

Everything CPAP Patient Rights & Responsibilities

Patient Rights

- Exercise these rights regardless of race, creed, religion, sex or source of payment.
- Considerate and respectful care.
- Examine and receive an explanation of your bill regardless of source of payment.
- Participate actively in decisions regarding your medical care, to the extent permitted by law; this includes the right to refuse treatment.
- Confidential treatment of all communications and records pertaining to your care.
- Receive information from your physician about your illness, your course of treatment, and your prospects of recovery in terms you understand.
- Receive as much information about any proposed treatment or procedure as you may need in order to give informed consent or refuse this course of treatment.
- Reasonable responses to any reasonable requests you make for service.
- Refuse equipment or supplies even against the advice of your physician.
- Reasonable continuity of care and to know in advance the time and day for recurring deliveries of supplies and equipment.
- Know which patient responsibilities and policies apply to your conduct as a patient.
- Have all patients' rights apply to the person who may have legal responsibility to make decisions regarding medical care on behalf of the patient.
- Be given reasonable notice of discontinuation of services
- Knowledge of the name of the physician who has primary responsibility for coordinating your care.
- Full consideration of privacy concerning your medical care.
- The right to choose another vendor for your needs.
- Be advised if proposed to engage in or perform human experimentation affecting your care. You have the right to refuse to participate in such research projects.
- For your continued satisfaction we have a grievance procedure in place should you need to use it without fear of termination of service or other reprisals.

Patient Responsibilities

- Provide to the best of your knowledge accurate and complete customer information.
- Follow the plan of care or service recommended by your physician.
- Care for, use as instructed and return rental equipment in good condition, normal wear and tear expected.
- Pay for the replacement cost of any equipment damaged, destroyed or lost due to misuse, abuse or neglect.
- Notify us of any equipment malfunction or defect, and allow company technicians to enter the premises to repair, relocate or provide substitute equipment.
- Be responsible for any payment not paid by your insurance company, except when not allowed by law.
- Make it known that you clearly understand the equipment and services being provided.
- Advise us of any changes in your status, including change of address, medical condition, etc.
- Understand that the term of all rentals shall repeat monthly based on the date of the original rental
- Read and sign the Welcome Packet Check List and other necessary documentation
- Patient has a right to an Advanced Directive.
- Please see your physician for further information
- In case of medical emergency dial 911
- If you are in need of equipment or services during a natural disaster, contact your local authorities.

Medicare Standards for DMEPOS Suppliers

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

1. A supplier must be in compliance with all applicable Federal and State licensure and regulatory requirements.
2. A supplier must provide complete and accurate information on the DMEPOS supplier application. Any changes to this information must be reported to the National Supplier Clearinghouse within 30 days.
3. A supplier must have an authorized individual (whose signature is binding) sign the enrollment application for billing privileges.
4. 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 Federal procurement or non-procurement programs.
5. A supplier must advise beneficiaries that they may rent or purchase inexpensive or routinely purchased durable medical equipment, and of the purchase option for capped rental equipment.
6. A supplier must notify beneficiaries of warranty coverage and honor all warranties under applicable State Law, and repair or replace free of charge Medicare covered items that are under warranty.
7. A supplier must maintain a physical facility on an appropriate site 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.
8. A supplier must permit CMS or its agents to conduct on-site inspections to ascertain the supplier's compliance with these standards.
9. A supplier must maintain a primary business telephone listed under the name of the business in a local directory or a toll free number available through directory assistance. The exclusive use of a beeper, answering machines, answering service or cell phones during business hours is prohibited.
10. A supplier must have comprehensive liability insurance in the amount of at least \$300,000 that covers both the supplier's place of business and all the customers and employees of the supplier. If the supplier manufactures its own items, this insurance must also cover product liability and completed operations.
11. A supplier is prohibited from direct solicitation to Medicare beneficiaries. For complete details on this prohibition see 42 CFR 424.57 (c) (11).
12. A supplier is responsible for delivery of and must instruct beneficiaries on the use of Medicare covered item, and maintain proof of delivery and beneficiary instruction.
13. A supplier must answer questions and respond to complaints of beneficiaries, and maintain documentation of such contacts.
14. A supplier must maintain and replace at no charge or repair cost either directly, or through a service contract with another company, any Medicare-covered items it has rented to beneficiaries.
15. A supplier must accept returns of substandard (less than full quality for the particular item) or unsuitable items (inappropriate for the beneficiary at the time it was fitted and rented or sold) from beneficiaries.
16. A supplier must disclose these standards to each beneficiary it supplies a Medicare-covered item.
17. A supplier must disclose any person having ownership, financial, or control interest in the supplier.
18. A supplier must not convey or reassign a supplier number; i.e., the supplier may not sell or allow another entity to use its Medicare billing number.
19. A supplier must have a complaint resolution protocol established to address beneficiary complaints that relate to these standards. A record of these complaints must be maintained at the physical facility.
20. Complaint records must include: the name, address, telephone number and health insurance claim number of the beneficiary, a summary of the complaint, and any actions taken to resolve it.
21. A supplier must agree to furnish CMS any information required by the Medicare statute and regulations.
22. All suppliers must be accredited by a CMS-approved accreditation organization in order to receive and retain a supplier billing number. The accreditation must indicate the specific products and services, for which the supplier is accredited in order for the supplier to receive payment for the specific products and services (except for certain exempt pharmaceuticals).
23. All suppliers must notify their accreditation organization when a new DMEPOS location is opened.
24. All supplier locations, whether owned or subcontracted, must meet the DMEPOS quality standards and be separately accredited in order to bill Medicare.
25. All suppliers must disclose upon enrollment all products and services, including the addition of new product lines for which they are seeking accreditation.
26. A supplier must meet the surety bond requirements specified in 42 CFR 424.57 (d)
27. A supplier must obtain oxygen from a state-licensed oxygen supplier.
28. A supplier must maintain ordering and referring documentation consistent with provisions found in 42 CFR 424.516(f)
29. A supplier is prohibited from sharing a practice location with other Medicare providers and suppliers.
30. 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 suppliers working with custom made orthotics and prosthetics.