

# PATIENT WELCOME HANDBOOK

**Specialty Pharmacy Services** 

Prepared For Patients, Caregivers, and Their Families



# **Table of Contents**

# **Specialty Pharmacy**

FAQs	Page I—3
Welcome	Page 4—5
Medication Safety	Page 6
Specialty Pharmacy Contacts and Info	Page 7
Medication Emergencies	Page 8
Hand Sanitation	Page 9
Home Safety	Page 10
Patient's Bill of Rights & Responsibilities	Page 11
Medicare Prescription Drug Coverage and Your rights	Page 12
Notice of Privacy Practices	Page 13—16



## **FAQs**

#### **Business Hours:**

Monday—Thursday 8:00 AM—5:30 PM and Friday 8:00 AM—4:00 PM

Urgent Concerns 24/7 Availability

## **Specialty Pharmacy:**

**Phone:** 615-810-8536 option 3

Email: NashvilleSP@nashvilleha.org

Website: www.nhpmeds.com

\*There is access to clinical staff 24 hours a day, 7 days a week. If anytime a clinical emergency comes up, we are on call 24 hours a day to help you!

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

- Have your doctor electronically send a prescription.
- Have your doctor phone in a prescription at 615-810-8536 option 3
- Have your doctor fax your prescription 615-695-9432
- Mail new prescription to: Nashville Healthcare Pharmacy, 131 French Landing Dr., Nashville, TN 37228

## How can I refill a prescription?

• Call 615-810-8536 option 3 during business hours Monday—Thursday 8:00 AM—5:30 PM, and Friday 8:00 AM—4:00 PM.

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

- Call 615-810-8536 option 3 during business hours Monday—Thursday 8:00 AM—5:30 PM, and Friday 8:00 AM—4:00 PM.
- Have your current pharmacy contact us at 615-810-8536 option 3.

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

 Call 615-810-8536 option 3 during business hours Monday—Thursday 8:00 AM—5:30 PM, and Friday 8:00 AM—4:00 PM.

#### What if I have a change in insurance during the course of my therapy?

• It is the patient's responsibility to notify providers of any changes in their policy and coverage. Failure to do so may result in non-payment by the insurance company. Please notify Nashville Healthcare Pharmacy as soon as possible if there will be a change in your coverage.



# 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 Nashville Healthcare 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?

• Call 615-810-8536 option 3 during business hours Monday—Thursday 8:00 AM—5:30 PM, and Friday 8:00 AM—4:00 PM, and a pharmacy representative will assist you.

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

- Call 615-810-8536 option 3 to speak directly with a member of the pharmacy staff.
- Emailing us at: NashvilleSP@nashvilleha.org
- By visiting our website at: www.nhpmeds.com
- Or by writing to: Nashville Healthcare Pharmacy, 131 French Landing Dr., Nashville, TN 37228

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

• The return of any medications or supplies for credit or reuse on another patient is prohibited by the 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

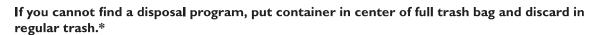
- Tight-fitting lid that cannot be punctured
- Does not leak

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

These containers can break or puncture easily.

## Discarding a household container:

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



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

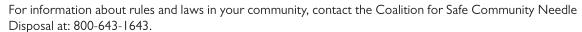
Please follow your community guidelines.



## 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



Information gathered from FDA.GOV.





## **Dear Specialty Pharmacy Patient,**

Welcome to Nashville Healthcare Pharmacy! It's a privilege to serve you for your specialty pharmacy needs.

Nashville Healthcare Pharmacy is a licensed pharmacy and is dedicated to maximizing the quality of life and dignity of the patients and clients we serve.

The Nashville Healthcare 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 Nashville Healthcare 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, **www.nhpmeds.com** for more information about our services.









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Urgent Concerns 24/7 Availability

## **Specialty Pharmacy:**

**Phone:** (615) 810-8536

Email: NashvilleSP@nashvilleha.org

Website: www.nhpmeds.com

Your experience with Nashville Healthcare 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 Nashville Healthcare Pharmacy, please call and ask to speak with a supervisor.

Nashville Healthcare 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.

Nashville Healthcare Pharmacy looks forward to providing you with the best service possible. Thank you for choosing us.

#### Sincerely,

The Nashville Healthcare Pharmacy Team



## **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 I 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. Nashville Healthcare Pharmacy welcomes your involvement in your care. With teamwork, we hope to give you the best experience possible.



## **Specialty Pharmacy**

Nashville Healthcare Pharmacy provides the most advanced medications that treat chronic, rare, or complex conditions found within the following specialties:

- 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 Nashville Healthcare 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 Nashville Healthcare Pharmacy team member will talk to you prior to refilling your medication. Please notify us of any changes in your medical status.

## **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**

<u>Nashville State Board of Pharmacy prohibits</u> 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 Nashville Healthcare Pharmacy. Nashville Healthcare Pharmacy delivery representatives are not allowed to remove these items from your home due to safety and infection control standards.



## **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 dean 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.



## **Home Safety**

Emergencies and environmental disasters can happen at any time. Nashville Healthcare 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 rubberbacked.
- 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.



- 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 Nashville Healthcare Pharmacy and the patient management program.
- Have personal health information shared with the patient management program, providers, and caregivers only in accordance with the state and federal law.
- Know the philosophy and characteristics of the patient management program.
- Receive administrative information regarding changes in or termination of the patient management program.
- 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 Nashville Healthcare Pharmacy 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 services provided by Insert your pharmacy name.
- 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.



## **NOTICE OF PRIVACY PRACTICES**

(Revised 06-14-2022)

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.



When it comes to your health information, you have certain rights. This section explains your rights and some of our responsibilities.

Get an electronic or	You can ask to see or get an electronic or paper copy of your medical	
paper copy of your medical record	record and other health information we have about you. Ask us how to do this.	
	<ul> <li>We will provide a copy or a summary of your health information, usually within 30 days of your request. We may charge a reasonable, cost-based fee.</li> </ul>	
Ask us to correct your	You can ask us to correct health information about you that you thinkis	
medical record	incorrect or incomplete. Ask us how to do this.	
	<ul> <li>We may say "no" to your request, but we'll tell you why in writing within 60 days.</li> </ul>	
Request confidential	You can ask us to contact you in a specific way (for example, home or office)	
communications	phone) or to send mail to a different address.	
	We will say "yes" to all reasonable requests.	
Ask us to limit what we	You can ask us <b>not</b> to use or share certain health information for	
use or share	treatment, payment, or our operations.	
	<ul> <li>We are not required to agree to your request, and we may say "no"</li> </ul>	
	if it would affect your care.	
	If you pay for a service or health care item out-of-pocket in full, you can ask	
	us not to share that information for the purpose of payment or our	
	operations with your health insurer.	
Get a list of those with	We will say "yes" unless a law requires us to share that information.	
whom we've shared	You can ask for a list (accounting) of the times we've shared your health information for six years prior to the data you ask, who we shared it with	
information	information for six years prior to the date you ask, who we shared it with, and why.	
Illioillation	We will include all the disclosures except for those about treatment,	
	payment, and health care operations, and certain other disclosures (such	
	as any you asked us to make). We'll provide one accounting a year for free	
	but will charge a reasonable, cost-based fee if you ask for another one	
	within 12 months.	
Get a copy of this	You can ask for a paper copy of this notice at any time, even if you have	
privacy notice	agreed to receive the notice electronically. We will provide you with a	
(A)	paper copy promptly.	
Choose someone to act	If you have given someone medical power of attorney or if someone is your	
for you	legal guardian, that person can exercise your rights and make choices	
	about your health information.	
	We will make sure the person has this authority and can act for you before	
	we take any action.	



File a complaint if you feel your rights are violated	<ul> <li>You can complain if you feel we have violated your rights by contacting us using the information on page 1.</li> <li>You can file a complaint with the U.S. Department of Health and Human Service Office for Civil Rights by sending a letter to 200 Independence Avenue, S.W. Washington, D.C. 20201, calling 1-877-696-6775, or visiting</li> </ul>
	www.hhs.gov/ocr/privacy/hipaa/complaints/.

Your Choices For certain health information, you can tell us your choices about what we share. If you have a clear preference for how we share your information in the situations described below, talk to us. Tell us what you want us to do, and we will follow your instructions.

In these cases, you have both the right and choice to tell us to:	<ul> <li>Share information with your family, close friends, or others involved in your care</li> <li>Share information in a disaster relief situation</li> <li>Include your information in a hospital directory</li> <li>Contact you for fundraising efforts         If you are not able to tell us your preference, for example, if you are unconscious, we may go ahead and share your information if we believe it is in your best interest. We may also share your information when needed to lessen a serious and imminent threat to health or safety.     </li> </ul>
In these cases, we never share your information unless you give us written permission:	<ul> <li>Marketing purposes</li> <li>Your information</li> <li>Most sharing of psychotherapy notes</li> </ul>
In the case of fundraising:	<ul> <li>We may contact you for fundraising efforts, but you can tell us not to contact you again.</li> </ul>

Our Uses and Disclosures

**How do we typically use or share your health information?** We typically use or share your health information in the following ways.

Treat you	<ul> <li>We can use your health information and share it with other professionals who are treating you.</li> </ul>	<b>Example:</b> A doctor treating you for an injury asks another doctor about your overall health condition.
Run our organization	<ul> <li>We can use and share your health information to run our practice, improve your care, and contact you when necessary.</li> </ul>	<b>Example:</b> We us health information about you to manage your treatment and services
Bill for your services	<ul> <li>We can use and share your health information to bill and get payment from health plans or other entities.</li> </ul>	<b>Example:</b> We give information about you to your health insurance plan so it will pay for your services.



How else can we use or share your health information? We are allowed or required to share your information in other ways — usually in ways that contribute to the public good, such as public health and research. We have to meet many conditions in the law before we can share your information for these purposes. For more information see:

www.hhs.gov/ocr/privacy/hipaaa/understanding/consumers/index.html.

Help with public health and safety issues	<ul> <li>We can share health information about you for certain situations such as:</li> <li>Preventing disease</li> <li>Helping with product recalls</li> <li>Reporting adverse reactions to medications</li> <li>Reporting suspected abuse, neglect, or domestic violence</li> <li>Preventing or reducing a serious threat to anyone's health orsafety</li> </ul>
Do research	We can use or share your information for health research.
Comply with the law	<ul> <li>We will share information about you if state or federal laws, require it, including with the Department of Health and Human Services if it wants to see that we're complying with federal privacy law.</li> </ul>
Respond to organ and tissue donation requests	<ul> <li>We can share health information about you with organ procurement organizations.</li> </ul>
Work with a medical examiner or funeral director	<ul> <li>We can share health information with a coroner, medical examiner, or funeral director when an individual dies.</li> </ul>
Address workers' compensation, law enforcement, and other government requests	<ul> <li>We can us or share health information about you:         <ul> <li>For workers' compensation claims</li> <li>For law enforcement purposes or with a law enforcement official</li> <li>With health oversight agencies for activities authorized by law</li> <li>For special government functions such as military, national security, and presidential protective services.</li> </ul> </li> </ul>
Respond to lawsuits and legal actions	<ul> <li>We can share health information about you in response to a courtor administrative order, or in response to a subpoena.</li> </ul>

The State of Tennessee also has privacy laws that are very similar to the federal laws. This means that if your privacy is breached, you may sue the health care provider in state court.



#### Our Responsibilities

- We are required by law to maintain the privacy and security of your protected health information
- We will let you know promptly if a breach occurs that may have compromised the privacy or security of your information
- We must follow the duties and privacy practices described in this notice and give you a copy of it.
- We will not use or share your information other than as described here unless you tell us we can in writing. If you tell us we can, you may change your mind at any time. Let us know in writing if you change your mind.

For more information see www.hhs.gov/ocr/privacy/hipaa/understanding/consumers/noticep.html.

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, and on our website. This notice is effective: June 14, 2022.

This Notice of Privacy Practices applies to the following organizations:

Nashville General Hospital and all Outpatient Service Departments

The Clinics at Nashville General Hospital

Privacy Officer: Julie Groves

Address: 1818 Albion Street, Nashville, TN

37208

Phone: 615-341-4421

Email: Julie.groves@nashvilleha.org Website: http://nashvillegeneral.org/





# **Connect with Us**

**Phone Number:** (615) 810-8536

Fax: (615) 695-9432

Email: NashvilleSP@nashvilleha.org

Address: 131 French Landing Dr., Nashville, TN 37228

Follow @nashvillegeneral Pharmacy Services







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