A supplier must maintain and replace at no charge or repair directly, or through a service contract with another company, Medicare-covered items it has rented to beneficiaries.
15. A supplier must accept returns of substandard (less than full quality for the particular item) or unsuitable items (inappropriate for the beneficiary at the time it was fitted and rented or sold) from beneficiaries.
16. A supplier must disclose these supplier standards to each beneficiary to whom it supplies a Medicare-covered item.
17. A supplier must disclose to the government any person having ownership, financial, or control interest in the supplier.
18. A supplier must not convey or reassign a supplier number; i.e., the supplier may not sell or allow another entity to use its Medicare billing number.
19. A supplier must have a complaint resolution protocol established to address beneficiary complaints that relate to these standards. A record of these complaints must be maintained at the physical facility.
20. Complaint records must include: the name, address, telephone number and health insurance claim number of the beneficiary, a summary of the complaint, and any actions taken to resolve it.
21. A supplier must agree to furnish CMS any information required by the Medicare statute and implementing regulations.
22. All suppliers must be accredited by a CMS-approved accreditation organization in order to receive and retain a supplier billing number. The accreditation must indicate the specific products and services, for which the supplier is accredited in order for the supplier to receive payment of those specific products and services (except for certain exempt pharmaceuticals). Implementation Date – October 1, 2009
23. All suppliers must notify their accreditation organization when a new DMEPOS location is opened.
24. All supplier locations, whether owned or subcontracted, must meet the DMEPOS quality standards and be separately accredited in order to bill Medicare.
25. All suppliers must disclose upon enrollment all products and services, including the addition of new product lines for which they are seeking accreditation.
26. Must meet the surety bond requirements specified in 42 C.F.R. 424.57(c). Implementation date – May 4, 2009
27. A supplier must obtain oxygen from a state-licensed oxygen supplier.
28. A supplier must maintain ordering and referring documentation consistent with provisions found in 42 C.F.R. 424.516(f).
29. DMEPOS suppliers are prohibited from sharing a practice location with certain other Medicare providers and suppliers.
30. DMEPOS suppliers must remain open to the public for a minimum of 30 hours per week with certain exceptions