



Making care remarkable, for you

Welcome to Novant Health Specialty Pharmacy. You're getting this packet because your clinician prescribed a specialty medication to treat a complex condition. This guide goes hand-in-hand with your new prescription. It introduces you to Novant Health Specialty Pharmacy and how we help you manage your condition as well as your health. As a Novant Health Specialty Pharmacy patient, you receive more than professionally dispensed specialty medications. You also get a partner in your healthcare. Our team at Novant Health Specialty Pharmacy is dedicated to providing support to clinicians and their patients. If you have any questions or concerns about the prescription medication(s) we have provided, please contact us.

We're here to help you on your journey to remarkable.

Table of contents

2. Your care team
What to expect
3. Safety and storage
4. Emergency and disaster preparedness
5. Billing and understanding your insurance plan
7. Medicare prescription drug coverage and your rights
8. Medication delivery and more
Ordering your prescription
Medication therapy management program
9. Patient rights and responsibilities
12. Patient questions and concerns
When to contact us
13. Frequently asked medication questions
Patient concerns, complaints, billing questions or
general questions
14. Home safety information
15. Handwashing and infection prevention
16. Acknowledgment of receipt of notice of privacy practices
18. How to contact us



Your care team

Our mission is to improve the health of communities, one person at a time. Our promise: We are making your healthcare experience remarkable. We will bring you world-class clinicians, care and technology — when and where you need it. We are reinventing the healthcare experience to be simpler, more convenient and more affordable, so that you can focus on getting better and staying healthy. To make that happen, we have a whole team of experts dedicated to your service.

Customer service representatives

- Schedule medication delivery times and find locations that fit your needs.
- Answer phone calls and triage to the right care team member.
- Proactively monitor your package shipment once it leaves our pharmacy to ensure it arrives on time and to alert you of any potential delays. To obtain your order status, please call our pharmacy (phone numbers are listed on page 18).

Medication management specialists

- Work to make sure your insurance coverage and copays are correct.
- Help with the prior authorization process between your insurance and doctor.
- Help find ways that may reduce medication copays (financial assistance).

Pharmacists

- Help make sure you know how your medications work.
- Look to see if any of your medications may not work well together.
- Follow up to see how you are doing with medications and side effects.
- Answer your questions about medication. (See frequently asked questions on page 13.)
- Can provide you with evidence-based health information that includes content for common conditions, diagnoses, and treatment diagnostics and interventions.

What to expect

Personalized care and regular follow-ups

Our specialty trained team members will discuss your treatment plan with you and address your questions or concerns. We will be in close contact with you throughout your treatment.

Benefits

There may be times when you are prescribed a medication that your insurance plan may not cover. We will work to lower your drug costs by getting the medication covered, switching to a medication that is covered or applying valid manufacturer discounts.

Patient management program

Our team wants to make sure that your medications are working for you. Following the treatment plan created by your healthcare team, the patient management program helps you manage side effects, increase adherence to drug therapies and improve your overall health. If you no longer wish to participate in our patient management program, you may opt out by calling us.

- In-depth consultation services.
- Refill reminder calls.
- Free delivery of your medication upon request.
- Prescription transfer if our specialty pharmacy program cannot fulfill the prescription.
- 24/7 support.

Safety and storage

Medication storage

Keep all medications and supplies out of reach of children and pets and away from other household or food items. If your medication needs to be kept in the refrigerator, put it on a clean shelf or in a drawer. (See more safety information on page 14.)

Source: Centers for Disease Control and Prevention

Waste disposal

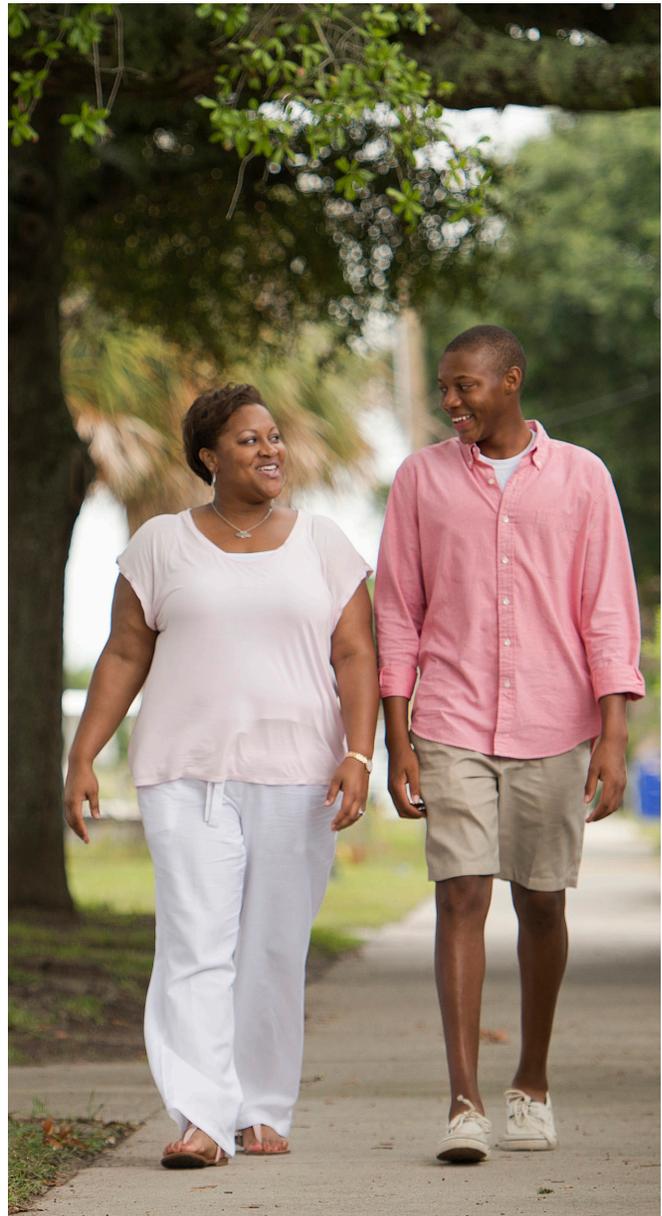
Do not flush unused medications or pour them down the sink. Using local drug takeback programs is the best way to dispose of unwanted medications. Do not recap needles after injections. Keep a rigid, puncture-proof, leak-proof container close by for easy disposal of syringes and needles. Store the container upright and keep out of reach of children. To dispose of the container properly, follow your county or city regulations. Please do not take the container to Novant Health Specialty Pharmacy. If you need more information on disposal of unused medications or medical waste, consult your local Department of Public Health agency or call your pharmacy. If you need a new sharps container, please let us know when setting up your refill. For more information on safe disposal, you can visit the Federal Drug Administration Consumer Information on Safe Disposal of Medications web page (fda.gov).

Source: U.S. Environmental Protection Agency

Emergency and disaster preparation

In the event of an emergency situation, including missed treatment during a disaster, please go to your local pharmacy or hospital. If you evacuate due to a disaster in our area, please take enough medication and supplies to last through the emergency. If you use an infusion pump or other device, be sure to take that with you, too. Store temperature-sensitive medication in an ice-filled ice chest, and when you can, let our team know how you are and how to reach you. To ensure that your treatment is not interrupted, you are welcome to pick up your medication or have your medication shipped from one of our specialty pharmacies that is not affected by the disaster or emergency.

For more on emergency and disaster preparation, see page 4 of this packet.



Recalls

In the event of an FDA-mandated drug recall, Novant Health Specialty Pharmacy will contact you with instructions on how to return the drug for proper disposal.

Notes

- ACHC Standards: DRX2-1A, DRX2-2A, DRX2-2A.01, DRX2-2B, DRX2-3A, DRX2-4A, DRX2-4C, DRX2-5A, DRX3-4B, DRX5-4A, DRX5-5G, DRX7-4C
- URAC Standards: PM 2-1, PM 2-2, P-PSC 1-1

Emergency and disaster preparedness plan

Novant Health Specialty Pharmacy has a comprehensive preparedness plan in the event of an emergency or disaster. Disasters may include, but are not limited to, hurricanes, tornadoes, earthquakes, snowstorms, fire to our facility, chemical spills and community evacuations. Our primary goal is to continue to service your prescription needs.

When there is a threat of disaster or inclement weather in our area, Novant Health Specialty Pharmacy will contact you. However, if you live outside the area of a Novant Health Specialty Pharmacy, it is your responsibility to contact the pharmacy prior to any threat of disaster in your area. This plan will ensure you have enough medication to sustain you.

Our team will use every resource available to continue to serve you in the event of a disaster. However, there may be circumstances when the Specialty Pharmacy program is not able to meet these needs due to the scope of the emergency. In this case, please use the resources of your local rescue or medical facility. The following steps will help you in an emergency:

- 1** The pharmacy will try to call you before any predicted weather emergency, such as a snowstorm or hurricane. However, not all weather emergencies can be declared in advance. If you do not reside in the area of a Novant Health Specialty Pharmacy and you are expecting inclement weather, please call the pharmacy three (3) to five (5) days before the occurrence if possible.
- 2** Novant Health Specialty Pharmacy will send your medication via courier or FedEx next-day delivery during any suspected inclement weather emergencies.
- 3** If our pharmacy cannot get your medication to you before the weather emergency, we will transfer your medication to a specialty pharmacy that can service your prescription needs.
- 4** If the pharmacy team cannot reach you or you cannot reach us, please listen to your local news and rescue centers for advice on obtaining medication.
- 5** Novant Health Specialty Pharmacy recommends all patients list a secondary emergency contact number.



If you need immediate medical attention, please call 911.

Emergency and disaster resources

- Novant Health Specialty Pharmacy — 855-307-6868 (Charlotte, Winston-Salem areas) or 844-662-7785 (Wilmington, coastal areas)
- Federal Emergency Management Agency (FEMA) — [fema.gov](https://www.fema.gov)
- Centers for Disease Control and Prevention (CDC) — [cdc.gov](https://www.cdc.gov)
- National Association of County and City Health Officials (NACCHO) — [naccho.org](https://www.naccho.org)
- ReadyNC — [readync.org](https://www.readync.org)
- ReadyForsyth — [readyforsyth.org](https://www.readyforsyth.org)
- North Carolina Division of Emergency Management — [ncem.org](https://www.ncem.org)

Notes

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- URAC Standards: PM 2-1, PM 2-2, P-PSC 1-1



Billing and understanding your insurance plan

Financial responsibility notification

Before your care begins, a staff member will inform you of your financial obligations 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, copays, coinsurance and annual out-of-pocket limits. We will also provide this information if there is a change in your insurance plan. By accepting medication from Novant Health Specialty Pharmacy, you authorize payment by your insurance company or prescription benefit manager (prescription insurance card) to Novant Health Specialty Pharmacy for medications and supplies received from Novant Health Specialty Pharmacy. You are financially responsible for all copayments and deductibles associated with your insurance benefit.

Novant Health Specialty Pharmacy will take all reasonable steps to correctly file and process your insurance claims, including the initial filing of insurance and any prior authorization or appeals process necessary for coverage determination. Please note, if your insurance provider fails to remit payment, you may be responsible for the amount due.

Specialty pharmacy billing

- You may be required to pay a part of your medication cost, called a copayment. If you have a copayment, it must be paid at the time of shipping or pickup.
- We accept cash, check or credit card as payment.
- Novant Health team members may also pay through payroll deduction.

Prescription transfers/out of network

If we are not contracted with your pharmacy benefit manager and are out of network, we may be unable to dispense your prescription. We will notify you and offer to transfer the prescription to a pharmacy that is within your pharmacy benefit network. If you desire to fill at another pharmacy, please call us and we can transfer your prescription to the pharmacy of your choice.

Financial assistance

We have access to financial assistance programs to help with copayments and ensure no financial barriers to starting your medication. We will help you enroll in these programs, which include discount coupons from drug manufacturers and assistance from various disease management foundations.

Notes

- ACHC Standards: DRX2-1A, DRX2-2A, DRX2-2A.01, DRX2-2B, DRX2-3A, DRX2-4A, DRX2-4C, DRX2-5A, DRX3-4B, DRX5-4A, DRX5-5G, DRX7-4C
- URAC Standards: PM 2-1, PM 2-2, P-PSC 1-1



Medicare prescription drug coverage and your rights

Your Medicare rights

You have the right to request a coverage determination from your Medicare drug plan if you disagree with information provided by the pharmacy. You also have the right to request a special type of coverage determination called an “exception” if you believe one of these situations applies to you:

- You need a drug that is not on your drug plan’s list of covered drugs. The list of covered drugs is called a “formulary.”
- A coverage rule (such as prior authorization or a quantity limit) should not apply to you for medical reasons.
- You need to take a non-preferred drug and you want the plan to cover the drug at a preferred drug price.

What you need to do

You or your prescriber can contact your Medicare drug plan to ask for a coverage determination by calling the plan’s toll-free phone number on the back of your plan membership card, or by going to your plan’s website. You or your prescriber can request an expedited (24 hour) decision if your health could be seriously harmed by waiting up to 72 hours for a decision. Be ready to tell your Medicare drug plan:

1. The name of the prescription drug that was not filled. Include the dose and strength, if known.
2. The name of the pharmacy that attempted to fill your prescription.
3. The date you attempted to fill your prescription.
4. If you ask for an exception, your prescriber will need to provide your drug plan with a statement explaining why you need the off-formulary or non-preferred drug or why a coverage rule should not apply to you.

Your Medicare drug plan will provide you with a written decision. If coverage is not approved, the plan’s notice will explain why coverage was denied and how to request an appeal if you disagree with the plan’s decision.

Refer to your plan materials or call 800-MEDICARE for more information.

PRA disclosure statement

According to the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number. The valid OMB control number for this collection is 0938-0975. The time required to complete this information collection is estimated to average 1 minute per response, including the time to review instructions, search existing data resources and gather the data needed, and complete and review the information collection. If you have any comments concerning the accuracy of the time estimate(s) or suggestions for improving this form, please write to CMS, 7500 Security Boulevard, Attn: PRA Reports Clearance Officer, Baltimore, MD 21244-1850.

CMS does not discriminate in its programs and activities: To request this form in an accessible format (e.g., Braille, large print, audio CD) contact your Medicare Drug Plan. If you need assistance contacting your plan, call 800-MEDICARE.

Notes

- ACHC Standards: DRX2-1A, DRX2-2A, DRX2-2A.01, DRX2-2B, DRX2-3A, DRX2-4A, DRX2-4C, DRX2-5A, DRX3-4B, DRX5-4A, DRX5-5G, DRX7-4C
- URAC Standards: PM 2-1, PM 2-2, P-PSC 1-1

Medication delivery and more

We make it easy to get the medication(s) you need, when and where you need it. We give you the choice of pickup at a Novant Health Specialty Pharmacy or delivery at home, or a preferred location.

Delivery times

Regular delivery is Monday through Friday, but some shipments arrive on Saturday.

Late or missing deliveries

Sometimes, shipments may be delayed for reasons beyond our control. We track all shipments until delivery is confirmed or an exception occurs. If you don't receive your medication on schedule, call us as soon as possible to avoid missing a dose. We have staff available 24 hours a day, seven days a week to address your delivery concerns.

Receiving your shipment

You or your insurance plan may require a signature for medication delivery. If that's the case, we can't leave your package at the door. We can always deliver your medication(s) to another location, even when you're on vacation.

Our partners

Novant Health Specialty Pharmacy uses the services of commercial shipping vendors, including FedEx and U.S. Postal Service.

Change of address

Please let us know if your address, phone number or delivery preference changes.

Lower-cost generics

Some states allow lower-cost generic medications. If your doctor prescribes a brand-name medication, we may call him or her to see if a generic is right for you. This helps make sure your medications are both cost-effective and clinically effective.

Drugs we stock

Our inventory includes a large stock of specialty oral and injectable specialty medications. If a generic is available, we will offer to substitute. If you need a medication that is not included in our drug inventory,



we will make every effort to obtain the medication for you. If Novant Health Specialty Pharmacy cannot obtain the medication you need, we will help you find a pharmacy that carries the medication you need.

Ordering your prescription

Making sure it's easy to get the medication you need is our priority. A Novant Health Specialty Pharmacy team member will contact you a week before your medication runs out.

Medication therapy management program

Novant Health Specialty Pharmacy is dedicated to providing support to our patients, ensuring that you receive safe and optimal care through our medication therapy management (MTM) program. This program is led by pharmacists who specialize in helping our patients manage their specialty medication therapy. MTM is intended to be an extension of the care you currently receive from your physician's office. This program helps ensure your safety and optimal medication management reducing the potential for medication errors, improving adherence to treatment and providing education regarding potential side effects. This service is provided to you at no additional cost, and your participation is completely voluntary. If you would like to not participate in our medication therapy management program, please contact a member of our specialty pharmacy team and we will promptly remove you from our program.

Notes

- ACHC Standards: DRX2-1A, DRX2-2A, DRX2-2A.01, DRX2-2B, DRX2-3A, DRX2-4A, DRX2-4C, DRX2-5A, DRX3-4B, DRX5-4A, DRX5-5G, DRX7-4C
- URAC Standards: PM 2-1, PM 2-2, P-PSC 1-1

Novant Health Specialty Pharmacy patient 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.

You have the right to:

- Select those who provide you with pharmacy services.
- Receive the correct 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.
- Be treated with friendliness, courtesy and respect by every individual representing our Pharmacy, who provided treatment or services for you and be free from neglect or abuse, be it physical or mental.
- Assist in the development and preparation of your plan of care that is designed to satisfy, as best as possible, your current needs, including management of pain.
- Be provided with adequate information from which you can give your informed consent for beginning services, continuing services, transferring services to another healthcare provider, or ending services.
- Express concerns, grievances or recommend modifications to our pharmacy regarding services or care, without fear of discrimination or retaliation.
- Request and receive complete and up-to-date information relative to your condition, treatment, alternative treatments, risk of treatment or care plans.
- Receive treatment and services within the scope of your plan of care, promptly and professionally, while being fully informed as to our pharmacy's policies, procedures and charges.
- Request and receive data regarding treatment, services or costs thereof, privately and with confidentiality.
- Be given information as it relates to the uses and disclosure of your plan of care.
- Have your plan of care remain private and confidential, except as required and permitted by law.
- 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.
- Receive information on how to access support from consumer advocates groups.
- Receive pharmacy health and safety information to include consumers' rights and responsibilities.
- Know about philosophy and characteristics of the Patient Management Program.
- Identify the program's staff members, including their job title, and to speak with a supervisor of the staff member if requested.
- Speak to a health professional.
- Receive information about the Patient Management Program.
- Receive administrative information regarding changes in or termination of the Patient Management Program.
- Decline participation, revoke consent or disenroll at any point in time.

Notes

- ACHC Standards: DRX2-1A, DRX2-2A, DRX2-2A.01, DRX2-2B, DRX2-3A, DRX2-4A, DRX2-4C, DRX2-5A, DRX3-4B, DRX5-4A, DRX5-5G, DRX7-4C
- URAC Standards: PM 2-1, PM 2-2, P-PSC 1-1

- Be fully informed in advance about care/ service to be provided, including the disciplines that furnish care and the frequency of visits, as well as any modifications to the plan of care.
- Be informed in advance of care being provided, of the charges, including payment for care/service expected from third parties and any charges for which the client/patient will be responsible.
- Receive information about the scope of services that the organization will provide and specific limitations on those services.
- Participate in the development and periodic revision 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 formulate an advance 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 personnel 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 regarding treatment or care, lack of respect of property or recommend changes in policy, personnel or care/service without restraint, interference, coercion, discrimination or reprisal, with all being investigated.
- Be advised on agency's policies and procedures regarding the disclosure of clinical records.
- Choose a healthcare 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.

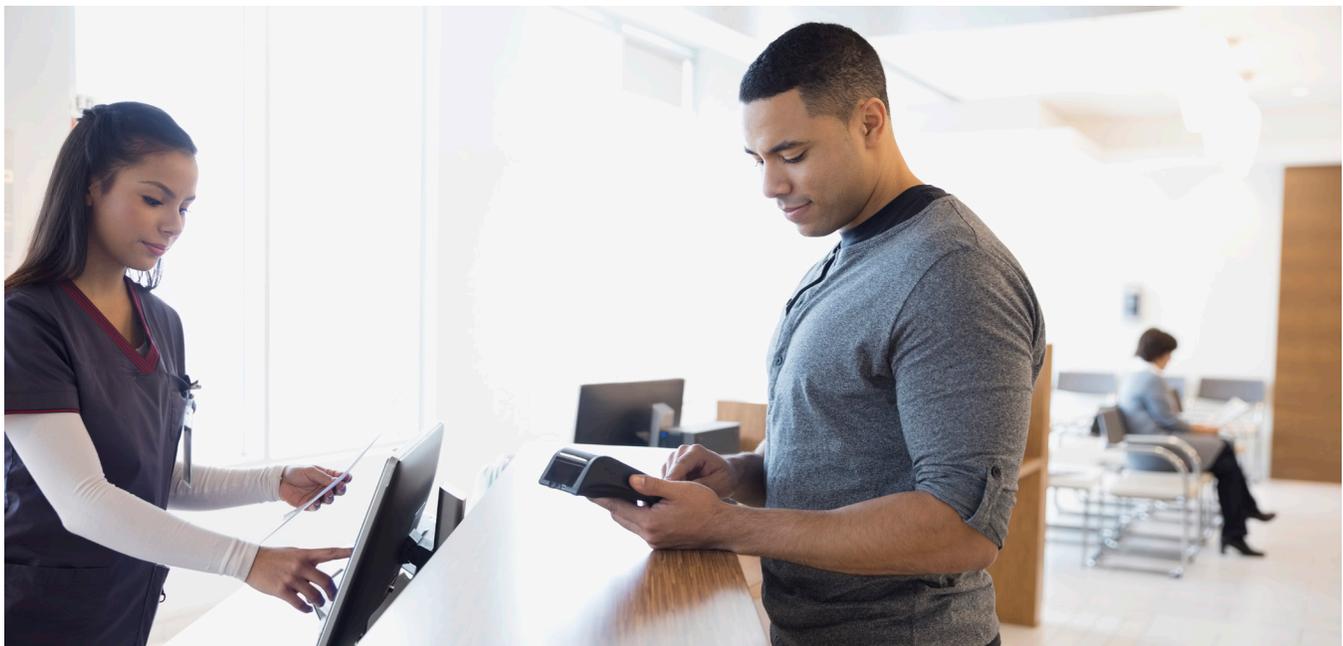


Notes

- ACHC Standards: DRX2-1A, DRX2-2A, DRX2-2A.01, DRX2-2B, DRX2-3A, DRX2-4A, DRX2-4C, DRX2-5A, DRX3-4B, DRX5-4A, DRX5-5G, DRX7-4C
- URAC Standards: PM 2-1, PM 2-2, P-PSC 1-1

Your responsibilities are to:

- Provide accurate and complete information regarding your past and present medical history as well as contact information and to notify the Patient Management Program of any changes.
- Agree to a schedule of services and report any cancellation of scheduled appointments and/or treatments.
- Participate in the development and updating of a plan of care.
- Communicate whether you clearly comprehend the course of treatment and plan of care.
- Comply with the plan of care and clinical instructions.
- Accept responsibility for your actions if refusing treatment or not complying with the prescribed treatment and services.
- Respect the rights of pharmacy personnel.
- Notify your physician and the pharmacy with any potential side effects and/or complications.
- Notify the Specialty Pharmacy when medication supply is running low, so refill may be shipped to you promptly.
- Submit any forms that are necessary to participate in the program to the extent required by law.
- Notify your treating provider of your participation in the Patient Management Program, if applicable.
- Maintain any equipment provided, if applicable.



Notes

- ACHC Standards: DRX2-1A, DRX2-2A, DRX2-2A.01, DRX2-2B, DRX2-3A, DRX2-4A, DRX2-4C, DRX2-5A, DRX3-4B, DRX5-4A, DRX5-5G, DRX7-4C
- URAC Standards: PM 2-1, PM 2-2, P-PSC 1-1



Patient questions and concerns

Questions about your medication

Our pharmacists, pharmacy technicians and medication management specialists are here for you Monday through Friday, 8 a.m. to 5 p.m. Need help after hours? Our clinical staff is on-call for you 24 hours a day, seven days a week to answer your questions about your specialty medication. Call the phone number on your prescription label.

Returns

Novant Health Specialty Pharmacy follows your doctor's order carefully. You cannot return or exchange medications after they have been sold to you. We cannot give credit for medication you do not use.

Damaged shipments

If your medicine or supplies are damaged, we will arrange a return and reship the medication(s). If you have any questions or concerns, please contact us immediately by calling the phone number on your prescription label.

Additional information regarding your condition or diagnosis

For more information, please visit NHRMCSpecialtyRX.com/Recommended-Links and click on your condition/diagnosis.

When to contact us

- You have any questions or concerns about your medication.
- If the package looks damaged or is not in the correct temperature range.
- You suspect a reaction, side effect, or allergy to your medication.
- A change has occurred in your medication use.
- You would like to start taking a vitamin/supplement or any over-the-counter medication.
- Your contact information or delivery address has changed.
- Your insurance information or payment source has changed.
- You need to check the status of your delivery.
- You need to reschedule or change your delivery.
- You have any questions or concerns about our specialty pharmacy service.

Notes

- ACHC Standards: DRX2-1A, DRX2-2A, DRX2-2A.01, DRX2-2B, DRX2-3A, DRX2-4A, DRX2-4C, DRX2-5A, DRX3-4B, DRX5-4A, DRX5-5G, DRX7-4C
- URAC Standards: PM 2-1, PM 2-2, P-PSC 1-1

Frequently asked medication questions

What if my medicine is recalled?

If there is a medicine recall, Novant Health Specialty Pharmacy will call you directly and tell you what to do.

How is my medicine best taken?

Take the medicine as ordered by your doctor. Read all the information your doctor gives you and follow all instructions closely. If you have any questions about how to take your medicine, call the Novant Health Specialty Pharmacy and speak with your specialty pharmacist.

What do I do if I miss a dose?

Call your pharmacist or doctor to find out what to do.

What should I expect when taking medicine (including side effects)?

You can call the Novant Health Specialty Pharmacy to talk to a pharmacist about side effects. The pharmacist can talk directly to your doctors, nurses and other members of your care team to help you with your concerns. Your designated specialty pharmacy also gives out patient education guides to make sure you understand the side effects of your medicine. If you experience a side effect, let your pharmacist and/or doctor know. There are many ways to manage side effects while allowing you to continue therapy.

Important

Complete the form on page 16 or 17, place it in the provided envelope and mail it back to us.

Be sure to do this right away so we can get started on your treatment.

Patient concerns, complaints, billing questions or general questions

If you have a complaint about services you are receiving from Novant Health or have not received satisfactory resolution to an issue, you may speak with a manager. The manager will investigate your complaint and take appropriate action. All issues can be escalated to the next level of management, as necessary. As part of our quality improvement (QI) program, all issues are documented and reviewed by the managers, directors and QI team.

You may provide information regarding your complaint in writing, by telephone or anonymously. Our contact information is:

855-307-6868 (Charlotte, Winston-Salem areas) or
844-662-7785 (Wilmington, coastal areas)

SpecialtyPharmacyCustomerService@NovantHealth.org

If your complaint is not resolved after contacting Novant Health Specialty Pharmacy at the above phone number, you can:

1. Contact your state board of pharmacy.
2. Call the following independent organizations that provide accreditation to Novant Health Specialty Pharmacy for meeting certain standards for pharmacy care:
 - ACHC — 855-937-2242, Monday through Friday, 8 a.m. to 5 p.m.
 - URAC — 202-216-9010, Monday through Friday, 9 a.m. to 5 p.m.



Home safety information

Here are some guidelines to help you keep your home safe. Correct unsafe conditions before they cause an accident.

Medication

- If children are in the home, store medications and poisons in childproof containers and out of reach.
- All medication should be labeled clearly and left in original containers.
- Do not give or take medications that were prescribed for other people.
- When taking or giving medication, read the label and measure doses carefully.
- Know the side effects of the medication you are taking.
- Do not throw away outdated medication by pouring down a sink or flushing down the toilet.

Mobility items

When using mobility items such as canes, walkers, wheelchairs or crutches, use extra care to prevent slips and falls.

- Do not use walkers, canes, or crutches on slippery or wet surfaces.
- Always put wheelchairs or seated walkers in the locked position before standing up or sitting down.
- Wear shoes when using these items and try to avoid obstacles in your path and soft and uneven surfaces.

Slips and/or falls

Slips and falls are the most common and often the most serious accidents in the home. Here are some things you can do to prevent them.

- Arrange furniture for easy home navigation.
- Install handrails on all stairs, showers, bathtubs and toilets.
- Keep stairs clear and well lit.
- Place rubber mats or grids in showers and bathtubs.
- Use bath benches or shower chairs if you have muscle weakness, shortness of breath or dizziness.
- Wipe up all spilled water, oil or grease immediately.
- Keep drawers and cabinets closed.

Lifting

If it is too big, too heavy or too awkward to move alone — GET HELP.

Here are some things you can do to prevent low back pain or injury.

- Plan ahead — clear your way.
- Stand close to the load with your feet apart for good balance.
- Bend your knees and “straddle” the load.
- Keep your back as straight as possible while you lift and carry the load.
- Avoid twisting your body when carrying a load.

Electrical accidents

Watch for early warning signs: overheating, a burning smell, sparks. Unplug the appliance and get it checked right away.

Here are some things you can do to prevent electrical accidents.

- Keep cords and electrical appliances away from water.
- Do not plug cords under rugs, through doorways or near heaters. Check cords for damage before use.
- Extension cords must have a big enough wire for larger appliances.
- If you have a broken plug outlet or wire, get it fixed right away.
- Use a grounded three-wire plug to prevent shock in case of electrical fault.
- Do not overload outlets with too many plugs.
- Use three-prong adapters when necessary.

Smell gas?

- Open windows and doors.
- Shut off appliance involved.
- Don't use matches or turn on electrical switches.
- Don't use telephone — dialing may create electrical sparks.
- Don't light candles.
- Call gas company from a neighbor's home.
- If your gas company offers free annual inspections, take advantage of them.

Notes

- ACHC Standards: DRX2-1A, DRX2-2A, DRX2-2A.01, DRX2-2B, DRX2-3A, DRX2-4A, DRX2-4C, DRX2-5A, DRX3-4B, DRX5-4A, DRX5-5G, DRX7-4C
- URAC Standards: PM 2-1, PM 2-2, P-PSC 1-1

Fire

Pre-plan and practice your fire escape. Plan at least two ways out of your home. If your fire exit is through a window, make sure it opens easily. If you are in an apartment, know where the exit stairs are located. Do not use the elevator in a fire emergency. You may notify the fire department ahead of time if you have a disability or special needs.

Here are some steps to prevent fires:

- Install smoke detectors. They are your best early warning. Test frequently and change the battery every year.
- If there is oxygen in use, place a “No Smoking” sign in plain view of all persons entering the home.
- Throw away old newspapers, magazines and boxes.
- Empty wastebaskets and trash cans regularly.
- Do not toss matches into wastebaskets unless you know they are out. Wet down first or dump into toilet.
- Have your chimney and fireplace checked frequently. Look for and repair cracks and loose mortar. Keep paper, wood and rugs away from area where sparks could hit them.
- Be careful when using space heaters.
- Follow instructions when using a heating pad to avoid serious burns.
- Check your furnace and pipes regularly. If nearby walls or ceilings feel hot, add insulation.
- Keep a fire extinguisher in your home and know how to use it.

If you have a fire or suspect fire:

- Take immediate action per plan — escape is your top priority.
- Get help on the way — with no delay. CALL 9-1-1.
- If your fire escape is cut off, close the door and seal the cracks to hold back smoke. Signal help from the window.

Handwashing and infection prevention

The number one way to prevent infection is through proper handwashing. It only takes 20 seconds of using either soap and water or an alcohol-based hand rub to kill the germs that might cause infection. Hand-sanitizing dispensers are located throughout our facilities including at all entrances and in all patient rooms. Frequent handwashing should take place:

- Before eating.
- After using the restroom.
- After touching any blood or body fluids.
- After touching bedpans, dressings or other soiled items.

Here’s how you should clean your hands with soap and water:

- Wet your hands with clean, running water (warm or cold), turn off the tap and apply soap.
- Lather your hands by rubbing them together with the soap. Lather the backs of your hands, between your fingers and under your nails.
- Scrub your hands for at least 20 seconds.
- Rinse your hands well under clean, running water.
- Dry your hands using a clean towel or air dry them.

Here’s how you should clean your hands with hand sanitizers (waterless hand cleaners):

- Apply the correct amount (per label) of the product to the palm.
- Rub your hands together. Cover all surfaces of your hands and fingers until they are dry. This should take around 20 seconds.

Notes

- ACHC Standards: DRX2-1A, DRX2-2A, DRX2-2A.01, DRX2-2B, DRX2-3A, DRX2-4A, DRX2-4C, DRX2-5A, DRX3-4B, DRX5-4A, DRX5-5G, DRX7-4C
- URAC Standards: PM 2-1, PM 2-2, P-PSC 1-1

Acknowledgment of receipt of notice of privacy practices

Patient Name: _____ Date of Birth: _____

HIPAA – Notice of Privacy Practices

- I have been provided with a copy of Novant Health's **Joint Notice of Privacy Practices**.
- I know that the notice may be changed at any time.
- I may get a new copy of the notice on Novant Health's website at www.NovantHealth.org; by writing to the Privacy Official, Novant Health Privacy Office, P.O. Box 33549, Charlotte, NC 28233; or by asking for a copy at any Novant Health facility.

Patient's Signature

Date/Time

Signature of Authorized Person

Date/Time

Relationship to Patient

For staff use only:

Patient refused to sign. Patient was informed that signing merely acknowledges that the notice has been made available to the patient; or Patient was initially treated for an emergency condition. The notice was made available to the patient either after stabilization or upon transfer.

Signature of Staff: _____ Date: _____ Time: _____

If limited English proficiency or hearing impaired, offer interpreter at no additional cost:

Interpreter Accepted

(Name/Number of Person/Services Chosen/Used)

Interpreter Refused



Acknowledgment of Receipt of Notice of Privacy Practices

Acuse de recibo de notificación de las prácticas de privacidad
(Acknowledgment of receipt of notice of privacy practices)

Nombre del paciente: _____ Fecha de nacimiento: _____

Ley de Portabilidad y Responsabilidad de los Seguros Médicos (Health Insurance Portability and Accountability Act, HIPAA) – Notificación de las prácticas de privacidad

- Me han dado una copia de la **Notificación Conjunta de las Prácticas de Privacidad** de Novant Health.
- Sé que la notificación podría ser modificada en cualquier momento.
- Puedo obtener una copia nueva de la notificación en el sitio web de Novant Health: www.NovantHealth.org; si escribo a Privacy Official, Novant Health Privacy Office, P.O. Box 33549, Charlotte, NC 28233; o si solicito una copia en cualquier centro de Novant Health.

Firma del paciente

Fecha/hora

Firma de la persona autorizada

Fecha/hora

Parentesco con el paciente

For staff use only:

Patient refused to sign. Patient was informed that signing merely acknowledges that the notice has been made available to the patient; or *Patient was initially treated for an emergency condition. The notice was made available to the patient either after stabilization or upon transfer.*

Signature of Staff: _____ Date: _____ Time: _____

If limited English proficiency or hearing impaired, offer interpreter at no additional cost:

Interpreter Accepted _____ Interpreter Refused
(Name/Number of Person/Services Chosen/Used)



Acuse de recibo de Notificación de las prácticas de privacidad

Charlotte, Winston-Salem areas

Novant Health Pharmacy - University City (Specialty)
a department of Novant Health Presbyterian Medical Center
8401 University Executive Park Drive, Suite 127
Charlotte, NC 28262
704-316-5900

Novant Health Specialty Pharmacy - Westgate
a department of Novant Health Thomasville Medical Center
1381 Westgate Center Drive
Winston-Salem, NC 27103
336-718-1111

Novant Health Pharmacy - Elizabeth (Specialty)
a department of Novant Health Presbyterian Medical Center
125 Queens Road, Suite 180
Charlotte, NC 28204
704-316-4180

Or call us toll-free 855-307-6868

Hours of operation

Monday through Friday, 8 a.m. to 5 p.m.

NovantHealth.org/Pharmacy

Wilmington, coastal areas

Novant Health Specialty Pharmacy - Shipyard
2250 Shipyard Blvd., Suite 12
Wilmington, NC 28403
910-662-7780
NHRMCSpecialtyRX.com

Novant Health Pharmacy - New Hanover
2131 S. 17th St.
Wilmington, NC 28401
910-667-5180
NHRMCOutpatientRX.com

Or call us toll-free 844-662-7785

Hours of operation

Monday through Friday, 9 a.m. to 5 p.m.



We can help

Find a Novant Health specialist near you at **NovantHealth.org/Pharmacy**.

NovantHealth.org

