



Aspirus Specialty Pharmacy



Welcome Packet

1901 Westwood Center Boulevard | Wausau, WI 54401

715.355.9573, extension 5

Monday - Friday, 8:30 am - 5:00 pm

Also available 24/7 on call for urgent medication concerns



Welcome to Aspirus Specialty Pharmacy!

We are excited to serve you for all of your pharmacy needs.

The staff at Aspirus Specialty Pharmacy understands your medical condition is complex. It requires specific knowledge when working with your medical provider and insurance company. We are dedicated to providing you with personal service. We want to ensure that you get the most benefit from your therapy including:

- Access to pharmacists 24 hours a day, 7 days a week
- Listening to you about any medication needs
- Monitoring the effectiveness and use of medication
- Providing support for other conditions and symptoms
- Providing education on medication needs and medical conditions
- Coordinating services with your doctor
- Obtain prior authorization with your insurance company
- Providing up to date information on your order status
- Including, but not limited to refill reminders, delays, or transfers
- Free mailing of medication
- Refill reminders
- Auto enrollment in the Patient Management Program. It provides benefits including:
 - Managing side effects
 - Helping you stay adherent to your medication
 - Overall improvement towards goals of treatment when following directions and compliance to treatment plan.

We look forward to providing you with the best service possible. We know you have many options. We thank you for choosing our Aspirus pharmacy services.

Sincerely,

The Aspirus Specialty Pharmacy Team



What to Expect

We know that managing a chronic disease or serious illness can feel difficult at times. We are here for you. At Aspirus Specialty Pharmacy, our staff is dedicated to working with you. Along with working with your doctors, nurses, family, and friends. In order to achieve a fully combined health care team. You are our primary purpose.

You can expect:

Personalized patient care

Our staff members will work with you to discuss your treatment plan. We will address any questions or concerns you may have. Staff are available 24 hours a day, 7 days a week including holidays and weekends. Our after-hours staff are available to help with urgent clinical questions.

Working with your Doctor

We will always have open discussion with you, your doctors, and caregivers. We are here to make sure any difficulties with your treatment are addressed quickly with your doctors.

When to Contact Us

- You have a question or concern about your medication or access to your medication
- You suspect a non-urgent reaction or allergy to your medication
 - If it is a health related emergency, please call 911.
- Any change in medication use
- Changes in:
 - Contact information
 - Delivery address
 - Payment Source
 - Insurance
- Discuss the status of your order
- You wish to transfer your prescription

Regular follow-up

Getting your medications and medical supplies efficiently is important. We will be in contact with you during treatment. We will be your healthcare advocate.

Benefits

Treatment can be costly. We will help direct you through the difficulties of the healthcare system. Helping you to seek all options. Our relationships with insurance companies will help provide you with information and details of your drug and medical benefits. Your quality of care is our highest priority.



Shipping

We offer fast and convenient next day delivery through UPS or FedEx. We can deliver to your home, workplace, or the location you prefer. A staff member will contact you 5 to 7 days before your refill due date. They will coordinate the medications you need. They will update your medical and insurance records, set up secure payment information and set up and confirm a delivery date and address.

24/7 Support

Our Specialty Pharmacy staff is available 24 hours a day, 7 days a week to answer urgent medication questions. If you are having a medical emergency, call 911. We are always here to answer any questions or concerns you may have.



Financial Assistance

Before your care begins, a staff member will tell you of the cost to you including those that are not covered by your insurance or other third-party sources. These obligations include, but are not limited to:

- Out-of-pocket costs such as deductibles
- Co-payments
- Co-insurance
- Annual and lifetime co-insurance limits
- Changes that occur during your enrollment period

Insurance Claims

Staff will submit claims to your health insurance. Claims are submitted on the date your prescription is filled. We will let you know if we are an out-of-network pharmacy. We will give you the cash/out-of-pocket price of the medication upon request.

Co-payments

We must collect all co-payments prior to shipment of your medication. Payments can be made by:

- Credit card (i.e. Visa, MasterCard, Discover)
- Debit card
- Over the phone
- Check or money order through the mail
- In person pick up at the pharmacy during open hours

Co-pay Assistance Referral Program

Our team has access to programs to help with the cost of the medication. These programs include:

- Discount coupons from drug companies
- Payment vouchers
- Assistance from disease management foundations and drug companies

Filling a Prescription

Your doctor can send us your prescription, or you can give it to us in person or through the mail. You will be contacted by a team member 5-7 days before your refill date. You can also contact us for a refill. Call us and speak to a pharmacy team member to process your refill request.

Drug Recalls

If your medication is recalled, the specialty pharmacy will contact you. They will provide instructions as directed by the FDA and/or drug company.



PATIENT BILL OF RIGHTS AND RESPONSIBILITIES

To ensure the finest care possible, as a patient receiving our Pharmacy services, you should understand your role, rights and responsibilities involved in your own plan of care.

Patient Rights

- To choose who provides you with Pharmacy services.
- To get information about product selection. Including ways to get medications not available at the pharmacy where the product was ordered.
- To get the appropriate or prescribed services in a professional manner. Without discrimination relative to your age, sex, race, religion, ethnic origin, sexual preference or physical or mental handicap.
- To get information about health plan transfers to a different facility or Pharmacy Benefit Management organization. Including how a prescription is transferred from one pharmacy service to another (please call the pharmacy for more information).
- To be treated with friendliness, courtesy and respect by everyone representing our Pharmacy. Along with being free from neglect or abuse, be it physical or mental.
- To help in the creation and preparation of your plan of care. Designed to satisfy, as best as possible, your current needs, including management of pain.
- To be given adequate information. From which, you can give your informed consent for initiation of services, continuation of services, transfer of services to another health care provider, or termination of services.
- To voice concerns, grievances, or recommend modifications to your Pharmacy about services or care, without fear of discrimination or retaliation.
- To ask for and get complete and up-to-date information about your condition. Including treatment, alternative treatments, risk of treatment and/or care plans.
- To get treatment and services within the scope of your plan of care, quickly and professionally. While also being fully informed of our Pharmacy's policies, procedures and charges.
- To ask for and get data about treatment, services, or costs thereof, privately and with confidentiality.
- To be given information about the uses and disclosure of your plan of care.
- To get information to assist in interactions with the organization.
- To have your plan of care remain private and confidential, except as required and permitted by law.
- To get instructions on handling drug recall.
- To have confidentiality and privacy of all information contained in the client/patient record and of Protected Health Information. PHI will only be shared with the Patient Management Program in accordance with state and federal law.
- To get information on how to access support from consumer advocacy groups.
- To get instructions on safe disposal of drugs, in compliance with state and federal laws and regulations.
- To know about philosophy and characteristics of the patient management program.



Aspirus Specialty Pharmacy

- To have personal health information shared with the patient management program only in accordance with state and federal law.
- The right to identify the program's staff members. Including their job title, and the right to speak with a supervisor of the staff member's.
- The right to speak to a health professional.
- To get information about the patient management program.
- To get administrative information about changes in or termination of the patient management program.
- To decline participation, revoke consent or dis-enroll at any time.
- Be fully informed before a care/service is provided. Including the disciplines that give care, the frequency of visits, and any changes to the plan of care.
- Be informed of charges, both orally and in writing, before care is provided, including payment for care/service expected from third parties along with any charges the client/patient will be responsible for.
- Get information about the scope of services that the organization will provide and any specific limitations on those services.
- Participate in the creation and occasional changing of the plan of care.
- Refuse care or treatment after the consequences of refusing care or treatment are fully presented.
- Be informed of client/patient rights under state law to prepare an Advanced Directive, if applicable.
- Have one's property and person treated with respect, consideration, and recognition of client/patient dignity and individuality.
- Be able to identify visiting staff members through proper identification.
- Be free from mistreatment, neglect, or verbal, mental, sexual, and physical abuse, including injuries of unknown source, and misappropriation of client/patient property.
- Voice grievances/complaints about treatment or care or lack of respect of property. Recommend changes in policy, staff, or care/service without restraint, interference, coercion, discrimination, or retaliation.
- Have grievances/complaints about treatment or care that is (or fails to be) provided, or lack of respect of property investigated.
- Confidentiality and privacy of all information in the client/patient record and of Protected Health Information.
- Be informed on agency's policies and procedures about the disclosure of clinical records.
- Choose a health care provider. Including choosing an attending physician, if applicable.
- Receive appropriate care without discrimination in accordance with physician orders, if applicable.
- Be informed of any financial benefits when referred to an organization.
- Be fully informed of one's responsibilities.



Patient Responsibilities

- To give accurate and complete information about your past and present medical history, contact information, and any changes.
- To agree to a schedule of services and report any cancellation of scheduled appointments and/or treatments.
- To participate in the development and updating of a plan of care.
- To communicate whether you clearly understand the course of treatment and plan of care.
- To comply with the plan of care and clinical instructions.
- To accept responsibility for your actions, if refusing treatment or not complying with, the prescribed treatment and services.
- To respect the rights of Pharmacy staff.
- To inform your Doctor and the Pharmacy with any potential side effects and/or complications.
- To inform Aspirus Specialty Pharmacy via telephone when medication supply is running low. To allow refill to be shipped to you promptly.
- To submit any forms necessary to participate in the program to the extent required by law.
- To give accurate clinical and contact information. Along with to notifying the patient management program of changes in this information.
- To inform treating provider of participation in the patient management program, if applicable.
- To maintain any equipment provided.
- To have personal health information shared with the patient management program only in accordance with state and federal law.
- To decline participation or dis-enroll at any point in time.

If you have questions, concerns or issues that require assistance, please call 715.355.9573.



Additional Information

Patient Management Program

The Patient Management Program provides benefits including:

- Managing side effects
- Increasing adherence to drug therapies
- Overall improvement of health when following directions and compliance to treatment plan

You can opt out of the Patient Management Program at any time. If you wish to contact and/or opt out of the program please call and speak to our pharmacy staff.

Adverse Effects to Medication

Call 911 or go to your local emergency room in the event of a medical emergency. If you are experiencing adverse effects to the medication please contact your Doctor or the Aspirus Specialty Pharmacy.

Emergency or Disaster

Our pharmacy will make every effort that there is no interruption in patient care if an emergency or disasters occur. Please call our pharmacy for instructions and to make different plans to get your prescription.

Instructions will include, but are not limited to:

- What the emergency or disaster is
- How/where/when to get medication supply
- When pharmacy will go back to normal

Drug Substitution Protocols

Our pharmacy will always use the most low-cost option for you. At times, it is necessary to substitute generic drugs for brand name drugs. This could happen due to your insurance company preferring the generic be dispensed or to reduce your copay. If a change is required, a member of the specialty pharmacy staff will contact you before shipping the medication to inform you of the substitution. When available, our pharmacy will provide generic to save you money. We will use brand name medication at your or your prescriber's request.

Medication Issues and Concerns

Patients and caregivers have the right to voice complaints, concerns, errors and/or recommendations on services to Aspirus Specialty Pharmacy. This can be done by phone, fax, writing, email, or web. We want you to be satisfied with the care we provide. If you or your caregiver have concerns, please contact us by phone, email: specialtypharmacy@aspirus.org or in writing. If you want further review of concern, we are happy to set up a phone call with our specialty pharmacy manager.



National Resources

Hepatitis

liverfoundation.org

hepatitis-central.com

hepb.org/resources/printable_information.ht

Hematology/Oncology

cancer.org

livestrong.org/we-can-help

Proper Disposal of unused Medications

- Place all needles, syringes, and other sharp objects into a sharps container. This will be supplied by the Specialty Pharmacy if you are prescribed an injectable medication and requested.
- For instructions on how to dispose of unused medications, check with your local waste collection service. You can also check the following websites:

fda.gov/forconsumers/consumerupdates/ucm101653.htm

fda.gov/drugs/resourcesforyou/consumers/buyingusingmedicinesafely/ensuringsafeuseofmedicine/safedisposalofmedicines/ucm186187.htm

Notice of Privacy Practices

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

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 to do, and we will follow your instructions.

You have choices in the way we use and share information. In these cases, you have both the right and choice to tell us to:

- Share information with your family, close friends, or others involved in your care
- Share information in a disaster relief situation
- Market our services and sell your information

We never share your information unless you give us written permission.



Other Uses and Disclosures

How do we typically use or share your health information? We typically use or share your health information the following ways:

- Help manage the medications and treatment you receive.
- Determine who is responsible for payment and payment amount.
- Help with public health and safety issues.
- Administer your medications and care plan.
- Comply with the law and do research.
- Address workers' compensation, law enforcement, and other government requests.
- Respond to law suits and legal action.
- A prescriber sends us your prescription information and diagnosis so we can make referrals for other health care services.
- We use health and prescription information to better run our organization.
- We can share information about your bill to your health plan and coordinate payment.
- We share health information with others whom we contract for administrative services.
- Preventing or reducing a serious threat to anyone's health or safety.
- We will share information about you if state or federal laws require it, including the Department of Health and Human Services if the department wants to see that we are complying with federal privacy law.
- We may use your health information for research purposes.
- A coroner, medical examiner or funeral director when an individual.

