

## HIPAA PRIVACY NOTICE

All patient healthcare information will be kept confidential. However, Diabetic Soles may be required to use this information in one or more of the following ways:

- *Treatment.* We may utilize or possibly disclose your healthcare information to your healthcare provider, only in order to assist Diabetic Soles in supplying your medical products in the treatment of your condition.
- *Payment.* We may be required to disclose your healthcare information in order to collect payment from third parties for services rendered or supplies provided.
- *Delivery Reminders.* We may need to use your information to contact you.
- *Release of Information to Family and Friends.* We may need to provide information to an individual if you are being cared for by a family member or friend.
- *Disclosures Required by Law.* Our organization will disclose health information when we are required to do so by federal, state, or local law.
- *Public Health Risks, Health Oversight Activities, and Worker's Compensation.*
- *Lawsuits, Law Enforcement, Threats to Health and Safety, Military and National Guard.*

### YOUR RIGHTS REGARDING YOUR IDENTIFIABLE HEALTH INFORMATION

- *Confidential Communications.* You have the right to request that our organization communicate with you about you and your health. In addition, you may request that this communication take place in a confidential environment. This request must be given in writing.
- *Requesting Restriction.* You may request a restriction in the use of disclosure of your personal health information to individuals involved in the dispensing of medical supplies. This request must be in written form.
- *Inspection and Copies.* You have the right to request a copy of the identifiable health information that we may utilize for your care. This request must be in written form.
- *Amendment.* You may request that we amend your information if you think that we have incorrect information in our records. This request must be in writing.
- *Accounting and Disclosures.* You have the right to request a list of any disclosures our organization makes of your personal information, such as your medical doctor or to our technician.
- *Notice.* You have a right to a copy of this notice.
- *Complaints.* You have the right to file a complaint if you believe your privacy rights have been violated.

## GRIEVANCE POLICY

We want you to always be satisfied with the products and services that you receive from our company. If at any time you are concerned, have a problem, or wish to voice a grievance, you may do so without fear of reprisal. We encourage you to let us know when you are not satisfied. Our manager will investigate your grievance within 72 hours, make every reasonable effort to resolve the concern to our mutual satisfaction. We encourage you to voice your concerns and allow our staff the opportunity to resolve any problems or grievances that may arise. You may also call the **OIG Hotline** at **1-800-792-8820** to report abuse, neglect or exploitation. We look forward to successfully meeting your healthcare needs.

## PATIENTS RIGHTS & RESPONSIBILITIES

Patients who receive home medical equipment services from Diabetic Soles are entitled to be notified, in writing, of their rights and responsibilities before services begin and to exercise those rights.

*As a patient of Diabetic Soles, you have the right to:*

- Receive a timely response from our company regarding your request for equipment and service.
- Be informed of our policies and procedures.
- Be informed of all charges for services, including eligibility for third party reimbursement.
- Voice a grievance with our company by calling **678-919-9128**, or you may call the **OIG Hotline** without fear of restraint or reprisal in the services you are receiving. **TO REPORT ABUSE, NEGLECT OR EXPLOITATION, PLEASE CALL 1-888-662-7030.**
- Appropriate quality of home medical equipment and service without regard of race, creed, sex, national origin, sexual preference, handicap or age.
- Respectful and courteous treatment by all members of our company.
- Know the names and the preparation of those who provide services to you or on your behalf.
- Receive complete and accurate information concerning the equipment and services, in a language you can reasonably be expected to understand.
- Receive necessary information to make an informed consent.
- Participate in the development of a plan of care to meet your healthcare needs with periodic updates and revisions as appropriate.
- Have all information regarding the products and services you received treated confidentially.
- Receive information about anticipated transfer or discharge from our services.
- Review your clinical records upon written request.
- If for any reason you need to contact our office, please do so by calling **678-919-9128**.

**Office Hours:** Monday-Thursday 10:00 a.m. - 4:00 p.m. Fridays by *appointment only*.

**Address:** 1290 Kennestone Circle, Building A, Suite 101, Marietta, GA 30066

*As a patient of Diabetic Soles, you have a responsibility to:*

- Give accurate and complete information pertinent to your equipment and service needs.
- Assist in providing and maintaining a safe environment.
- Notify our office if any scheduled visits need to be changed.
- Notify our office if any equipment or supplies you received from our office, become unusable or malfunction.
- Adhere to manufacturer's guidelines for the recommended use of the medical equipment provided to you.
- Notify our company of any changes in your physician, insurance plan, payer source, or other providers that will affect the services you receive from our company.
- Request information concerning anything pertaining to your medical equipment or services you do not understand.
- Notify us any concerns, problems or dissatisfaction of the products or services we provide you.

## **MEDICARE DMEPOS SUPPLIER STANDARDS**

**Note: This is an abbreviated version of the supplier standards every Medicare DMEPOS supplier must meet in order to obtain and retain their billing privileges. These standards, in their entirety, are listed in 42 C.F.R. 424.57(c).**

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 200 square feet 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 – 10/01/2009.*
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.

**Palmetto GBA (National Supplier Clearinghouse) • P.O. Box 100142 • Columbia, SC 29202-3142**