



Reliable

DIABETES CARE

PATIENT INFORMATION



For Supplies / Questions

Email:

PatientCare@ReliableDiabetesCare.com

781-501-9075

RELIABLE RESPIRATORY, INC.

1504 Boston Providence Turnpike Suite 11A

Norwood, MA 02062

Toll Free 866-551-3335

www.ReliableDiabetesCare.com



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PATIENT INFORMATION BROCHURE

Reliable Respiratory welcomes you. We are committed to providing each of our customers with the highest quality of health care equipment and service.

Your service from Reliable Respiratory includes:

- Verbal and written instructions regarding the safe operation of your equipment
- Access to emergency "on-call" services 24 hours a day, 7 days a week
- Reimbursement assistance from our administrative office

MISSION STATEMENT

Our main mission as a company is to meet the needs of our customers in our diverse communities while excelling at customer service. We want to help effectively treat all of our patients. Should our customers have any questions or concerns, we pride ourselves in being able to resolve them promptly.

HOURS OF OPERATION

Monday-Friday 9:00am to 5:00pm

After Hours/Weekends:

You may reach a service technician on-call at 866-551-3335.

Please provide your name and telephone number and your call will be returned promptly.

PRODUCT LINE

The following is a partial list of our available products. Please feel free to call for further information on these and any other services you may need.

BiPAP Therapy
CPAP Therapy
Defibrillators
Home Oxygen Equipment
CGMs and Insulin Pumps

Nebulizers
Oximeters
Specialty Medical Products
Ventilators

RESMED An authorized ResMed distributor

SAFETY STATEMENT

Your physician has prescribed the use of a piece of medical equipment for your comfort and safety. It is essential that you use this device safely and correctly to benefit from its use. The following suggestions may be helpful as you maintain operation of your equipment:

1. Always follow directions given to you by Reliable Respiratory staff.
2. Always use the safety features and devices provided.
3. Extension cords should not be used. Place equipment close to outlet.
4. Electrical devices should be plugged into a properly grounded outlet.
5. Keep clear paths in your home. Move objects that you could trip over.
6. Keep all emergency telephone numbers by your phone.
7. Always use safety locks and make sure they are locked in position.
8. Never reset, bypass or cover alarms.
9. Never smoke or have fire around oxygen devices.
10. Do not overuse plugs and outlets with extension or multi-plug connectors.
11. Do not put covers on your oxygen lines.
12. Power sources should meet or exceed the amperage requirements.
13. Only properly trained, responsible adults should operate equipment.
14. Always call Reliable Respiratory with questions regarding safety operations.
15. Use fire and smoke alarms and test them monthly.

EMERGENCY PREPAREDNESS

Please review and follow these instructions:

- If you have a disability or illness that inhibits your mobility, we encourage you or your family member to notify the local police and fire department, as well as the utility company, that you may need their assistance in an emergency.
- If you decide to stay at home, please let our office know if your home can be reached by a delivery truck.
- In a disaster, if you must leave your home, please call our office to arrange for delivery of your supplies. Be ready to provide new location information.
- Under disaster conditions, a representative or the company will try to contact you. It may be difficult for us to reach you, so if possible, please always try to contact the company.
- If you need emergency medical care or medical supplies, go to a local hospital in the nearest unaffected area.
- All oxygen patients who lose electricity should immediately use their backup system, if necessary. Calculate how much time you have on the backup. We will try to maintain contact with you and, as soon as we can safely and legally, we will take care of your needs. If backup supply becomes low and concern arises, proceed to a hospital.

EXCHANGE / REPAIR POLICY

Reliable Respiratory honors all warranties expressed and implied under applicable State law and does not charge the beneficiary or Medicare program for the repair or replacement of Medicare covered services covered under warranty. All rental equipment is subject to exchange at no cost to the patient.

ADVANCED DIRECTIVES

We respect your rights to make your own medical treatment decisions. You have the right to decide whether to accept or reject medical treatment, including whether to continue medical treatment and any other procedures that would prolong your life artificially. It is Reliable Respiratory's company policy to call 911 if you are found unresponsive or in serious medical distress. If you have an advanced directive ("living will"), please inform us so that we can inform the responding Emergency Medical Technicians of your advanced directive.

COMMUNITY RESOURCES

American Lung Association 1-800-548-8252 www.lungusa.org

American Sleep Apnea Association 202-293-3650 www.sleepapnea.org

Asthma and Allergy Foundation of America 1-800-727-8462 www.aafa.org

CLIENT RESPONSIBILITIES

- Adhere to the plan of treatment or service established by their physician. Participate in the development of an effective plan of care which will involve the management of pain, if appropriate.
- Provide medical and personal information necessary to plan and provide services.
- Communicate any information, concerns and/or questions. Be available at the time deliveries are made and allow Reliable Respiratory representatives to enter their residence at reasonable times to repair or exchange equipment or to provide care.
- Notify the company if he/she is going to be unavailable.
- Treat company personnel with respect and dignity without discrimination. Provide a safe environment for staff to provide care and services.
- Care for and safely use equipment, according to instructions provided, for the purpose it was prescribed and only for/on the client for whom it was prescribed.
- Monitor the quantity of oxygen, nutritional products, medications and supplies in their homes and reorder as required to assure timely delivery of the required items.
- Protect equipment from fire, water, theft or other damage. The client agrees not to transfer or allow his/her equipment to be used by any other person without prior written consent of the company and further agrees not to modify or attempt to make repairs of any kind to the equipment.
- Except where contrary to federal or state law, the client is responsible for equipment rental and for sale charges for which the client's insurance company or companies does not pay. The client is responsible for settlement in full of his/her accounts.
- The company should be notified of any changes in the client's physical condition, physician's prescription or insurance coverage. Notify the company immediately of any address or telephone changes whether temporary or permanent

CLIENT INFORMATION

After Hours Services:

An answering service will answer Reliable Respiratory's phones after normal business hours. You may leave a message that you wish to speak to a company representative and the on-call staff will be contacted. Only equipment requiring emergency maintenance or replacement (i.e. life support, oxygen) will be serviced after hours.

Complaint Procedure:

You have the right and responsibility to express concerns, dissatisfaction or make complaints about services you do or do not receive without fear or reprisal, discrimination or unreasonable interruption of services. The company telephone number is 866-551-3335. When you call, ask to speak with the Operations Manager, Quality Improvement Coordinator, Supervisor or the CEO.

Reliable Respiratory has a formal grievance procedure that ensures that your concerns shall be reviewed and an investigation started within 48 hours. Every attempt shall be made to resolve all grievances within 14 days. You will be informed in writing of the resolution of the complaint/grievance.

If you feel the need to discuss your concerns, dissatisfaction or complaints with other than Reliable Respiratory staff, the State of Massachusetts provides a Home Health "Hot Line". The hours of operation are 9am to 5pm and the number is 1-800-447-8477 or contact Medicare at 1-800-633-4227 or The Joint Commission at 1-800-994-6610. The community service number for Patient Facilities is 1-800-462-5540.

MEDICARE DMEPOS SUPPLIER STANDARDS

DMEPOS suppliers have the option to disclose the following statement to satisfy the requirement outlined in Supplier Standard 16 in lieu of providing a copy of the standards to the beneficiary.

The products and/or services provided to you by Reliable Respiratory, Inc. are subject to the supplier standards contained in the Federal regulations shown at 42 Code of Federal Regulations Section 424.57(c). These standards concern business professional and operational matters (e.g. honoring warranties and hours of operation). The full text of these standards can be obtained at <http://www.med.umich.edu/pdf/dmepos-supplier-standards.pdf>. Upon request we will furnish you a written copy of the standards.

CLIENTS BILL OF RIGHTS AND RESPONSIBILITIES

A formal Client Bill of Rights is designed to recognize, protect and promote the rights of each client to be treated with dignity and respect. These rights may be exercised by the client or the client's representative. The Client Bill of Rights must include the intent of each of the following statements. The right to be fully informed orally and in writing of the following before care is initiated.

You have the Right to be fully informed of:

1. services/products available directly or by contract.
2. the organization ownership and control: Reliable Respiratory, an S Corporation, is the provider of service.
3. any specific charges for services to be paid by client and those charges covered by insurance, third party payment or public benefit program .
4. billing policies, payment procedures and any changes in the information provided on admission as they occur within 15 days from the date that the organization is made aware of the change.
5. names and qualifications of the disciplines that will provide care and proposed frequency of service.
6. your right to participate in the plan for care and/or any change in the plan before it is made.
7. the agency's policy on client advanced directives including a description of an individual's rights under State law (whether statutory or as recognized by the courts of the State) and how such rights are implemented by the agency.
8. the organization's grievance procedures which include contact names, phone numbers, hours of operation and how to communicate problems to the agency.

And the Right to:

9. receive services without regard to race, creed, gender, age, handicap, sexual orientation, sexual identification, veteran status or lifestyle.
10. receive service without regard to whether or not any advance directive has been executed.
11. make informed decisions about care and treatment plans and to receive information in a way that is understandable to you.
12. be notified, in advance, of treatment options, transfers, when and why care will be discontinued.
13. receive and access services consistently and in a timely manner, in accordance with the organization's stated operational policy.
14. receive education, instructions and requirements for continuing care when the services of the agency are discontinued.
15. participate in the selection of options for alternative levels of care or referral to other organizations, as indicated by your need for continuing care.
16. receive disclosure information regarding any beneficial relationships the organization has that may result in profit for the referring organization.
17. be referred to another provider if the organization is unable to meet your needs or if you are not satisfied with the care you are receiving.
18. voice grievances regarding treatment, care or respect for property that is or fails to be furnished by anyone providing services on behalf of the organization without reprisal for doing so.
19. receive information on grievance procedures which include contact names, phone numbers, hours of operation and how to communicate problems to the agency.
20. receive a documented response from the agency regarding the investigation and resolution to the grievance.
21. be advised of the availability, purpose, and appropriate use of State (1-800-447-8477), Medicare (1-800-633-4227) and The Joint Commission (1-800-994-6610) Hotline numbers.
22. refuse treatment and be informed of potential results and/or risks.
23. not receive any experimental treatment without the client's specific agreement and full understanding of information explained.
24. be free from any mental or physical abuse, neglect or exploitation of any kind from the organization's staff.
25. have your property be treated with respect.
26. have your clinical records protected and to know the organization's policy for any accessing and disclosure of clinical records.
27. request and receive information regarding the organization's liability insurance.

Reliable Respiratory

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.

If you have any questions about this Notice please contact:

Privacy Officer

Reliable Respiratory, Inc.
1504 Boston Providence Turnpike, Suite 11A
Norwood, MA 02062

This Notice of Privacy Practices describes how we may use and disclose your protected health information to carry out treatment, payment or health care operations and for other purposes that are permitted or required by law. It also describes your rights to access and control your protected health information. "Protected health information" is information about you, including demographic information, that may identify you and that relates to your past, present or future physical or mental health or condition and related health care services.

We are required to abide by the terms of this Notice of Privacy Practices. We may change the terms of our notice, at any time. The new notice will be effective for all protected health information that we maintain at that time. Upon your request, we will provide you with any revised Notice of Privacy Practices by accessing our website www.reliablerespiratory.com or calling the office and requesting that a revised copy be sent to you in the mail or asking for one at the time of your next appointment.

Understanding Your Health Record/Information

Each time you visit a healthcare provider, a record of your visit is made. Typically, this record contains your symptoms, examination and test results, diagnoses, treatment, and a plan for future care or treatment. This information, often referred to as your health or medical record, serves as a:

- basis for planning your care and treatment.
- means of communication among the many health professionals who contribute to your care.
- legal document describing the care you received.
- means by which you or a third-party payer can verify that services billed were actually provided.
- a tool in educating health professionals source of data for medical research.
- source of information for public health officials charged with improving the health of the nation.
- source of data for facility planning and marketing.
- a tool with which we can assess and continually work to improve the care we render and the outcomes we achieve.

Understanding what is in your record and how your health information is used helps you to:

- ensure its accuracy.
- better understand who, what, when, where, and why others may access your health information.
- make more informed decisions when authorizing disclosure to others.

Your Health Information Rights

Although your health record is the physical property of the healthcare practitioner or facility that compiled it, the information belongs to you. You have the right to:

- request a restriction on certain uses and disclosures of your information, request that we don't share your information with your health insurer if you pay for a service or healthcare item out-of-pocket and in full.
- obtain a paper copy of the notice of information practices upon request, be notified of a breach of your unsecured health information.
- inspect and obtain a copy of your health record (paper or electronic), amend your health record.
- obtain an accounting of disclosures of your health information, in cases where there have been disclosure other than for treatment, payment or healthcare operations.
- request communications of your health information by alternative means or at alternative locations.
- revoke your authorization to use or disclose health information except to the extent that action has already been taken.

Reliable Respiratory

Notice of Privacy Practices

Our Responsibilities

This organization is required by law to:

- maintain the privacy of your health information.
- provide you with a notice as to our legal duties and privacy practices with respect to information we collect and maintain about you.
- abide by the terms of this notice.
- notify you if we are unable to agree to a requested restriction or accommodate reasonable requests you may have to communicate health information by alternative means or at alternative locations.

We will not use or disclose your health information without your authorization, except as described in this notice.

If you believe your privacy rights have been violated, you can file a complaint or get further information about the complaint process from our Privacy Officer at 866-551-3335 or support@reliablerespiratory.com.

Or you can file a complaint with the Secretary of Health and Human Services at 1-877-696-6775 or by visiting www.hhs.gov/ocr/privacy/hipaa/complaints/.

There will be no retaliation for filing a complaint.

Examples of Disclosures for Treatment, Payment and Healthcare Operations

We will use your health information for treatment.

For example: Information obtained by a therapist or other member of your healthcare team will be recorded in your record and used to determine the course of treatment that should work best for you. We may provide your physician or a subsequent healthcare provider with copies of various reports that should assist him or her in treating you.

We will use your health information for payment.

For example: A bill may be sent to you or a third-party payer. The information on or accompanying the bill may include information that identifies you, as well as your diagnosis, procedures, and supplies used.

We will use your health information for regular healthcare operations.

For example: Members of our quality improvement team may use information in your health record to assess the care and outcomes in your case and others like it. This information will then be used in an effort to continually improve the quality and effectiveness of the healthcare and service we provide.

Business associates: There are some services provided in our organization through contracts with business associates. Examples include our billing service. When these services are contracted, we may disclose your health information to our business associate so that they can perform the job we've asked them to do and bill you or your third-party payer for services rendered. Business Associates are required by law to abide by the same Privacy laws and regulations as we are. Business associates are also responsible for safeguarding your information by having Privacy agreements with any subcontractors they use.

Notification: We may use or disclose information to notify or assist in notifying a family member, personal representative, or another person responsible for your care, your location, and general condition.

Communication with family: Health professionals, using their best judgment, may disclose to a family member, other relative, close personal friend or any other person you identify, health information relevant to that person's involvement in your care or payment related to your care.

Reliable Respiratory

Notice of Privacy Practices

Examples of Disclosures for Treatment, Payment and Healthcare Operations

~ continued ~

Research: We may disclose information to researchers when their research has been approved by an institutional review board that has reviewed the research proposal and established protocols to ensure the privacy of your health information.

Funeral directors: We may disclose health information to funeral directors consistent with applicable law to carry out their duties.

Organ procurement organizations: Consistent with applicable law, we may disclose health information to organ procurement organizations or other entities engaged in the procurement, banking, or transplantation of organs for the purpose of tissue donation and transplant.

Food and Drug Administration (FDA): We may disclose to the FDA health information relative to adverse events with respect to food, supplements, product and product defects, or post marketing surveillance information to enable product recalls, repairs, or replacement.

Workers' compensation: We may disclose health information to the extent authorized by and to the extent necessary to comply with laws relating to workers' compensation or other similar programs established by law.

Public health: As required by law, we may disclose your health information to public health or legal authorities charged with preventing or controlling disease, injury, or disability.

Correctional institution: Should you be an inmate of a correctional institution, we may disclose to the institution or agents thereof health information necessary for your health and the health and safety of other individuals.

Law enforcement: We may disclose health information for law enforcement purposes as required by law or in response to a valid subpoena.

Federal law makes provision for your health information to be released to an appropriate health oversight agency, public health authority or attorney, provided that a work force member or business associate believes in good faith that we have engaged in unlawful conduct or have otherwise violated professional or clinical standards and are potentially endangering one or more patients, workers or the public.

Marketing: We will not use your information for the purposes of marketing without your written authorization. You may opt out of receiving marketing communications.

Fundraising: We will not use your information for the purposes of fundraising without your written authorization. You may opt out of receiving fundraising communications.

Other instances where your written authorization is required: Sale of your information, sharing of psychotherapy notes.

This notice was published 1/25/13 and becomes effective on 9/23/13 and remains in effect until it is changed or replaced.

