## **ACCREDO SPECIALTY PHARMACY**

PATIENT HANDBOOK

# Patients are at the heart of all that we do







This easy-to-use guide explains what you can expect in your relationship with Accredo, and offers helpful information for your reference.

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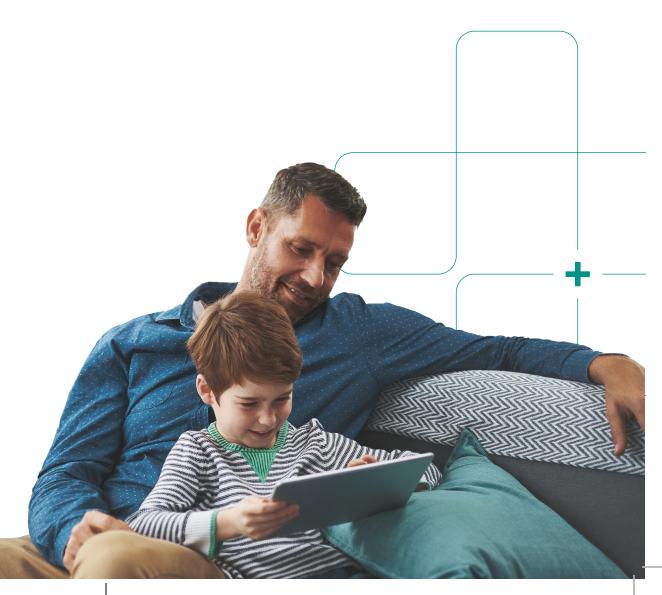
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Whether you're starting treatment for a specialty condition or are simply new to Accredo, **your care** is our top concern.

As your specialty pharmacy, we understand that treatment can be difficult and stressful, and we're here for you every step of the way. We do more than fill and deliver your specialty medication — we help you manage your health condition so you can focus on living your life.



## Accredo at a glance

We are a full-service specialty pharmacy that provides personalized care to each patient. With Accredo, your specialty medications are quickly delivered to a location of your choice, or your prescriber's choice, at no additional charge. We save you time and trouble with toll-free access to clinical support staff who are available to answer your specialty medication questions 24 hours a day, 7 days a week.

### Our commitment to you

At Accredo, we do everything we can to simplify your treatment with specialty medications. We understand that each patient is unique and has different needs. That's why our services are tailored to you.

Our team of specialty-trained pharmacists, nurses, patient care advocates, social workers and insurance coordinators are here to help you achieve the best possible outcomes from your therapy.



## Hours of operation (May vary based on therapy)

#### **Patient Care Contact Center:**

- + Monday Friday: 8 AM 11 PM (Eastern)
- + Saturday: 8 AM 5 PM (Eastern)

#### Billing and Reimbursement department:

+ Monday - Friday: 8 AM - 7 PM (Eastern)

#### Clinical staff is available:

+ Monday - Friday: 9 AM - 9 PM (Eastern)

### A licensed pharmacist is available 24 hours a day, 7 days a week

#### Closed on the following holidays:

- + New Year's Day (January 1)
- + Memorial Day (last Monday in May)
- + Independence Day (July 4)
- + Labor Day (first Monday in September)
- + Thanksgiving (fourth Thursday in November)
- + Christmas (December 25)

## Important forms

Please read each of these forms carefully upon receipt, then complete and return them to Accredo.

#### + Patient Medication Profile

This form is used to update your medical history as discussed with your Accredo nurse or pharmacist.

#### + Notice of Privacy Practices

This notice describes how your medical information may be used and disclosed and how you can get access to this information. Please detach and complete the "Acknowledgement of Notice of Privacy Practices."

#### + Patient Consent Agreement

This form (if applicable) is required by your insurance company and enables direct payment of services to Accredo. It also informs you of your rights and responsibilities.

## Medication and supplies

## **Ordering refills**

A patient care advocate will call you before you run out of your medications to check your progress and coordinate delivery of your next refill. If you need anything before we call you, please call the toll-free phone number printed on your prescription label. Also, if your medication requires a prior authorization and your prescriber informs you that the prior authorization has been completed, please call Accredo. You can refill many specialty medications online at accredo.com or on the Accredo mobile app. Your prescription may be processed by any pharmacy within the Express Scripts, Inc. family of pharmacies.

## Delivery of your specialty medications

We deliver your specialty medications to your home, your prescriber's office¹ or an approved alternate location. We also include all needed supplies, such as needles, syringes and alcohol swabs to administer your medications. Accredo packages medications so they are protected during delivery. If your medications need to be kept cold, we ship them in specialized packaging. We will coordinate the delivery to make sure you're there to receive your shipment. If you cannot be there to accept the package, we can arrange for it to be left at your home or an approved alternate location.

## Receiving a delivery

#### Check each delivery to make sure:

- + The receipt matches what is actually in the box.
- + The supplies are in good condition; check for signs of possible hidden damage such as holes, dents, leaks or water marks.
- + All of the medication has a prescription label with your name and instructions for use.
- + If your medication is shipped in special packaging to maintain temperature during shipping, check storage instructions and store immediately according to those instructions.
- + If refrigerated medications are hot to the touch when received, or if you have any other concerns about your order, contact Accredo immediately.

## Storing medication and supplies

All medications and supplies should be kept out of children's reach. The label on your prescribed medication provides storage instructions. Please be sure to follow these instructions to maintain your medication's effectiveness.

Careful monitoring of your stock on hand will help ensure you do not run out of items you need. Here are a few hints for managing your medication and supplies inventory:

- + Always place your new delivery of medication and supplies behind your current stock to help you use items before they expire.
- + Always check the expiration dates and never use outdated medication or supplies.
- + If you run short of any item before your next scheduled delivery, call Accredo immediately. Never wait until you use the last of an item to call for more.

## **Payment policy**

Accredo will bill your drug insurance company for you. You may still have to pay a part of the cost, which is called your copayment. You will be responsible for paying your copayment when you order your medication or refill. We will tell you the exact amount you need to pay Accredo. This amount has to be paid when you order your next refill.

If for any reason you owe a balance, that amount needs to be paid before your next delivery. We accept Visa®, Mastercard®, American Express®, Discover® and electronic checks (checks over the phone). If you need help in arranging a payment plan for the money you owe, please call our Billing and Reimbursement department at 866.943.9044. Call Accredo if you are aware of an insurance change.

## Returned goods policy

The State Board of Pharmacy Regulations forbids the resale or reuse of a prescription item that was previously dispensed. As a result, no credit can be issued for any unused or excess products. If your medication or supplies are defective, contact Accredo and a patient care advocate will arrange a return and reship of medication.

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## Clinical support

Accredo is here to support you every step of the way and you can rely on our specialty-trained clinical team to be there when you need them. Our team of clinicians includes pharmacists, nurses, dieticians and social workers.

## Pharmacist and nursing assistance

Our pharmacists and nurses are specially trained for the medication and equipment that you're using, and are here to answer your questions about your treatment plan. If you have any questions regarding your treatment, please call an Accredo pharmacist or nurse at the toll-free phone number printed on your prescription label. In the case of an emergency, call 9-1-1. If you have an urgent need related to your medication, a licensed pharmacist is available 24 hours a day, 7 days a week.

## Patient care management programs

Accredo offers several comprehensive patient care management programs targeted to specific major-medical conditions. Within these therapy-specific clinical programs, our clinical staff partner with patients and caregivers on their health journey through clinical evaluation, ongoing health monitoring, assessment of educational needs, and medication management. You can expect our clinical staff to reach out to you periodically to address your questions and to assist with any medication challenges you are experiencing. This clinical support is provided to you at no additional cost, and your participation is completely voluntary. Each time you call to refill your medication, you will be offered the chance to speak with a pharmacist or nurse about your therapy.

# Participants in a patient care management program have the right to:

- + Know about the philosophy and characteristics of the program upon enrollment.
- + Receive information about the program, including administrative information regarding changes in or termination of the program, upon request.
- + Have personal information shared with the program only in accordance with state and federal laws.

#### When to contact Accredo:

- + You need to transfer a prescription.
- + You have questions or are having challenges taking your medication.
- + You suspect a reaction to your medication or develop a new allergy.
- + Any of your medications change or are discontinued.
- + You have been hospitalized or a hospitalization is planned.
- + Your address or phone number changes or you lose phone service.
- + You are unavailable to receive your shipment.
- + Your payment source changes.
- + You have questions or concerns, especially if you have any safety or quality concerns regarding our services.
- + In the event of a natural disaster and you have to relocate, please provide us your temporary address and contact information.

# Cleanliness and safety

### Hand washing instructions

It's very important to avoid infection. The best way to make sure you don't get an infection is washing your hands. Always wash your hands before and after you prepare or give any medication to yourself or someone else or before and after you handle supplies.

- **1.** Collect the supplies:
  - + Soap (an antibacterial soap works best)
  - + Paper towels or a clean cloth towel
- 2. Place a small amount of soap on your hands.
- 3. Rub your hands briskly together for at least 20 seconds.
- 4. Rinse your hands with warm water.
- 5. Dry your hands with a paper towel or a clean cloth towel.
- Turn off your faucet with the towel.
- 7. If you touch anything (for example, your hair), sneeze into your hands or feel that your hands may no longer be clean, wash your hands again before continuing with your care.
- 8. If no water supply is available, use a 60%–95% alcohol-based antibacterial hand cleanser and rub hands together for at least 15 seconds until hands are dry.

## How to dispose of home-generated biomedical waste

Home-generated biomedical waste is any type of syringe, lancet or needle ("sharps") used in the home to either inject medication or draw blood. Special care must be taken with the disposal of these items to protect you and others from injury, and to keep the environment clean and safe.

Based on your therapy, an appropriate size and type of sharps container will be provided to you. The following simple rules will help to ensure your safety:

#### **Sharps**

- + Place all needles, syringes, lancets and other sharp objects into a sharps container.
- + If a sharps container is not available, a hard plastic or metal container with a screw-on top or other securable lid should be used.
- + Before discarding, reinforce the top with heavy-duty tape.
- + Do not use clear plastic or glass containers.
- + Containers should be no more than 3/4 full.

### Disposal

- + Check with your local waste collection service to make sure these disposal procedures are acceptable in your community.
- + Consult with your local health or fire department for the disposal policy of these types of items in your area.
- + Ask your prescriber about the possibility of disposal of items in their office during your next visit or visit the Safe Needle Disposal website: https://safeneedledisposal.org.

### **Needle-stick safety**

- + Never replace the cap on needles.
- + Dispose of used needles in a disposal container immediately after use.
- + Plan for the safe handling and disposal of needles before using them.
- + Promptly report all needle stick or sharps-related injuries to your prescriber.
- + If your therapy does not involve the use of needles or sharp items, you do not need a sharps container.

# Accredo pharmacy emergency disaster information and helpful hints

In the event of a disaster in your area, please call the toll-free phone number printed on your prescription label to instruct us where to deliver your medication. This will ensure that your therapy will not be interrupted.

#### Fire

- If someone is bedridden, tie a knot in the head and foot of the sheet.
  Using the sheet, pull the person to safety. If two people are available, make a chair from the rescuers' arms and carry the patient to safety.
- 2. If safe, alert the fire department. Otherwise, evacuate the area.
- **3.** Turn off oxygen (if applicable) and try to contain the fire by closing off any access, such as doors.
- **4.** Attempt to extinguish the fire only if it is in a small localized area. Otherwise, evacuate building and notify the fire department when you are safe.

#### Natural disasters (earthquake, hurricane, tornado)

In disaster-prone areas, store food and extra bottled water. Have a transistor radio, flashlights and extra batteries on hand. Report any special needs for a backup generator to electric and/or gas company.

- 1. Check for injuries.
- 2. Check for any gas or water leaks and turn off appropriate valves.
- 3. Stay away from windows or broken glass. Wear shoes at all times.
- **4.** Evacuate area if necessary. Go to the nearest shelter and notify the organizers of any special needs.
- 5. If you are in a disaster-prone area, have sufficient supply of medication on hand in case of emergency.

#### Flood

In flood-prone areas, store extra food and extra bottled water. Have a battery-operated radio, flashlights and batteries available. Shut off valves for gas and water. Report any special needs for backup generator to the electric/gas company.

- 1. If applicable, unplug pump unless water has come in contact with the IV pole.
- 2. Evacuate the area.
- 3. Contact local law enforcement, civil defense or emergency preparedness.

#### Power outage

- 1. Notify your gas and/or electric company if there is a loss of power. Report any special needs for a backup generator.
- 2. Have a battery-operated radio, flashlights, batteries and/or candles available. (If using oxygen, turn off before lighting candles.)

# Rights and responsibilities

## **Patient Bill of Rights**

#### As an Accredo patient, you have the right to:

- 1. Be treated with dignity, courtesy and respect.
- 2. Have your property, beliefs, preferences and values respected.
- 3. Have your reports of pain believed and be given information about pain and pain relief measures by a member of the clinical staff.
- **4.** Know the name and title of Accredo personnel who are providing service, to expect that they are qualified to provide your care and to speak with their supervisor if requested.
- **5.** Receive services regardless of your age, race, color, national origin, religion, sex, disability, gender identity or any other category protected by law.
- **6.** Receive information in a way you can understand to help you make informed decisions about your care.
- 7. Be involved in decisions regarding your care.
- **8.** Be informed of the nature, purpose, frequency and outcomes, including potential unexpected outcomes of service.
- **9.** Refuse all or part of our care and services and be told the consequences of that decision.
- 10. Expect timely delivery of service.
- **11.** Receive information regarding community resources and be informed regarding any financial relationships between our company and other providers to which you are referred by us.
- 12. Expect us to coordinate care with your prescriber and other providers.
- 13. Receive notice of impending discharge or transfer to another provider.
- **14.** Expect confidentiality of your patient records and a copy of your records upon request.

- **15.** Be advised of your financial responsibility for payment of our services, when initiated or when changes occur.
- **16.** Have your personal representative, family or guardian exercise these rights on your behalf if you are unable to do so yourself in accordance with law and regulations.
- 17. Voice grievances about your care or our service without fear of reprisal or unreasonable interruption of care. Complaints shall be reported to Accredo management.
- **18.** Be free from mental, physical, sexual and verbal abuse, neglect or exploitation.
- 19. Speak with a healthcare professional.
- 20. Patients participating in a Specialty Clinical Care Management Program have the right to:
  - + Know about the philosophy and characteristics of the program upon enrollment.
  - + Receive information about the program including administrative information regarding changes in, or termination of, the program upon request.
  - + Have personal health information shared with the program only in accordance with state and federal law.



#### I understand I have the responsibility to:

- Provide accurate and complete information regarding my medical history (past illnesses, hospitalizations, allergies and other important medical information), current condition (including medications used) and any payors that may cover my care, and promptly inform you of changes in this information.
- 2. Agree to accept healthcare workers regardless of age, race, color, national origin, religion, sex, disability or any other category protected by law.
- Remain under prescriber care, notify you immediately of changes in my prescriber, medication, treatment or symptoms and notify my treating prescriber of participation in a care management program, if applicable.
- 4. Maintain a safe environment for homecare (if required), including telephone service, which can be cell or land line, protection of my valuables, and a safe environment for healthcare workers who provide care during scheduled visits.
- 5. Discuss pain relief options, work to develop a pain management plan, ask for pain relief when pain begins, help personnel assess my pain, tell if my pain is not relieved, and state any worries about taking pain medications.
- **6.** Notify you prior to the scheduled visit if I will not be available, do not want service or wish to discontinue services in the home.
- 7. Treat your staff with respect, courtesy and consideration and ask for information about anything I do not understand about my care.
- **8.** Pay for care and services, if required, as agreed in the Patient Consent Agreement form.
- Recognize there may be consequences if I refuse treatment or fail to adhere to my therapy, which may include changes in reimbursement eligibility and discharge from services.
- **10.** Be part of creating and following my care plan, making sure it is up to date and participate in the care I receive.
- 11. Provide you with my "living will," durable power of attorney or other advance directives about my care, if applicable. In the absence of a "do not resuscitate" order, resuscitation may be attempted if staff is CPR-certified.

## **Patient Concerns and Complaints**

We want to provide complete satisfaction with your therapy. If you have any issues or concerns relating to your medications, services received, delivery or any other topic related to your order:

- + Please call our Patient Care contact center using the number printed on your prescription label. A representative will assist you.
- + You may also contact our general patient assistance line at 800.803.2523.
- + If you wish to file a written complaint please mail your concern to:

Accredo, 1620 Century Center Pkwy, Ste. 109, Memphis, TN 38134-3838

Should you have an unresolved safety or quality issue, please contact Accredo first using the number printed on your prescription label so we can correct the problem. If you still have concerns after discussing your issue with us:

+ A complaint can be sent to a licensing authority or The Joint Commission at www.jointcommission.org by using the "Report a Safety Concern" link in the "Connect With Us" section on the home page of the website or by mail to:

The Office of Quality & Patient Safety, The Joint Commission, One Renaissance Boulevard, Oakbrook Terrace, Illinois 60181



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## **Quick Start Guide**

#### **Contacting Accredo Specialty Pharmacy**

If you have questions, you can call us at 800.803.2523 or the number on your prescription label. If you're hearing impaired, call our toll-free TTY line at 800.955.8770.

#### **Hours of operation** (May vary based on therapy)

#### **Patient Care Contact Center:**

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#### 1. As allowable by law.

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