Axium
healthcare puerto rico

Welcome Information

axiumpr.com

Contact Your Pharmacy

For medication refills, billing, or copayment questions or to reach your care team, please contact your pharmacy at:

Axium Healthcare Puerto Rico
San Juan, PR
Toll Free: 844-355-4191
Toll Free Fax: 800-546-2163
TTY 711

Hours:
M-F 8:00 a.m. - 6:00 p.m.

A clinical team is available 24 hours a day 7 days a week

Complaints

If you are concerned that we have violated your privacy rights or you disagree with a decision we made about access or correction to your record, you may contact the phone number on your medication label or at **866-202-9552**. You may also send a written complaint to the U.S. Department of Health and Human Services at the following address:

The U.S. Department of Health and Human Services
Office of the Secretary
200 Independence Ave. S.W., Washington, D.C. 20201

If you decide to contact us with a complaint, or if you send a written complaint to the U.S Department of Health and Human Services, you will not suffer any retaliation.

Medicare Feedback

You are now able to submit feedback about your Medicare health plan or prescription drug plan directly to Medicare using the online form located at: **www.medicare.gov/my/medicare-complaint**. The Centers for Medicare & Medicaid Services values your feedback and will use it to continue to improve the quality of the Medicare program. If you have other feedback or concerns or if this an urgent matter, please call **800-MEDICARE** or **800-633-4227**. TTY/TTD users can call **877-486-2048**.

Accreditation Commission for Health Care (ACHC) Feedback – How to File a Complaint with ACHC

Consumer complaints may be communicated to ACHC via mail, telephone, email facsimile, in person, or through our website. For further information or to file a complaint with ACHC, you may contact ACHC toll free at **855-937-2242** or at **919-785-1214** and request the complaint department.

Table of Contents

It is our mission to be the preferred pharmacy service by optimizing outcomes and providing a high-touch, caring experience.

Dear Patient,

At **Axium Healthcare Puerto Rico,** we are committed to making a difference in the lives of our patients. To achieve this, we have designed our clinical programs with the goal of maximizing the benefits of your medication therapy.

Our clinical team has years of experience in managing specialty, acute and chronic medical conditions. As a patient of Axium Healthcare Puerto Rico, our promise to you is to proactively focus on providing you the information you need to educate yourself, not only your medications, but to also help manage your condition.

Our clinical team will provide a personal consultation on your medication(s) throughout your treatment and schedule follow-up calls based on your individual preferences. Axium Healthcare Puerto Rico is the next generation of pharmacy; a clinical pharmacy focusing on dispensing specialized medications while providing innovative patient therapy management programs.

Your experience with Axium Healthcare Puerto Rico includes the following:

- **EXPERTISE –** Axium Healthcare Puerto Rico specializes in the medications you need to treat your medical condition.
- **EDUCATION AND SUPPORT –** We give you education and support. Our clinical experts teach you about side-effects, drug storage, dosing, injections or infusions, and much more.
- **REFILL REMINDERS –** We provide proactive prescription refill reminders via phone call or e-mail. Ask your Patient Care Coordinator about options.
- **HELP WITH HIGH COPAYS AND OUT-OF-POCKET DEDUCTIBLES –** Axium Healthcare Puerto Rico Patient Assistance Program can work with you to find foundation grants and copay assistance so that your treatment is continued. Call us to see if you qualify for copay assistance.
- **DELIVERY –** Your medication is delivered to your door or your provider's office (as allowed by state law). It's convenient and confidential.

Visit our website at **axiumpr.com** for more information.

Sincerely,
Your Axium Healthcare Puerto Rico Team

About Your Pharmacy

Axium Healthcare Puerto Rico is a nationwide Clinical Pharmacy, dedicated to servicing patients with chronic illnesses requiring specialized care.

We optimize patient outcomes by blending a high-touch, caring patient experience with clinical knowledge, personalized total life care programs and administrative expertise. We offer unique programs designed to empower patients including education and resources and side effect management, and financial assistance options.

What is a Specialty Pharmacy?

A specialty pharmacy provides medications and supplies that treat health conditions. Medications can be delivered to you in oral, topical, injectable, and infused forms. Treating conditions with specialty medications can be complex, that's why we provide expert patient support from licensed pharmacists, nurses and specialists to carefully manage your treatment from start to finish.

Axium Healthcare Puerto Rico provides specialty medication and support services for the following:

- Hereditary Angioedema
- Rheumatoid Arthritis
- Growth Hormone Deficiency
- Crohn's Disease
- Multiple Sclerosis and Movement Disorders
- Pulmonary Fibrosis
- Rare Diseases and Other Conditions
- Hematology
- Hemophilia and Coagulation Disorders
- Hepatitis C
- Pulmonary Arterial Hypertension
- Oncology
- Osteoporosis/Osteoarthritis
- Psoriasis

Eligibility for Service

To be eligible for services a valid prescription, as prescribed by a licensed physician, is required. Eligibility for service is also contingent upon the provisions and limitations dictated by a patient's individual health plan. We provide insurance verification of eligibility for every patient admitted for services.

Patient Responsibility

Upon verification of eligibility of services, each patient's electronic file is updated with copay and deductible information as specified by the patient's health plan. With the patient's permission, our expert team will enroll eligible patients in copay programs or seek donations through foundations to reduce the patient's deductible expenses. Any charges will be communicated by the Patient Care Coordinator (PCC).

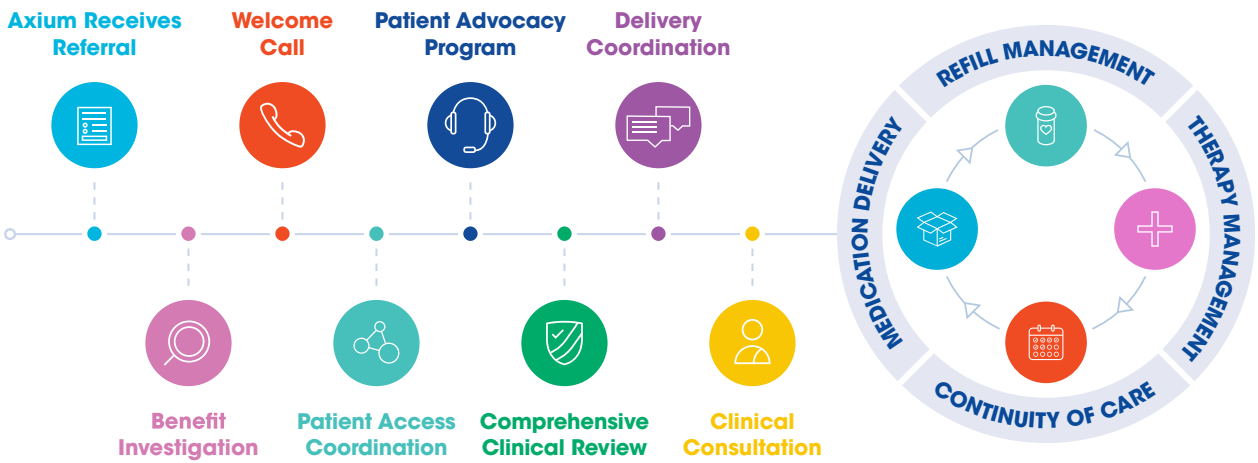
Plan of Care

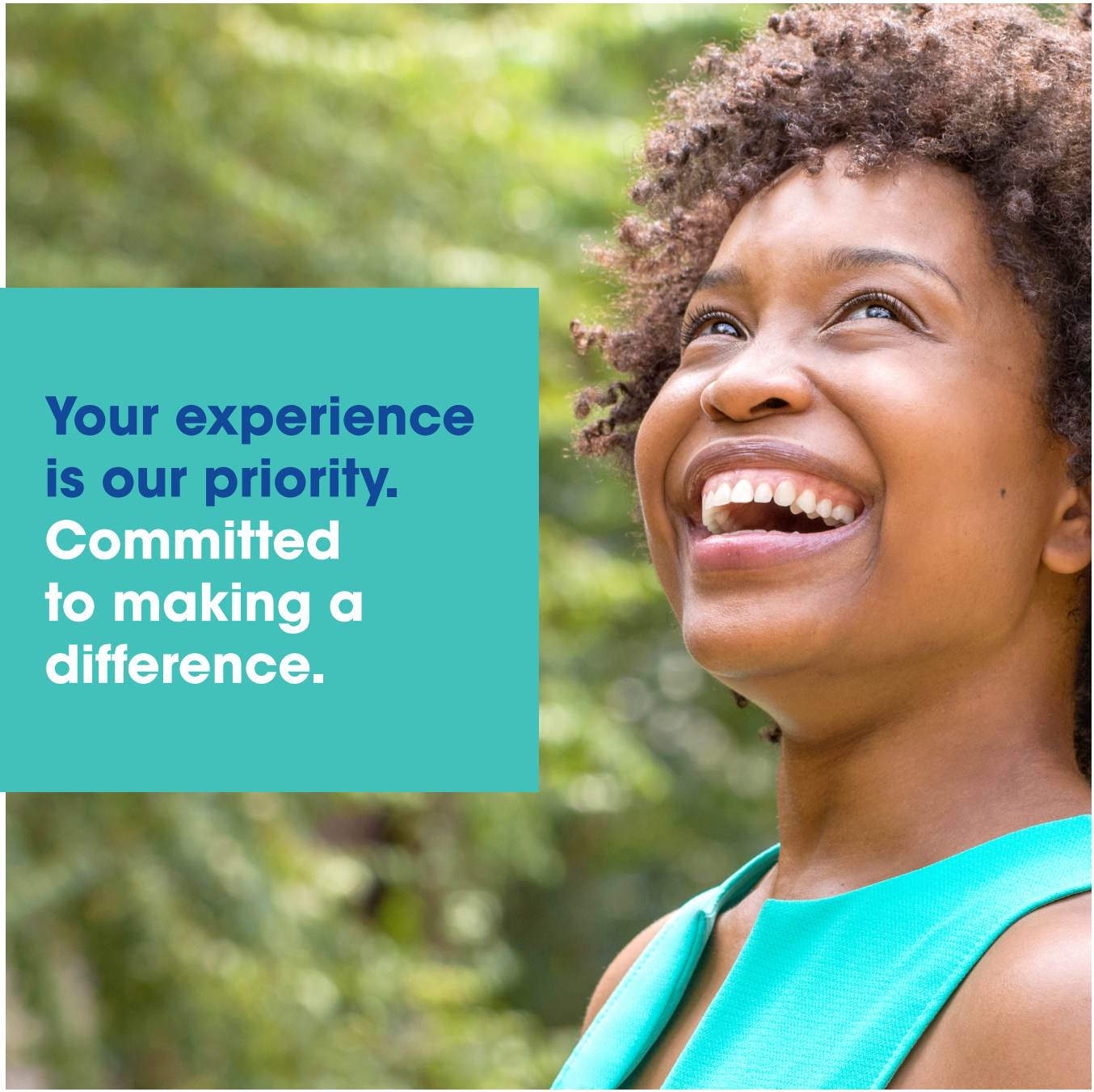
To help our patients reach their treatment goals, a Plan of Care will be developed and updated during the course of the patient's treatment journey. As part of the patient's participation in their Plan of Care, each time a delivery is scheduled, they will be asked questions that help our team monitor their progress and address any barriers to meeting those goals.

For the Patient or Client Before Medication Delivery Coordination

Cash pay clients are required to submit payment prior to delivery. We accept payments made by credit card, debit card, prepaid credit and debit cards and checks and payments can be made over the phone with your PCC prior to delivery.

Any charges left by insurance that is determined to be patient responsibility shall be communicated by invoice to the patient or client within 30 days of receipt of the explanation of benefits. Cash-paying clients must send payment before medication delivery is made.




Your experience
is our priority.
Committed
to making a
difference.

Patient Management Program

We understand that dealing with chronic and complex medical conditions can be stressful, which is why we do more than just fill prescriptions. Our Patient Management Program (PMP) allows us to provide the best service possible to help patients reach their therapy goals. Through the Patient Management Program, we help patients dealing with chronic illnesses by providing specialty medications and therapy management support services.

The Patient Management Program helps to improve your knowledge about disease state, increase adherence to therapy, prevent and manage adverse drug events, and assure appropriate use of prescribed medications. Through the Patient Management Program, we provide customized education and support to help you manage your therapy needs. Our services will help you manage side effects, increase your ability to adhere to drug therapy, and improve your overall health.

What the Patient Management Program Will Do for You:

We work side-by-side with our patient's providers to help monitor their medications and assist in care plan.

Provide education and awareness of the disease and how to manage it.

Help with adherence to the prescriber's treatment plan and learn about the prescribed medication, the importance of taking the medication, and discuss possible interactions with other medications.

Explain potential side effects with your therapy and offer support in managing medication side effects.

Contact patients to schedule your medication delivery ahead of time, so that it is ready when needed.

Work with the patient's insurer, when necessary, to coordinate and verify pharmacy benefits.

Support with access to a clinician 24 hours a day, seven days a week.

Participation in the program improves therapy outcomes, and it is possible that the patient's actions can adversely impact the potential benefits of the Patient Management Program by not following directions properly or not being compliant to therapy.

Participation in the Patient Management Program is free and patients will automatically be enrolled. If you no longer wish to take part in the program, please request opt out when refilling your medication by phone or by email.

About Medication Delivery

Understanding the Patient Responsibility

Your welcome packet includes important **documents that will need your review and response immediately**. It is important that we get your response as soon as possible. Please return the completed documents in the enclosed postage-paid, self-addressed envelope.

Some circumstances may require you or a family member to be present to **sign for your scheduled delivery**. These include Medicare patient shipments, some apartment complex shipments, and others. Signature releases cannot be requested for Medicare and/or Medicaid patients.

Deliveries can take up until 7 pm to arrive, depending on your driver's route and the delivery address. If this is not a good time to receive shipments, please make other delivery arrangements with your Patient Care Coordinator (PCC).

Please contact Axium Healthcare Puerto Rico within 24 to 48 hours to **report a delivery or shipment-related issue or complaint**. You may be financially responsible for the shipment if you do not report delivery or shipment-related issues in a timely manner.

To **cancel a shipment**, you must contact Axium Healthcare Puerto Rico before the package leaves the pharmacy if there is a change in your medical treatment. You will assume the financial responsibility for any cancellation of shipments made after the medication has already been shipped, based on the previous commitment.

Please feel free to **contact your Patient Care Coordinator** (PCC) with any questions or concerns about our shipment policies and associated patient responsibilities.

It is the responsibility of the patient receiving Durable Medical Equipment/Supplies to **follow Axium Healthcare Puerto Rico's guidelines with regards to use**. Please notify Axium Healthcare Puerto Rico of any potential side effects and/or complications. If in the event of equipment failure, malfunction, or breakage, please notify us for troubleshooting guidance or replacement.

PLEASE KEEP FOR YOUR RECORDS

Emergency Preparedness

In case of emergency or during natural disaster, such as a hurricane, it might be difficult to get prescription and over-the-counter medicines. You and your family may need to rely on a prepared emergency supply. Make sure you have:

- ☐ A 7 to 10-day supply of prescription medications stored in a waterproof container.
- ☐ An up-to-date list of all prescription medications, including dosage amounts and the names of the generic equivalents, and known allergies.
- ☐ Over-the-counter medications, including pain and fever relievers, diuretics, antihistamines, and antidiarrheal medications.
- ☐ A cooler and chemical ice packs for storing and keeping medicines cold in a power outage.

To maintain adequate supply of medications provided by Axium during emergency, follow these important guidelines:

- If a known threat is approaching your area, Axium may contact you well in advance of your next refill date. Please be sure to return any missed calls as soon as possible.
- In case of evacuation due to a disaster in your area (flood warning, hurricane, blizzard, wildfire, etc.), notify Axium as soon as possible if you will (or suspect you will) evacuate.
- Once the threat has passed, if you are without medication, call Axium to coordinate a possible emergency shipment and/or prescription transfer.
- If you have questions about the stability of your medication due to extreme temperature fluctuations, call a Axium clinician.

If you are in a shelter, being in close contact with so many others may raise your risk of infections. If you have immunocompromised condition, think about wearing protective masks, which are available at home supply, medical supply, and hardware stores. Good basic personal hygiene and handwashing are critical to help prevent the spread of illness and disease. If your tap water is not safe to use, wash your hands with soap and water that has been boiled or disinfected. A temporary hand washing station can be created by using a large water jug that contains clean water (for example, boiled or disinfected).

Follow these steps to ensure washing your hands properly:

- Wet your hands with clean, running water and apply soap.
- Rub your hands together to make a lather and scrub well; scrub the backs of hands, between fingers, and under nails.
- Continue rubbing your hands for at least 20 seconds. Hum the “Happy Birthday” song from beginning to end twice.
- Rinse your hands well under running water and dry using a clean towel or air dry them.

Washing hands with soap and water is the best way to reduce the number of germs on them. If soap and water are not available, use an alcohol-based hand sanitizer that contains 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. Hand sanitizers are not effective when hands are visibly dirty.

In case of health emergency, call 911 for immediate assistance or seek medical attention.

How to Dispose of Unused Medicines

A growing number of community-based drug "take-back" programs offer the best option. Otherwise, almost all medicines can be thrown in the household trash, but only after consumers take the precautionary steps as outlined below.

A small number of medicines may be especially harmful if taken by someone other than the person for whom the medicine was prescribed. Many of these potentially harmful medicines have specific disposal instructions on their labeling or patient information to immediately flush them down the sink or toilet when they are no longer needed. Visit the link below for a list of medicines recommended for disposal by flushing:

https://www.fda.gov/drugs/ensuring-safe-use-medicine/safe-disposal-medicines

Consumer Health Information
www.fda.gov/consumer

FDA Consumer Health Information / U. S. Food and Drug Administration - DECEMBER 2013

Guidelines for Drug Disposal

FDA and the White House Office of National Drug Control Policy developed federal guidelines, summarized here:

- Follow any specific disposal instructions on the prescription drug labeling or patient information that accompanies the medicine. Do not flush medicines down the sink or toilet unless this information specifically instructs you to do so.
- Take advantage of community drug take-back programs that allow the public to bring unused drugs to a central location for proper disposal. Call your city or county government's household trash and recycling service (see blue pages in phone book) to see if a take-back program is available in your community. The U.S. Drug Enforcement Administration, working with state and local law enforcement agencies, periodically sponsors National Prescription Drug Take-Back Days. *www.deadiversion.usdoj.gov/drug_disposal/takeback/takeback.html*
- If no disposal instructions are given on the prescription drug labeling and no take-back program is available in your area, throw the drugs in the household trash following these steps.
  1. *Remove them from their original containers and mix them with an undesirable substance, such as used coffee grounds or kitty litter (this makes the drug less appealing to children and pets, and unrecognizable to people who may intentionally go through the trash seeking drugs).*
  2. *Place the mixture in a sealable bag, empty can, or other container to prevent the drug from leaking or breaking out of a garbage bag.*

Ilisa Bernstein, Pharm.D., J.D., FDA's Deputy Director of the Office of Compliance, offers some additional tips:

- Before throwing out a medicine container, scratch out all identifying information on the prescription label to make it unreadable. This will help protect your identity and the privacy of your personal health information.

- Do not give your medicine to friends. Doctors prescribe medicines based on a person's specific symptoms and medical history. A medicine that works for you could be dangerous for someone else.
- In doubt about proper disposal? Talk to your pharmacist. Bernstein says the same disposal methods for prescription drugs could apply to over-the-counter drugs as well.

Why the Precautions?

Prescription drugs such as powerful narcotic pain relievers and other controlled substances carry instructions for flushing to reduce the danger of unintentional use or overdose and illegal abuse. For example, the fentanyl patch, an adhesive patch that delivers a potent pain medicine through the skin, comes with instructions to flush used or leftover patches. Too much fentanyl can cause severe breathing problems and lead to death in babies, children, pets, and even adults, especially those who have not been prescribed the medicine."Even after a patch is used, a lot of the medicine remains in the patch," says Jim Hunter, R.Ph., M.P.H., a pharmacist reviewer on FDA's Controlled Substance Staff, "so you wouldn't want to throw something in the trash that contains a powerful and potentially dangerous narcotic that could harm others."

Environmental Concerns

Some people are questioning the practice of flushing certain medicines because of concerns about trace levels of drug residues found in surface water, such as rivers and lakes, and in some community drinking water supplies. "The main way drug residues enter water systems is by people taking medicines and then naturally passing them through their bodies," says Raanan Bloom, Ph.D., an environmental assessment expert in FDA's Center for Drug Evaluation and Research. Bloom goes on to say "many drugs are not completely absorbed or metabolized by the body and can enter the environment after passing through waste water treatment plants."

"While FDA and the Environmental Protection Agency take the concerns of flushing certain medicines in the environment seriously, there has been no indication of environmental effects due to flushing," says Bloom. In addition, according to the Environmental Protection Agency, scientists to date have found no evidence of adverse human health effects from drug residues in the environment. "Nonetheless, FDA does not want to add drug residues into water systems unnecessarily," says Hunter. The agency reviewed its drug labels to identify products with disposal directions recommending flushing down the sink or toilet. This continuously revised listing can be found at FDA's web page on Disposal of Unused Medicines here:

https://www.fda.gov/drugs/ensuring-safe-use-medicine/safe-disposal-medicines

Disposal of Inhaler Products

Another environmental concern lies with inhalers used by people who have asthma or other breathing problems, such as chronic obstructive pulmonary disease. Traditionally, many inhalers have contained chlorofluorocarbons (CFCs), a propellant that damages the protective ozone layer. However, CFCs have been phased out of inhalers and are being replaced with more environmentally friendly inhalers since the end of 2013. Read handling instructions on the labeling of inhalers and aerosol products because they could be dangerous if punctured or thrown into a fire or incinerator. To ensure safe disposal that complies with local regulations and laws, contact your local trash and recycling facility.

Note: Please refer to fda.gov for the most current information with regard to safe disposal of unused medication.

Patient Rights and Responsibilities

Your Rights as a Patient

As a patient of Axium Healthcare Puerto Rico and its family of pharmacies, you have the right to:

1. Be fully informed at the time of admission or before the start of treatment of your rights and responsibilities.
2. Know which products the company will provide and any limitations on those offerings.
3. Receive considerate and respectful care regardless of age, race, color, sex, national origin, or whether or not an Advanced Directive has been executed. This applies to you and your property.
4. Know about the philosophy, characteristics, scope, and limitations of the Patient Management Program.
5. Expect confidentiality and privacy of all information contained in your pharmacy records and of Protected Health Information.
6. Identify the staff member of the program and their job title, and to speak with a supervisor of the staff member if requested.
7. Receive information about the Patient Management Program and up to date information about your condition, treatment, alternative treatments, and care plan.
8. Be free from verbal, physical, sexual, and psychological abuse, to have yourself and your property treated fairly and with dignity. Choose a healthcare provider and receive care without discrimination in accordance with physician's orders.
9. Review your medical insurance before you begin therapy. You have the right to review and receive an explanation of your bill, including the expected sources of payment. As with other healthcare services, you may be responsible for certain charges related to your therapy. You have the right and responsibility to discuss your need for a special payment plan with members of the company's Reimbursement Department. If you are referred to an organization, you have the right to be informed of any financial benefit. Be informed in advance of your financial responsibility related to services provided.
10. To choose your healthcare providers and receive appropriate care without discrimination

and in accordance with physician's orders.

11. Review your medical records, at any reasonable time, with the permission of your doctor.
12. Receive administrative information regarding changes in or termination of the Patient Management Program.
13. Participate in developing your plan of care and discharge plan; to be informed of all services the agency provides; when and how services will be provided, and the name and function of any person and affiliated agency providing care and services. Decline participation, or disenroll, in the PMP at any point in time.
14. Receive training in the prescribed therapy. The reason for its use, and any possible side effects related to the use of drugs, supplies, and equipment will be explained. Written instructions, demonstrations, and supervision by a registered nurse will be provided, until you are able to repeat the required tasks safely.
15. Receive supplies and equipment delivered at a time that is mutually acceptable to you and the Pharmacy.
16. Speak with a health professional. To access the Pharmacy staff as needed. Ongoing care includes both direct and indirect care by staff experienced in the therapy you receive. This includes 24-hour access to nursing staff and/or pharmacy staff.
17. Have personal health information shared with the Patient Management Program only in accordance with state and Federal law.
18. Expect privacy including confidential handling of all your medical records and to refuse release of records to any individual outside the company, except in the case of transfer to another health facility, and as otherwise provided by law, third-party payer contract, or as described in the Notice of Privacy Practices.
19. Refuse treatment, to the extent permitted by law, after being fully informed of the results of such a decision.
20. Lodge a complaint to the pharmacist about any concern, treatment, or care and expect an answer to any complaints or concerns you discuss with the company within the time frame required by the carrier, but not more than 5 business days following the complaint without concern of discrimination, interference, coercion, or reprisal. If after continued discussion you are still not satisfied, your paperwork lists several applicable hotlines that are available to lodge a complaint or start an investigation.
21. Receive information on the proper use and storage of your prescription medication.
22. Receive instruction of drug recalls.
23. Be fully informed of your responsibilities.
24. Receive instruction on how to receive medication during a disaster or if a delay occurs.
25. Formulate an Advanced Directive according to state law.
26. Have any person of your choosing be a part of the pharmacy consultation or care planning.
27. These rights pertain to the legal guardian if the patient is legally incompetent or a minor, according to state law.

Your Responsibilities as a Patient

As a patient, you have the responsibility to:

1. Give accurate and complete health information concerning your past illnesses, hospitalizations, medications, allergies, insurance coverage, and other issues pertinent to your therapy.
2. To carry out your therapy as instructed, to maintain a safe home setting for the storage and proper use of your medications, and to be available or return calls to pharmacy staff to discuss response and tolerance of therapy once you have been introduced to our pharmacy and Patient Management Program.
3. Notify the pharmacy's nurse or pharmacist of side effects or significant changes in your medical condition.
4. Participate in planning your care.
5. Respond to our outreach to schedule your next refill.
6. Communicate if you do not comprehend the course of treatment or care plan.
7. Respect the rights of pharmacy personnel.
8. Review the information about our company sent to you in your first shipment.
9. Call our office if you have any questions about the company's information or about your consent forms.
10. Sign and return your consent forms if required by your insurance plan.
11. Take care of and maintain any equipment that is provided to you by the company.
12. Notify the pharmacy of any changes to your contact information.
13. Request more information about anything you do not understand, including billing questions.
14. Notify the pharmacy if you are admitted to a hospital, if the doctor stops your therapy, or if you plan to travel while receiving therapy.
15. Submit any forms that are necessary to participate in the program, to the extent required by law.
16. Notify your treating provider of participation in the Patient Management Program, if applicable.
17. Pay certain charges should they not be covered by your insurance and/or arrange special payment plans as needed.
18. Voice complaints or concerns about treatment issues to the pharmacy staff or to a pharmacist.
    - If you are in Puerto Rico and have a complaint or concern, please call us directly at 844-355-4191. If you need a government agency, please call the Patient Advocacy Office at 787-977-0909.
    - If you are in the state of CT and you have a concern that an error may have occurred in the dispensing of your prescription you may contact the Department of Consumer Protection, Drug Control Division, by calling 860-713-6065.

- If you are in the state of FL call Home Health Hotline 888-419-3456, if you need to resolve any complaints or need questions answered regarding a Home Health Agency. Hours of operation: 8:00 a.m to 5:00 p.m. Monday through Friday except holidays.
- If you are in the state of FL and need to report abuse, neglect, or exploitation: 24 Hour Hotline 800-96A-BUSE (800-962-2873).
- If you are in the state of TX and need to report abuse, neglect, or exploitation: Abuse Hotline: 800-252-5400.
- If you are in the state of SC call for Home Health complaints: 803-545-4370 or https://dph.sc.gov/professionals/healthcare-quality/file-complaint
- If you are in the state of Maine, mail complaint to Complaint Coordinator, Office of Professional and Occupational Regulation, 35 State House Station, Augusta, ME 04333-0035.
- If you are in the state of CA and Medi-Cal patient for a complaint call: 916-552-9500 or email: specialtyprovider@dhcs.ca.gov
- Accreditation Commission for Health Care: 919-785-1214.

If you need clarification of these rights and responsibilities, please contact us for assistance. We're here to help!

Notice of Privacy Practices

Important Information About Your Rights and Our Responsibilities

Protecting your personal health information is important. Each year, we're required to send you specific information about your rights and some of our duties to help keep your information safe.

This notice combines the following required yearly communications:

- State notice of privacy practices
- Health Insurance Portability and Accountability Act (HIPAA) notice of privacy practices.

State Notice of Privacy Practices

When it comes to handling your health information, we follow relevant state laws, which are sometimes stricter than the federal HIPAA privacy law. This notice:

- Explains your rights and our duties under state law.
- Applies to any health, dental, vision and life insurance benefits and treatment by your preferred pharmacy/Infusion providers that you may have.

Your state may give you additional rights to limit sharing your health information. Please call your pharmacy at the phone number on your medication label or at 844-355-4191 for more details.

Your Personal Information

Your nonpublic (private) personal information (PI) identifies you. You have the right to see and correct your PI. We may collect, use, and share your PI as described in this notice. Our goal is to protect your PI because your information can be used to make judgments about your health, finances, character, habits, hobbies, reputation, career, and credit.

We may receive your PI from others, such as hospitals, insurance companies, or other providers. We may also share your PI with others outside our company — without your approval, in some cases. But we take reasonable measures to protect your information. If an activity requires us to give you a chance to opt out, we'll let you know, and we'll let you know how to tell us you don't want your PI used or shared for an activity you can opt out of.

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.

HIPAA Notice of Privacy Practices

We keep the health and financial information of our current and former patients private as required by law and our own internal rules. We're also required by federal law to give you this notice to explain your rights and our legal duties and privacy practices.

Your Protected Health Information

There are times we may collect, use, and share your Protected Health Information (PHI) as allowed or required by law, including the HIPAA Privacy Rule. Here are some of those times:

Payment: We collect, use, and share PHI to get payment for the medical care you receive from us or share information with the doctors, clinics, pharmacies, infusion centers, and others who bill for your care.

Healthcare operations: We collect, use, and share PHI for our healthcare operations.

Treatment activities: We collect, use, and share PHI to provide the care, medicine, and services you need or to help doctors, hospitals, pharmacies, infusion centers, and others get you the care you need. Examples of ways we use your information:

- We may share PHI with your other doctors or your hospital so that they may treat you.
- We may use PHI to review the quality of care and services you get.
- We may use PHI to help you with services for conditions like asthma, diabetes, or traumatic injury.
- We may collect and use publicly and/or commercially available data about you to support you and help you get available health services.
- We may use PHI with technology to support and enable services provided to you.
- We may use your PHI to create, use, or share de-identified data as allowed by HIPAA.
- We may also use and share PHI directly or indirectly with health information exchanges for payment, healthcare operations, and treatment. If you don't want your PHI to be shared in these situations, contact your pharmacy at the phone number on your medication label or at 844-355-4191 for more information.
- We may also send you reminders about routine medical checkups, medicine adherence, and tests.
- We may share your information in an emergency or disaster relief situation.

Sharing your PHI with you: We must give you access to your own PHI. You may get emails that have limited PHI, such as appointment reminders, refill reminders, or welcome materials. We'll ask your permission and preferences for how we contact you.

Sharing your PHI with others: In most cases, if we use or share your PHI outside of treatment, payment, operations, or research activities, we have to get your permission in writing first. We must also get your written permission before:

- Using your PHI for certain marketing activities.
- Selling your PHI.
- Sharing any psychotherapy notes from your doctor or therapist.

You have the right and choice to tell us to:

- Share information with your family, close friends, or others involved with your current treatment or payment for your care.
- Share information in an emergency or disaster relief situation.

If you can't tell us your preference, for example in an emergency or if you're unconscious, we may share your PHI if we believe it's in your best interest. We may also share your information when needed to lessen a serious and likely threat to your health or safety.

Other reasons we may use or share your information: We are allowed, and in some cases required, to share your information in other ways — usually for the good of the public, such as public health and research. We can share your information for these specific purposes:• Helping with public health and safety issues, such as:

  - Preventing disease
  - Helping with product recalls
  - Reporting adverse reactions to medicines
  - Reporting suspected abuse
  - Neglect, or domestic violence
  - Preventing or reducing a serious threat to anyone's health or safety

- Doing health research.
- Obeying the law, if it requires sharing your information.
- Responding to organ donation groups for research and certain reasons.
- Addressing workers' compensation, law enforcement and other government requests, and to alert proper authorities if we believe you may be a victim of abuse or other crimes.
- To work with a medical examiner or funeral director.
- Responding to lawsuits and legal actions.
- Responding to the Secretary of Human and Health Services for HIPAA rules compliance and enforcement purposes.

Authorization: We'll get your written permission before we use or share your PHI for any purpose not stated in this notice. You may cancel your permission at any time, in writing. We will then stop using your PHI for that purpose. But if we've already used or shared your PHI with your permission, we cannot undo any actions we took before you told us to stop.

Race, ethnicity, language, sexual orientation, and gender identity: We may collect, infer, receive and/or maintain race, ethnicity, language, sexual orientation, and gender identity information about you and protect this information as described in this notice. We may use this information to help you, including identifying your specific needs, developing programs and educational materials, and offering interpretation services. We don't share this information with unauthorized persons.

Your Rights

Under federal law, you have the right to:

- Send us a written request to see or get a copy of your PHI, including a request for a copy of your PHI through email. Remember, there's a risk your PHI could be read by a third party when it's sent unencrypted, meaning regular email. So, we will first confirm that you want to get your PHI by unencrypted email before sending it to you. We will provide you a copy of your PHI usually within 30 days of your request, unless a more stringent state requirement applies. If we need more time, we will let you know.
- Ask that we correct your PHI that you believe is wrong or incomplete. If someone else, such as another doctor, gave us the PHI, we'll let you know so you can ask him or her to correct it. We may say "no" to your request, but we'll tell you why in writing within 60 days.
- Send us a written request not to use your PHI for treatment, payment, or healthcare operations activities. We may say "no" to your request, but we'll tell you why in writing.
- Request confidential communications. You can ask us to send your PHI or contact you using other ways that are reasonable. Also, let us know if you want us to send your mail to a different address if sending it to your home could put you in danger.
- Send us a written request to ask us for a list of those with whom we've shared your PHI. We will provide you a list usually within 60 days of your request. If we need more time, we will let you know.
- Ask for a restriction for services you pay for out of your own pocket: If you pay in full for any medical services out of your own pocket, you have the right to ask for a restriction. The restriction would prevent the use or sharing of that PHI for treatment, payment, or operations reasons. If a law requires sharing your information, we don't have to agree to your restriction.

- Call your pharmacy at the phone number on your medication label or at 844-355-4191 to use any of these rights. A representative can give you the address to send the request. They can also give you any forms we have that may help you with this process.

How We Protect Information

We keep the health and financial information of our current and former patients We're dedicated to protecting your PHI, and we've set up a number of policies and information practices to help keep your PHI secure and private. If we believe your PHI has been breached, we must let you know.

We keep your oral, written and electronic PHI safe using the right procedures, and through physical and electronic ways. These safety measures follow federal and state laws. Some of the ways we keep your PHI safe include securing offices that hold PHI, password-protecting computers, and locking storage areas and filing cabinets. We require our employees to protect PHI through written policies and procedures. These policies limit access to PHI to only those employees who need the data to do their jobs. Employees are also required to wear ID badges to help keep unauthorized people out of areas where your PHI is kept. Also, where required by law, our business partners must protect the privacy of data we share with them as they work with us. They're not allowed to give your PHI to others without your written permission, unless the law allows it and it's stated in this notice.

Potential Impact of Other Applicable Laws

HIPAA, the federal privacy law, generally doesn't cancel other laws that give people greater privacy protections. As a result, if any state or federal privacy law requires us to give you more privacy protections, then we must follow that law in addition to HIPAA. One example is with Substance Use Disorder (SUD) Information we may receive from Providers or programs regulated by federal law (42 CFR Part 2). All disclosures of such SUD information must comply with applicable federal and state privacy laws, including 42 CFR Part 2. We are allowed to use and disclose SUD information for certain treatment, payment, and healthcare operations activities. You have the right to consent to the disclosure of SUD information in certain circumstances. You can revoke this consent in writing at any time.

To See More Information

To read more information about how we collect and use your information, your privacy rights, and details about other state and federal privacy laws, please visit the Axium Healthcare privacy webpage at https://axiumpr.com/documents/privacy-notice.pdf.

Calling or Texting You

We, including our affiliates and/or vendors, may call or text you by using an automatic telephone dialing system and/ or an artificial voice. But we only do this in accordance with the Telephone Consumer Protection Act (TCPA). The calls may be about treatment options or other health-related benefits and services for you. If you don't want to be contacted by phone, just let the caller know or contact the pharmacy to add your phone number to our Do Not Call list. We will then no longer call or text you.

Complaints

If you think we haven't protected your privacy, you can file a complaint with us by calling the pharmacy at the phone number on your medication label or at 844-355-4191. You may also file a complaint with the U.S. Department of Health and Human Services Office for Civil Rights by visiting https://www.hhs.gov/hipaa/filing-a-complaint/index.html. We will not take action against you for filing a complaint.

Contact Information

You may call us at the phone number on your medication label or at 844-355-4191 to apply your rights, file a complaint, or talk with you about privacy issues.

Copies and Changes

You have the right to get a new copy of this notice at any time. Even if you have agreed to get this notice by electronic means, you still have the right to ask for a paper copy. We reserve the right to change this notice. A revised notice will apply to PHI we already have about you, as well as any PHI we may get in the future. We're required by law to follow the privacy notice that's in effect at this time. We may tell you about any changes to our notice through a newsletter, our website, or a letter.

Effective Date of This Notice

The original effective date of this Notice was April 14, 2003. The most recent revision is June 10, 2025.

It's Important We Treat You Fairly

We follow federal civil rights laws in our health programs and activities. We don't discriminate, exclude people, or treat them differently based on race, color, national origin, sex, age, or disability. If you have disabilities, we offer free aids and services. If your main language isn't English, we offer help for free through interpreters and other written

languages. Call your pharmacy at the phone number on your medication label or at 844-355-4191 for help (TTY/TDD: 711).

If you think we failed to offer these services or discriminated based on race, color, national origin, age, disability, or sex, you can file a complaint, also known as a grievance. You can file a civil rights complaint through one of these ways:

- Write to:

  Section 1557 Coordinator
  233 S. Wacker Dr, Suite 3700, Chicago, IL 60606
  Email: section1557coordinator@carelon.com

- File a civil rights complaint with:

  U.S. Department of Health and Human Services, Office for Civil Rights
  200 Independence Ave, SW, Room 509F,
  HHH Building, Washington, D.C. 20201

- Call 800-368-1019 (TDD: 800-537-7697)

- Go online at https://ocrportal.hhs.gov/ocr/smartscreen/main.jsf or http://www.hhs.gov/ocr/office/file/index.html

Get Help in Your Language

Aside from helping you understand your privacy rights in another language; we also offer this notice in a different format for members with visual impairments. If you need a different format, please call your pharmacy at the phone number on your medication label or at 844-355-4191 for help.

The pharmacy offers free translation and interpretation in your language for prescription use. This includes help talking with a pharmacist, understanding the prescription label, and understanding other written info. We also provide free aids like braille or large print. Contact the pharmacy to get these services quickly.

Arabic

تقدم الصيدلية الرتجمة التحريرية والرتجمة الشفهية الفورية مجانا بلغتك المستخدام الوصفة الطبية. يتضمن ذلك املساعدة يف التحدث مع الصيديل وفهم ملصق الوصفة الطبية وفهم املعلومات املكتوبة ألخرى. كام نقدم مساعدات مجانية مثل طريقة برايل أو الطباعة باألحرف الكبرية. بادر بالتصال بالصيدلية للحصول عىل هذه الخدمات رسيعا.

Armenian

Դեղատունն առաջարկում է անվճար բանավոր և գրավոր թարգմանություն ձեր լեզվով՝ դեղատոմսով դեղերի մասին տեղեկությունների համար: Սա ներառում է օգնություն դեղագործի հետ խոսելու, դեղատոմսի պիտակը հասկանալու և գրավոր այլ տեղեկություններ ստանալու հարցում: Մենք տրամադրում ենք նաև անվճար օժանդակ նյութեր, ինչպիսիք են բրայլը կամ մեծատառ տպագրությունը: Այս ծառայություններն արագ ստանալու համար կապ հաստատեք դեղատան հետ:

Chinese

药房提供您语言的免费翻译和口译供处方使用。这包括帮助与药剂师交谈、了解处方标签以及了解其他书面信息。我们还提供免费辅助工具，如盲文或大字版。请联系药房以快速获得这些服务。

Farsi

داروخانه به شما خدمات ترجمه کتبی و شفاهی رایگان برای نحوه مصرف دارو ارائه می دهد. این خدمات عبارتند از کمک در صحبت با داروساز، درک برچسب دارو و فهمیدن سایر اطلاعات مکتوب. ما همچنین کمک های رایگانی مانند خط بریل یا چاپ درشت ارائه می‌دهیم. برای دریافت سریع این خدمات با. داروخانه تماس بگیرید.

French

La pharmacie propose une traduction et une interprétation gratuites dans votre langue pour l'utilisation des ordonnances. Cela comprend une l'aide pour discuter avec un pharmacien, comprendre l'étiquette de prescription et d'autres informations écrites. Nous fournissons également des aides gratuites comme le braille ou les gros caractères. Contactez la pharmacie pour disposer rapidement de ces services.

Haitian Creole

Famasi a ofri tradiksyon ak entèpretasyon gratis nan lang ou pou itilizasyon preskripsyon. Sa enkli èd pou pale ak yon famasyen, konprann etikèt preskripsyon an, ak konprann lòt enfòmasyon ekri. Nou bay èd gratis tankou bray oswa gwo lèt. Kontakte famasi a pou w jwenn sèvis sa yo byen vit.

Italian

Per i farmaci soggetti a prescrizione, la farmacia offre servizi gratuiti di traduzione e interpretariato nella tua lingua. Ciò include la comunicazione con un farmacista, la comprensione dell'etichetta dei farmaci prescritti e la comprensione di altre informazioni scritte. Forniamo inoltre supporti gratuiti come il braille o la stampa in caratteri grandi. Contatta subito la farmacia per ottenere questi servizi.

Japanese

当薬局では、処方箋の使用に際して、お客様の言語への翻訳・通訳サービスを無料で提供しています。このサービスには、薬剤師との会話、処方箋ラベルの理解、その他の書面による情報の理解に関する支援が含まれます。また、点字や拡大文字などの補助資料も無料で提供しております。薬局にご連絡いただければ、迅速にサービスをご提供いたします。

Korean

처방전 사용을 위해 귀하의 언어로 무료 번역 및 통역 서비스를 약국에서 제공합니다. 여기에는 약사와의 상담, 처방전 라벨 이해, 기타 서면 정보 이해에 대한 지원이 포함됩니다. 점자나 대형 인쇄본과 같은 무료 보조 도구도 제공합니다. 해당 서비스를 신속하게 받으시려면 약국에 연락하시기 바랍니다.

Polish

Jeśli chcesz zrealizować receptę w swoim języku, apteka może zapewnić Ci bezpłatne tłumaczenia pisemne i ustne. Oferowana pomoc dotyczy komunikowania się z farmaceutą i zrozumienia etykiety leku oraz innych zapisanych informacji. Udostępniamy również bezpłatne pomoce, takie jak informacje zapisane alfabetem Braille'a lub dużym drukiem. Aby szybko skorzystać z tych usług, skontaktuj się z apteką.

Portuguese

A farmácia oferece tradução e interpretação gratuitas no seu idioma para uso de receitas. Isso inclui ajuda para falar com um farmacêutico, entender o rótulo da receita e entender outras informações escritas. Também fornecemos recursos gratuitos, como braille ou letras grandes. Entre em contacto com a farmácia para obter esses serviços rapidamente.

Punjabi

ਫਾਰਮੇਸੀ ਨੁਸਖ਼ੇ ਦੀ ਵਰਤੋ ਲਈ ਤੁਹਾਡੀ ਭਾਸ਼ਾ ਵਿਚ ਮੁਫਤ ਅਨੁਵਾਦ ਅਤੇ ਵਿਆਖਿਆ ਦੀ ਪੇਸ਼ਕਸ਼ ਕਰਦੀ ਹੈ। ਇਸ ਵਿਚ ਇੱਕ ਫਾਰਮਾਸਿਸਟ ਨਾਲ ਗੱਲ ਕਰਨ ਵਿਚ ਮਦਦ, ਨੁਸਖ਼ੇ ਦੇ ਲੇਬਲ ਨੂੰ ਸਮਝਣਾ, ਅਤੇ ਹੋਰ ਲਿਖਤੀ ਜਾਣਕਾਰੀ ਨੂੰ ਸਮਝਈਆ ਸ਼ਾਮਲ ਹੈ। ਅਸੀ ਬ੍ਰੇਲ ਜਾਂ ਵੱਡੇ ਪ੍ਰਿੰਟ ਵਰਗੀਆਂ ਮੁਫ਼ਤ ਸਹਾਇਤਾ ਵੀ ਪ੍ਰਦਾਨ ਕਰਦੇ ਹਾਂ। ਇਹ ਸੇਵਾਵਾਂ ਜਲਦੀ ਪ੍ਰਾਪਤ ਕਰਨ ਲਈ ਫਾਰਮੇਸੀ ਨਾਲ ਸੰਪਰਕ ਕਰੋ।

Russian

Аптека предлагает бесплатный` письменный и устный перевод на ваш язык для информации о рецептурных препаратах. Это включает в себя помощь в общении с фармацевтом, понимание этикетки рецепта и другую письменную информацию. Мы также предоставляем бесплатные вспомогательные материалы, такие как шрифт Брайля или крупный шрифт. Обратитесь в аптеку, чтобы получить эти услуги быстро.

Spanish

La farmacia ofrece servicios de traducción e interpretación gratuitos en su idioma para su uso con medicamentos recetados. Esto incluye ayuda para hablar con un farmacéutico, comprender la etiqueta de los medicamentos recetados y comprender otra información escrita. También ofrecemos ayuda gratuita, como braille o letra grande. Comuníquese con la farmacia para obtener estos servicios rápidamente.

Tagalog

Nag-aalok ang botika ng libreng pagsasalin at interpretasyon sa iyong lengguwahe para sa paggamit ng reseta. Kabilang dito ang tulong sa pakikipag-usap sa isang parmasyutiko, pag-unawa sa tatak ng reseta, at pag-unawa sa iba pang nakasulat na impormasyon. Nagbibigay din kami ng mga libreng tulong tulad ng braille o malaking print. Makipag-ugnayan sa parmasya upang mabilis na makuha ang mga serbisyong ito.

Vietnamese

Nhà thuốc cung cấp bản dịch và thông dịch miễn phí bằng ngôn ngữ của quý vị cho sử dụng toa thuốc. Điều này bao gồm trợ giúp nói chuyện với dược sĩ, hiểu toa thuốc và hiểu các thông tin bằng văn bản khác. Chúng tôi cũng cung cấp các hỗ trợ miễn phí như chữ nổi braille hoặc bản in chữ lớn. Vui lòng liên hệ với nhà thuốc để nhận được những dịch vụ này một cách nhanh chóng.

Medicare DMEPOS Supplier Statement

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).

- A supplier must be in compliance with all applicable Federal and State licensure and regulatory requirements.
- 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.
- A supplier must have an authorized individual (whose signature is binding) sign the enrollment application for billing privileges.
- A supplier must fill orders from its own inventory, or contract with other companies for the purchase of items necessary to fill orders. A supplier may not contract with any entity that is currently excluded from the Medicare program, any State health care programs, or any other Federal procurement or non-procurement programs.
- 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.
- 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.
- A supplier must maintain a physical facility on an appropriate site and must maintain a visible sign with posted hours of operation. The location must be 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.
- A supplier must permit CMS or its agents to conduct on-site inspections to ascertain the supplier's compliance with these standards.
- 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 hours is prohibited.
- 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.
- A supplier is prohibited from direct solicitations to Medicare beneficiaries. For complete details on this prohibition see 42 CFR § 424.57 (c) (11).
- 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.
- 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.
- A supplier must agree to furnish CMS any information required by the Medicare statute and regulations.
- 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 for those specific products and services (except for certain exempt pharmaceuticals).
- All suppliers must notify their accreditation organization when a new DMEPOS location is opened.
- All supplier locations, owned or subcontracted, must meet the DMEPOS quality standards and be separately accredited in order to bill Medicare.
- All suppliers must disclose upon enrollment all products/services, including the addition of new product lines for which they are seeking accreditation.
- A supplier must meet the surety bond requirements specified in 42 CFR § 424.57(d).
- A supplier must obtain oxygen from a state-licensed oxygen supplier.
- A supplier must maintain ordering and referring documentation consistent with provisions found in 42 CFR § 424.516(f).
- A supplier is prohibited from sharing a practice location with other Medicare providers and suppliers.
- A supplier must remain open to the public for a minimum of 30 hours per week except physicians (as defined in section 1848(j) (3) of the Act) or physical and occupational therapists or a DMEPOS supplier working with custom made orthotics and prosthetics.

The products and/or services provided to you by Axium Healthcare Puerto Rico 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.ecfr.gov. Upon request we will furnish you a written copy of the standards.

Medicare Equipment Warranty Information Form

We've Got You Covered

Every product sold or rented by our company carries a 1-year manufacturer's warranty. **Axium Healthcare Puerto Rico**, will notify all Medicare beneficiaries of the warranty coverage, and we will honor all warranties under applicable law.

Axium Healthcare Puerto Rico will repair or replace, free of charge, Medicare-covered equipment that is under warranty. In addition, an owner's manual with warranty information will be provided to beneficiaries for all durable medical equipment where this manual is available.

Please review, sign, and date the following statement and keep with your medical records.

(This is for your — the beneficiary's — record keeping and for use with any warranty claims. You do not need to mail this back to Axium Healthcare Puerto Rico).

I have been instructed and understand the warranty coverage on the product I have received. I also have received written information and instructions on the safe use of the equipment I have been provided.

Beneficiary Signature	Date

PLEASE KEEP FOR YOUR RECORDS

Medicare Capped Rental and Inexpensive or Routinely Purchased Items Notification for Services

On or After January 1, 2006

I received instructions and understand that Medicare defines the _____ that I received as being either a capped rental or an inexpensive or routinely purchased item.

For Capped Rental Items:

- Medicare will pay a monthly rental fee for a period not to exceed 13 months, after which ownership of the equipment is transferred to the Medicare beneficiary.
- After ownership of the equipment is transferred to the Medicare beneficiary, it is the beneficiary's responsibility to arrange for any required equipment service or repair.
- Examples of this type of equipment include: Hospital beds, wheelchairs, alternating pressure pads, air-fluidized beds, nebulizers, suction pumps, continuous airway pressure (CPAP) devices, patient lifts, and trapeze bars.

For Inexpensive or Routinely Purchased Items:

- Equipment in this category can be purchased or rented; however, the total amount paid for monthly rentals cannot exceed the fee schedule purchase amount.
- Examples of this type of equipment include: Canes, walkers, crutches, commode chairs, low pressure and positioning equalization pads, home blood glucose monitors, seat lift mechanisms, pneumatic compressors, (lymphedema pumps), bed side rails, and traction equipment.

I select the: ☐ Purchase Option ☐ Rental Option	
Beneficiary Signature	Date

My Medication Log for the Month of:

Medication	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16
Morning *Time Taken*																
Noon *Time Taken*																
Evening *Time Taken*																
Bedtime *Time Taken*																

Medication	17	18	19	20	21	22	23	24	25	26	27	28	29	30	31	
Morning *Time Taken*																
Noon *Time Taken*																
Evening *Time Taken*																
Bedtime *Time Taken*																

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Evening *Time Taken*																
Bedtime *Time Taken*																

Medication	17	18	19	20	21	22	23	24	25	26	27	28	29	30	31	
Morning *Time Taken*																
Noon *Time Taken*																
Evening *Time Taken*																
Bedtime *Time Taken*																

Questions for My Healthcare Team

My Treatment Goal

How are we doing?

We encourage you to let us know how we're doing and how we can improve the patient experience for you. You can call us at **844-355-4191** or visit us at **axiumpr.com**. We'd love to hear from you!

ACCREDITED
Specialty Pharmacy
Expires 01/01/2027

Expires 05/15/2027

Rare Disease & Orphan Drugs
Expires 05/15/2027

Axium
healthcare puerto rico

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