

A close-up photograph of a healthcare professional, likely a nurse, wearing a red clinical coat and glasses. She is focused on an elderly patient, who is also wearing glasses and has a nasal cannula. The patient is looking down, and the nurse's expression is one of concentration and care. The background is softly blurred, emphasizing the interaction between the two.

Infusion Patient Resource Guide

Coram[®]

♥CVS specialty[®] infusion services

Welcome to Coram

At Coram[®] CVS Specialty[®] Infusion Services (Coram), we're here to help make things a little easier. We know that starting infusion therapy at home will require some changes for you. At first, you may feel stressed — but we're ready to help. Coram will provide ongoing education, care and support. We want to help you achieve success with your infusion therapy. We're here for you every step of the way.

Each day, skilled Coram nurses, pharmacists and dietitians work together. We provide complex infusion care to thousands of patients. The skilled staff at Coram will work as a team, along with your prescriber, to arrange all aspects of your care. Your Coram care team can be reached 24 hours a day, every day, to answer questions about your health, medications, equipment or supplies.

At every turn, Coram works hard to make sure you always get the best care and personalized support to help you meet your health care needs.

This guide will introduce you to the Coram team and provide you with information about your infusion therapy. Please use this guide as a resource during your therapy.

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Please find our Notice of Privacy Practices on page 22.

Your Home Infusion Therapy Support

Coram® provides the medication, equipment and supplies your prescriber has prescribed for you. We provide the information and support you will need to succeed with infusion therapy at home.

Your Coram team and resources

Your Coram team is highly skilled. They will work closely with you and your prescriber. You can reach them around the clock, seven days a week. You can contact them whenever you have a question.

- **Pharmacist:** Prepares your medications and solutions, answers questions about your medications, supplies and equipment and checks on your response to therapy and for any drug reactions.
- **Nurse:** Teaches you how to administer your medication or if required, administers the home infusion medication. Monitors your response to the therapy and helps maintain your IV catheter.
- **Dietitian:** Goes over your nutritional needs, answers questions, checks on how you are doing, and works with your prescriber as needed to adjust nutrition therapy if you are on one.
- **Clinical Support Specialist:** Calls you on a regular basis to find out how you are doing, and arranges for delivery of medications and supplies needed for your therapy.
- **Reimbursement and Insurance Specialist:** Helps you with any financial concerns and answers your questions about charges or payment terms.

Admission and Billing

Understanding benefits for home infusion services can be very complex depending on your insurance plan and coverage. At the start of your care, Coram will review your coverage and identify covered and non-covered services, based on the insurance plan you or your health care team provided to us in order to estimate the most accurate cost. The outcome of that process and your financial obligation is reflected in the Financial Agreement Arrangement you have been asked to sign. In addition, your Coram representative will review them during their introductory call to you. It is your responsibility to be sure that Coram has the most current insurance coverage you may have, including names and ID numbers for each plan.

During the admission process, you will be asked to sign and return certain forms. The signed forms are necessary for Coram to bill your insurance plan directly. Provided there are no changes to your care, you should not need to sign any additional forms.

We understand that insurance or coverage may change during your care. We ask that, during our routine calls to refill your medications, you inform us what your current insurance coverage is, at least monthly. Should your coverage change, and Coram is not notified in a timely manner, you are at risk of being financially responsible for the cost of your care. If your infusion is being administered in our Ambulatory Infusion Suite (AIS), you will be asked about your insurance coverage and will need to bring your current insurance card(s) with you to each visit. In many cases, your insurance carrier will require Coram to secure an authorization or a pre-certification in advance of providing care. Should you not notify Coram® in a timely manner of any insurance changes and we are unable to secure authorization, you will be financially responsible.

Bill Payment



Online

For fast, easy bill payment, visit CoramHC.com. Click on **Pay Bill** in the upper right-hand corner. You can pay invoices by credit or debit card. You will receive a confirmation number and payment receipt.

Phone

Please call **1-855-311-7246** to pay an invoice over the phone using a credit card. You will receive a receipt by email or by U.S. Postal Service (USPS) mail.

You are uninsured or are receiving services that are not covered by your plan

You will get a call from a Coram® representative before your delivery to review what will be owed by you for the services. If you do not have insurance, or have a prescription benefit copay, or Coram services are not covered by your insurance, payment is expected prior to shipment.

If you lose your insurance coverage, please contact your Coram representative to discuss a plan. It is your responsibility to notify Coram of any changes to your insurance.

Deductibles and out-of-pocket expenses required by your plan

During your introductory call, a Coram representative will provide you with the information we have received from your insurance carrier. This will include whether your plan(s) covers home infusion or not, as well as your deductibles and out-of-pocket copays that remain. This information is based on the physician's orders at the time and where you might be in your benefit calendar year. It is important to note that nearly all insurance carriers reset the annual deductibles and out-of-pocket copays that have been met each year. This occurs when your policy or benefits renew.

Q. How do I know what my out-of-pocket costs will be?

A: This information will be part of the initial call from Coram to you as you prepare to start your therapy. A form called the **Financial Agreement Arrangement** will also be provided for you to sign. Based on the insurance information you have provided to Coram, this form will outline your **estimated** financial obligation based on the prescriptions we are providing at that time. This amount may vary once we bill your insurance.

You have Medicare and you have questions

Q. I have Medicare — will Medicare cover my home infusion costs?

A: It will depend on the type of therapy you are receiving, your medical condition and the scope of your Medicare Coverage (Part A, Part B, Part D).

Home infusion services cannot be billed and are not covered at all under your **Medicare Part A** plan.

- If you have **Medicare Part B**, your level of coverage will depend on your medical condition and the services you are receiving. Medicare does not cover all home infusion services. Your Coram representative will discuss with you whether your services are eligible or not.
 - If your services do not meet **Medicare Part B** eligibility criteria, Coram will evaluate any other coverage you may have. If no other coverage exists, your Coram representative will discuss payment options with you.
 - If you have Medicare, it usually pays for about 80% of your medical bills for things it covers under Part B. To help with the 20% of charges that Medicare does not cover, many people choose to buy an extra insurance plan — called a Medicare Supplemental plan — from a private insurance company. These plans are meant to help pay the 20% that Medicare doesn't cover. Also, if your charges are not covered under Part B, Coram will not bill your supplemental insurance.
 - If you have other coverage that is not a supplemental insurance, Coram will bill that secondary coverage.
- Coverage under **Medicare Advantage Plans** varies greatly. Some home infusion services may not be covered. Your Coram representative will discuss with you whether your services meet eligibility criteria or not.
- If you have **Medicare Part D** coverage and are receiving Medicare Part D eligible drugs, Coram will bill those drug charges to your part D plan. In some cases, there will be a copay determined by your Part D plan with every shipment.

Q. What services are not covered under my Medicare Part B?

A: Your medical condition and services being provided will determine whether they meet **Medicare Part B** eligibility for payment or not. Medicare Part B does not cover all types of home infusion.

Some examples of services that are not eligible for payment by your Medicare Part B plan are as follows:

- Supplies and equipment associated with many antibiotic therapies
- Daily rates for supplies used strictly for the management of an IV catheter
- Total Parenteral Nutrition (TPN) when your clinical condition does not meet Medicare Part B's guidelines for coverage
- Nursing, under some conditions. For example, nursing associated with antibiotics is not eligible because Coram® is not a Medicare-certified home health agency.

Q. If services are not covered by Medicare, how am I billed?

A: Coram will bill you at our patient pay rates.

Q. I called Medicare and they said my services would be covered.

A: This is a common point of confusion. When speaking to a Medicare agent, be sure to advise them that your infusion is being done in the home and not in a health care facility.

CVS Health MyChart

Q. I am signed up for CVS Health MyChart — can I pay my bill through the CVS Health MyChart portal?

A: Over 90 Coram pharmacies are transitioning to a new electronic health record system called Epic. If you are being cared for by any one of the following pharmacy locations, you can access CVS Health MyChart to view your Coram health information and pay your bills securely online at: MyChart.CVSHealth.com

- Austin, TX
- Birmingham, AL
- Chantilly, VA
- Dallas, TX

- El Paso, TX
- Flowood, MS
- Henderson, NV
- Houston, TX
- Little Rock, AR
- Mendota Heights, MN
- Moorhead, MN
- Murray, UT
- Oklahoma City, OK
- Phoenix, AZ (Hilton)
- Phoenix, AZ (Cotton Center)
- Portland, OR
- Richmond, VA
- San Antonio, TX

How to Contact the Pharmacy That Ships Your Medication

Call your local pharmacy using the phone number on your welcome packet and on your medication label.

Note: Some patients may receive their medication and supplies from the CVS Specialty® pharmacy. Use the phone number provided in the CVS Specialty pharmacy introductory packet and on the medication labels to contact them for any questions about:

1. Your medication, supplies, deliveries, potential medication issues or concerns.
2. Customer service questions
3. Billing questions and insurance change

To voice a concern or provide any feedback on the service received from Coram, please email us at: ServiceExcellenceTeam@CVSHealth.com

Administration Devices

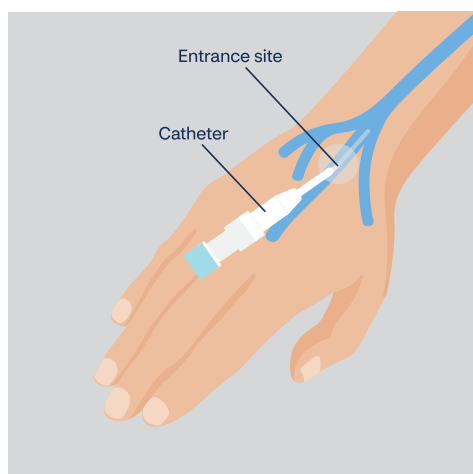
Medication administration for infusion therapy takes place when medicine is given directly into your bloodstream or by an injection.

When the medication is given as a subcutaneous injection, this does not require an IV catheter and is given beneath your skin, not in a vein.

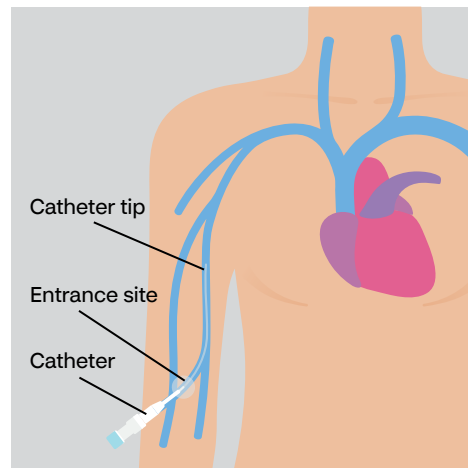
When medication is given directly into your bloodstream, this is done through a small device called an IV (intravenous) catheter. It is placed through the skin and into a vein. The catheter may remain in your body for a period of time. Your prescriber will decide which of the following devices is best for you.

Types of IV catheters

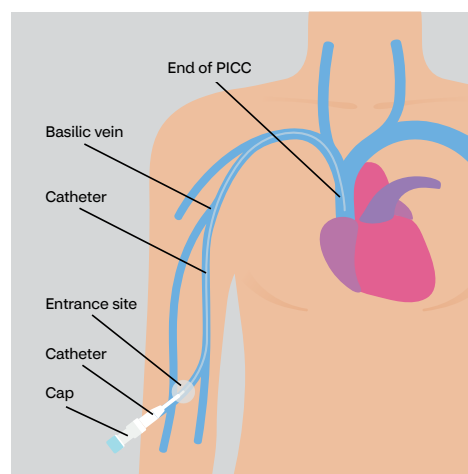
- **Peripheral IV catheter:** a short plastic tube that is put through your skin into a vein. Most often, this is done in your hand or arm to give medications and fluids. This type of catheter can stay in place for a short period of time.



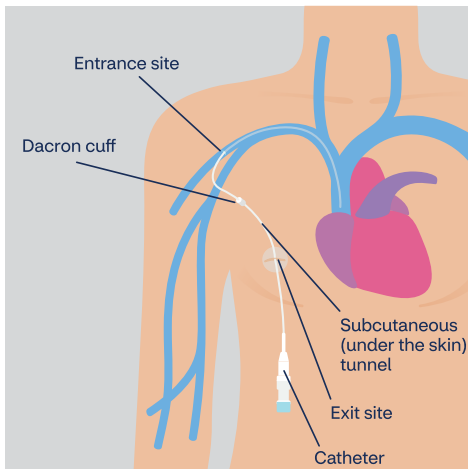
- **Midline catheter:** a plastic tube, three to six inches in length, that is inserted into a vein in your upper arm. The tip of the catheter ends in a blood vessel below your arm pit. This type of catheter is typically used for therapies lasting less than one month.



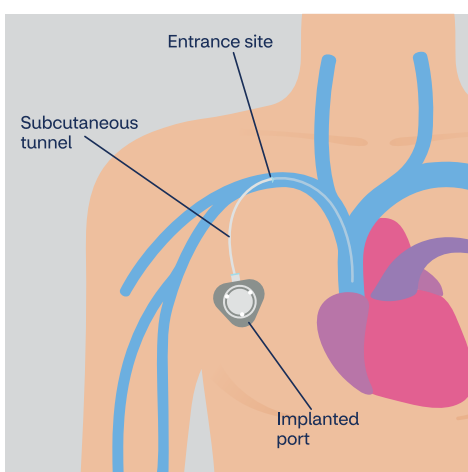
- **Peripherally inserted central catheter (PICC):** a plastic tube that is inserted into a vein in your upper arm. The tip of the catheter ends in a blood vessel above the heart. This type of catheter can stay in place for a year or more. It can be used for a large variety of therapies.



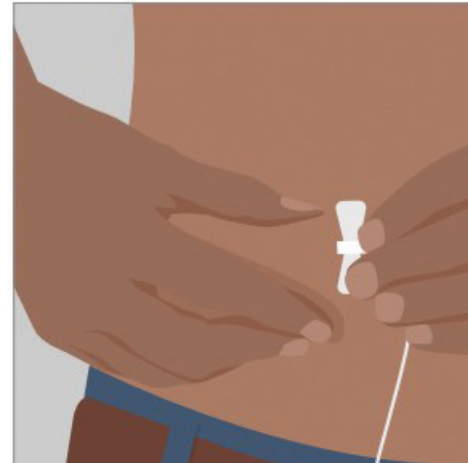
- **Tunneled central catheter:** a plastic tube that is put into a large vein in your neck, chest or groin. It is tunneled under your skin and the tip of the catheter ends in a blood vessel near the heart. It can stay in place for a long time. It can be used for a large variety of therapies. Some central catheters are inserted directly into the vein and are sutured in place rather than tunneled under the skin. The non-tunneled central catheter usually will not stay in for a long time but can be used for the same therapies as a tunneled catheter.



- **Implanted port catheter:** a round firm disc with a soft rubber dome/top attached to your catheter that is inserted under the skin in your chest (usually) during surgery. It is completely covered by your skin. The tip of the catheter ends in a blood vessel near the heart. A special needle is pushed through your skin into the disc in order to give the medication. A port can stay in your body for years. It can be used to draw blood or give you medication.



- **Subcutaneous injection:** In some cases, your medicine may be given through a subcutaneous catheter. This is when medicine is given beneath your skin, not in a vein. Certain special medications may be given this way. Your nurse will explain more if needed.



Local Ambulatory Infusion Suites (AIS)

Sometimes, getting infusion treatment at home is not an option or a convenient choice for you. With our ambulatory infusion suites (AIS), you have a safe, comfortable alternative to where you may get your treatment.

In the AIS, you'll receive personalized, quality care from our dedicated onsite clinical team in a calming environment. Your personal space is equipped with a TV, Wi-Fi access, healthy snacks and beverages to make your experience more enjoyable and comfortable.

Your infusion nurse has extensive experience with administration and monitoring your progress during treatment.

Your prescribed therapy and other medications will be available and ready for your infusion treatment.

Ask your nurse about learning more about the infusion suite.

How to Care For and Manage Your IV Catheter

You may be taught to help care for your IV catheter. This will depend on your catheter. You may be taught to flush if you have a catheter that remains in between medication doses. This will depend on your prescriber's orders. Your nurse will teach you what level of care is needed. You will be given training tools to be sure that you have all necessary information. Some of the tools can be found in this booklet. Refer to the SASH mat in the pocket of this Patient Resource Guide for more information on how to avoid catheter complications. ("SASH" stands for: Saline flush, Administer, Saline flush, Heparin flush — these are steps you will learn about for flushing your catheter, preventing catheter infections and administering medication.)

Caring for your catheter and preventing complications

Follow all directions and tips to help avoid complications with your catheter.

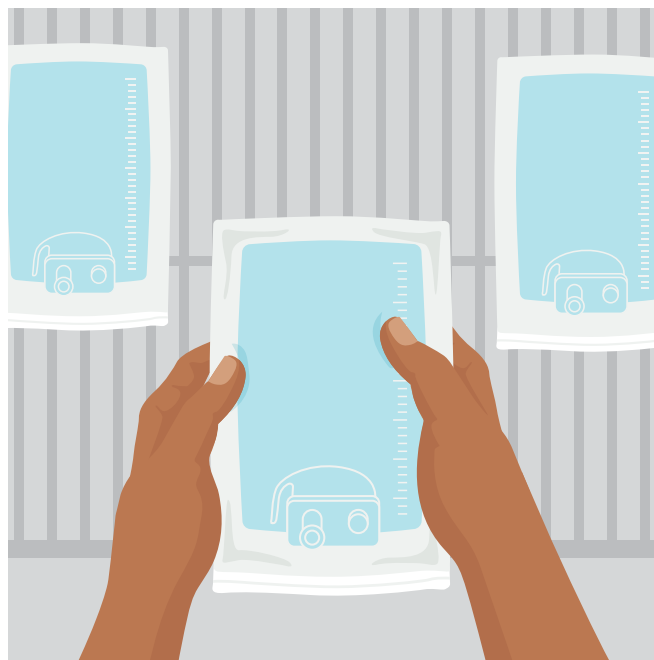
- **It is important to wash your hands.** Do this before and after you work with your catheter, medication and supplies. This will help prevent infection.
- The tip of the saline and heparin syringes are sterile. Do not touch them, or let them touch any surfaces. If this happens, discard this syringe and use a new syringe.
- Use a new alcohol pad for each step. Be sure to scrub your catheter injection cap for at least **15 seconds** with an alcohol pad and allow to dry for at least 5 seconds before each access.
- **Do not** force a catheter flush. Stop and call your nurse if you have pain, burning or swelling when flushing.
- If your catheter has a clamp, clamp the catheter and/or extension set when not in use.
- Keep the catheter dressing and catheter injection cap covered while bathing. Do not let your site get wet.
- Do not go swimming with an IV catheter.
- Make sure that the catheter is secured. **Do not** let the extension set or tubing dangle.
- **Do not** use scissors, pins or other sharp objects near the catheter or tubing.

Tell your nurse and/or prescriber if you have any pain, redness, coolness or swelling at the site where the IV catheter is located, or if you have a temperature greater than 100.4°F. While receiving infusion therapy, you will be asked to help look for signs of possible trouble with your IV catheter (access device). This includes redness, swelling, pain or drainage around the device. Check your catheter site daily and before each dose is administered. **Please call your nurse or pharmacist as soon as possible if you have any trouble with your IV device and/or if your catheter has been replaced. You will also want to contact your prescriber.**

Safety Considerations for Home Infusion Therapy

Storing and handling refrigerated infusion therapies

Once your therapy is delivered to your home, check the label for storage instructions. Some therapies need to be kept in the refrigerator. Refrigerated solutions should be stored at a temperature between 36°F and 46°F. If you can, create a space in your refrigerator that is just for your medications/solutions. Solutions should be in a sealed plastic bag if they are stored on a lower refrigerator shelf or beneath food and/or beverages.



Proper handwashing technique

Washing your hands is very important! Make sure you clean your hands:

- Before and after you work with your catheter, medication and supplies
- After using the restroom
- After blowing your nose or covering your mouth and nose to cough or sneeze
- Additionally, as needed (e.g., if they become soiled)
- Wash your hands with soap and water, and dry them thoroughly with a paper towel or use hand sanitizer.

Using soap and water

For best results, use a liquid soap rather than a bar soap, and follow these instructions:

1. Turn on the sink tap and wet your hands and wrists under warm running water. **Leave the water running.**



2. Apply enough liquid soap to cover all hand surfaces. Rub hands together, palm to palm, covering all surfaces of both hands, all fingers and your thumbs. Rub the soap in between your fingers and on top of your hands. Use a nail brush if needed. Scrub thoroughly for **at least 20 seconds**, or as long as it takes to sing “Happy Birthday” twice.
3. Rinse your hands to remove all soap and dry them thoroughly. Dry them with a paper towel or clean (unused) hand towel.

4. After drying your hands, use the same towel to turn off the faucet. **Do not** touch the faucet directly with your clean hands.



5. Once your hands are clean, make sure they do not come in contact with unclean surfaces. You will need to rewash your hands before continuing if you cough, sneeze or pick up something from the floor.

Using hand sanitizer

Use an alcohol-based hand sanitizer if you don't have immediate access to soap and water:

1. Apply a quarter-sized amount of hand gel into one palm.
2. Spread the gel between your hands and around all fingers.
3. Rub your hands together vigorously.
4. Keep rubbing your hands together until they are dry and all gel has been absorbed.

Covering your cough and/or sneeze

Covering your cough and/or sneeze helps prevent germs from entering the air space shared by your family and friends. Ideally, use a tissue. Cough or sneeze into your elbow to avoid spreading germs onto your hands if a tissue is not available.

Remember to always:

- Place used tissues in a trash can.
- Wash your hands after you cough, sneeze or handle used tissues.

How to Administer Your Infusion Therapy

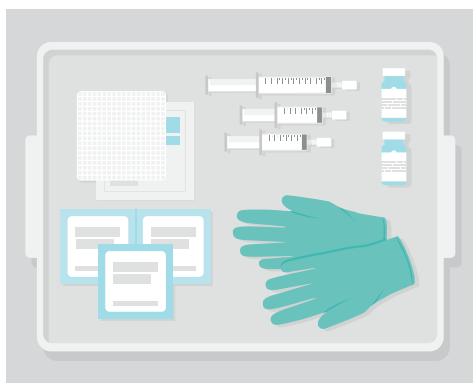
Before you begin

1. Clean your work area.
2. It is important to wash your hands to help prevent infection. Do this before and after you work with your catheter, medication and supplies. For best results, use a liquid soap rather than a bar soap. Follow the instructions in the *proper handwashing technique* section of this guide or on your SASH mat.
3. Prepare your medication. Refer to your medication label for details on how to handle and store medication. If your medication is refrigerated, allow it to warm up to room temperature before you use it. **Do not** place it in hot water, sunlight or a microwave to speed up the process.
4. Nutrition therapy containers may take longer to warm to room temperature depending on the size of the container. Follow the instructions provided by your nurse and received with your nutrition therapy.
5. Inspect the medication and label for:
 - Correct patient name, drug name, dose and drug route (IV or subcutaneous)
 - Expiration date
 - Solution that is clear, consistent in color and free of any visible particles

Note: If you have a back-up pump, rotate pumps with each change of the medication bag/cassette.

Choosing and preparing your work area

1. Your work area should be clean and free of dust, drafts and clutter.



2. An ideal work surface is your SASH mat, located in the pocket of this Patient Resource Guide.
3. Choose another work surface that can be cleaned often if you don't have your SASH mat available (e.g., a tabletop or a metal or plastic tray). You can use soap and water or a bleach wipe. Your nurse will help you decide on a work surface.
4. Clean your work area again or SASH mat again if it gets dirty during use. Keep pets and children away from your work area.

Reminders

Make sure all clamps on your IV catheter are open if it is hard to push in the plunger while flushing.

- **Do not** force a flush. **Stop and call your nurse if you have pain, burning or swelling.**
- **Do not** reuse any syringe.
- If you have a double-lumen catheter, flush each lumen as directed by your nurse.
- **Do not smoke while preparing your work area, handling your supplies or during your infusion treatment.**

Managing Your Medication and Supplies

Initial delivery

Your initial delivery of supplies to your home will vary depending on your specific needs. It may include an infusion pump and pole, medication and other supplies.

There are several forms and notices that will require your review. You might also need to sign a form for this first delivery. Feel free to ask any questions, and keep copies for your files.

Refills and clinical follow-up

If you don't receive a call from your Clinical Support Specialist, be sure to contact us before your delivery is due. If you signed up to receive emails from us, we'll send you tracking information when your order has shipped. The tracking email will contain a link to the shipping carrier's website with more information.

Your Coram® team will contact you regularly. They will help you keep track of the amount of medication and supplies you need for your therapy. Your Clinical Support Specialist will contact you often to find out what you need. They will arrange for delivery to your home at a time that is best for you. Please let your Clinical Support Specialist know if you need more or less of any supply. You don't want to have too many supplies that you will not be using.

It's important that you and your Clinical Support Specialist communicate often. This should happen before each delivery. It is **extremely important** to make time to tell them about your current health status. Also let them know how things are going with your home infusion therapy. These questions may take a few minutes to answer. Remember, this is a very important part of your care.

Expect routine calls from your Clinical Support Specialist. Be ready to tell them about:

- Prescription changes — if your prescriber adds or changes any of the items on your prescription. Also let your pharmacist know if this happens.
- Damaged/defective items — if any items arrive damaged or defective, put the damaged item in its original package and set aside. Then contact the pharmacy that sent the medication for further instruction.
- Insurance coverage changes and additions — if you have had any changes in your coverage such as any changes in your policy ID, new coverage, added coverage, have become Medicare eligible or changes in your Medicaid plan.
- Inventory check (missing or changes in amount) — if you need more or less of any items, please let us know so we can adjust your supplies. If for any reason you are not able to review your inventory as scheduled, please call us ahead of time to make other plans.
- Interruption of therapy — if you return to the hospital or if your prescriber has stopped your treatment, please notify Coram at once.
- Issues with your infusion pump (if applicable) — if you have any questions or problems with the operation of your pump. Let us know if you need to exchange it. If you don't receive a call from your Clinical Support Specialist or have any medication/supply issues, be sure to contact us before your delivery is due.

Delivery of supplies

Your supplies will arrive by carrier. These may be delivered by a service such as UPS, FedEx or a courier, or a Coram employee. If you signed up to receive emails from us, we'll send you tracking information when your order has shipped. The tracking email will contain a link to the shipping carrier's website with more information.

Inspect all your supplies when they arrive. Before you sign the delivery ticket, check to see that it matches what you received. You will be given a copy of the ticket. You may be asked to return a signed copy. Call Coram while the delivery person is still at your home if you have any questions about a delivery.

Your infusion supplies are part of your prescription. Because of state laws, Coram cannot accept any returns of unused supplies and products.

Infusion pumps

Your therapy may require the use of an infusion pump. You will be asked to sign a Pump Responsibility Agreement. You will be asked to keep track of your pump during your therapy and return it when your therapy is finished.

Pumps require periodic testing and maintenance. Coram may need to exchange your current pump in order to do this.

Your Clinical Support Specialist will contact you to exchange or return your pump at the right time. You will be given a prepaid shipping box with your pump supplies. Save this box to use to exchange or return your pump. Coram will make arrangements with UPS to pick up your boxed pump.

Please contact your Clinical Support Specialist if at any time you have a question or concern about your pump.

Waste Disposal

Depending on your therapy, you may need to use the Sharps/Medical Waste disposal system.* Coram® will provide you with a Sharps container, if needed.

Dispose of the following items in your Sharps container:

- Used IV catheters
- Used needles
- Used cannulas
- Any items contaminated with chemotherapy or other hazardous drugs, including empty IV bags and tubing

To dispose of the container properly, follow your county or city regulations. Please do not send the container to Coram. If you need more information on disposal of unused medications or of medical waste, consult your local Department of Public Health agency or call your pharmacy.**

Using the Sharps System (instructions provided in the box)

Note: Always keep the Sharps container out of reach of children and pets.

- Remove the Sharps container from the box
- Save the box and bag for returns
- Place all required waste into the container until it is three-quarters full
- Do not pour any fluid into the container
- Once the container is three-quarters full or no longer needed, close the lid
- Place the container inside the plastic bag
- Use the twist-tie to close the plastic bag
- Place the closed plastic bag with the Sharps container inside the box
- Close and seal the box with the adhesive tape provided with the instructions in the box

Please contact your Clinical Support Specialist before you return your Sharps container and order a new one. If you have questions about the Sharps system, let them know.

Returning your Sharps container

Return instructions will depend on the type of container you received. You may either:

- Give the container to your mail carrier or take it to the nearest post office

Frequently Asked Questions (FAQ)

Q: When should I call my prescriber?

A: You should call your prescriber if you notice:

- Skin reactions like hives, flushed skin or paleness
- An unusual change in nausea, vomiting or diarrhea and/or stomach pain
- Fever greater than 100.4°F

Call 911 right away if a life-threatening emergency should occur during your therapy like difficulty breathing, swelling in your throat, neck, face, new bleeding or your catheter is pulled out. Coram is not an emergency care provider.

Q: When should I call Coram?

A: Call Coram if a situation is not life-threatening. Your Coram care team can help with the following:

- If you are experiencing any side effects to your medications or have missed a dose.
- If you can't flush your IV catheter
- If there is swelling, redness or drainage from your IV catheter site
- If you experience any unusual occurrence that would cause the infusion therapy to stop
- If your IV catheter site dressing becomes wet or falls off
- If your pump is beeping and has an error message
- If you have questions about your medication

*Coram uses a combination disposal system that ensures incineration of contaminated sharps and other supplies contaminated with hazardous drugs.

**Source: U.S. Environmental Protection Agency.

Q: Are home infusion therapy and the necessary supplies covered by insurance?

A: This depends on your insurance type and coverage rules. Coram® will find out what is covered and let you know about any out-of-pocket costs before the start of care. Please refer to the *Admissions and Billing* section of this guide for more information.

Q: What other resources are available to learn more about home infusion therapy?

A: Your Coram nurse or pharmacist can help you learn more about your therapy. Patient education materials are also available on [CoramHC.com](https://www.coramhc.com).

Q: How can I sign up for email?

A: Tell anyone on your Coram team that you want to sign up for email to get information related to your care, order delivery and account status updates sent directly to you. We'll add your email address to your account profile and the emails will start to pop up in your inbox.

The emails you'll get from Coram are not encrypted, so by opting in to receive e-mail communications, you'll be accepting the risk that some of your confidential health information could be seen by someone other than you.

If you ever decide that you want to stop getting emails, just let a member of your Coram team know and we'll delete your email address from your account profile.

We're serious about protecting your privacy and we never give or sell any identifiable information about you to other companies for their marketing purposes.

CVS Health® MyChart®

Easily access your Coram health information with CVS Health MyChart®, a secure online tool that makes it easy to stay on top of your health from your computer or mobile device. You can track your health status and get information about your account whenever you like.

You can view details of past appointments, check medications and instructions, pay your bill 24/7, and ask questions about your bill via secure message to Coram.

Sign up at [MyChart.CVSHealth.com](https://mychart.cvshealth.com) or download the MyChart app from the Apple App or Google Play store.

Lifestyle considerations

Coram wants to help you continue with activities that are important to you. Share any questions or concerns with your Coram team. There may be a solution that allows you to continue doing what you love.

Bathing and swimming

You may keep up with routine bathing habits. It is very important to protect your IV catheter and equipment from water. Your Coram team will teach you how to do this. Ask your prescriber if swimming is permitted.

Entertainment and exercise

As you start to feel better, you may slowly return to activities you like to do with friends and family. Make sure to check with your prescriber first. Your level of energy may change from day to day. Check with your prescriber before any strenuous exercise.

Remember to always be careful with your IV catheter. Try not to pull or apply any pressure to it.

Travel

We can help you with important travel details. We have tips to help you plan and pack for your trip. We can notify the TSA of your estimated arrival time and the medications and supplies you will carry. **Please allow at least 72 hours advance notice before traveling by air.**

It is important that you tell your prescriber of your desire to travel. Also let your Coram team know two weeks in advance of your trip, when possible.

*CVS Health MyChart includes your medical records if you received care at one of our CVS Health companies, including Coram LLC and MinuteClinic, LLC. MinuteClinic® operates or provides certain management support services to MinuteClinic-branded walk-in clinics. CVS Health MyChart is NOT to be used for urgent needs. For medical emergencies, dial 911.

CVS Health MyChart is limited to patients that are 18 years of age or older, and 19 years of age or older in Nebraska.

This will make it easier for you to go through airport screening. If it's urgent that you travel by air with less than 72 hours' notice, you should call the TSA Cares hotline at 1-855-787-2227. Tell TSA about your medical needs and request help at the screening checkpoint.

You may need to get an order from a prescriber with a license in the state you are visiting if you will need nursing services while traveling. Your Coram® pharmacy team can also help you if you will have continued coverage for your therapy in the state or country you are visiting. If you plan to travel out of the country, let Coram know at least one month before you leave so we can help you learn how you can safely travel with your medication and/or prescribed nutrition. For more helpful travel resources, visit [CoramHC.com](https://www.coramhc.com).

Home Safety

An important part of taking care of your health is making sure that your home is safe for you and your caregivers. You should know how to operate and care for your medical devices. Taking steps to prevent fires or falls can help prevent accidents or emergencies.

Oxygen safety¹

- **Never smoke or allow others to smoke** near where oxygen is stored or being used. Speak to your oxygen company about getting “no smoking” signs for your home.
- Keep oxygen canisters at least five to 10 feet away from any heat source or open flame. This includes heaters, gas stoves, fireplaces, wood-burning stoves, candles, etc. Keep oxygen away from things that can cause a spark like electric heaters, blankets and hair dryers.
- Avoid storing your oxygen tanks in an area exposed to the sun.
- Make sure tanks stand upright. Hold them in place using an approved holder/cart provided by your oxygen company. You may lay oxygen tanks on the floor if you do not have a way to secure them upright.
- Do not use extension cords or multi-outlet adaptors, such as power strips, near your oxygen.
- Know how your oxygen equipment works.

- Check the amount of oxygen that is in your tank on a routine basis. Let your oxygen company know if you are running low on oxygen.
- Keep the phone number for your oxygen and equipment company nearby in case something breaks or you need to order more oxygen.
- In case of a power outage, let your utility/power company know that you have oxygen and need it as part of your necessary medical therapy.
- Do not use oil- or petroleum-based products while using oxygen — use water-based lotions and products.
- Do not change your oxygen dosage unless your prescriber tells you to change it.
- Turn your oxygen off when you are not using it.

Fire safety²

- Have a smoke detector/alarm on each floor of your home, preferably in all bedrooms.
- Check the smoke detectors/alarms each month and make sure they work. Change the batteries if not working. Check with your local fire department for help if you need smoke detectors/alarms.
- Never smoke or allow others to smoke near where oxygen is stored or being used.
- Keep matches and lighters out of children's reach and sight.
- Do not smoke if you are drowsy, have taken pain medication or are resting in bed.
- Plan your escape route from different places in your home. Have a designated spot where everyone will meet after getting out of the house.
- Keep a fire extinguisher (in good working order) in the kitchen and any other area where a fire could happen (e.g., basement).
- If someone is on fire: stop, drop and roll.
- If there is a fire in your home, first get everyone out. Then call 911 or the fire department right away, once out of the house and safe.

1. <https://www.inogen.com/blog/10-home-oxygen-safety-tips/>, accessed September 5, 2019.

2. <http://www.redcross.org/get-help/how-to-prepare-for-emergencies/types-of-emergencies/fire>, accessed September 5, 2019.

Fall prevention³

- Consider these potential risks for falls. Talk to your prescriber or nurse if you have any of these:
 - Problems with balance, leg weakness or dizziness — Can you stand or walk without losing your balance or becoming unsteady on your feet? Do you need to hold onto furniture or walls when walking? Are your legs or feet feeling numb?
 - Vision issues — Do you have any problems seeing things clearly?
 - Medications — Are you taking any medications that make you sleepy, “shaky” on your feet, weak, dizzy or dehydrated?
 - Other conditions — Do you have any other illnesses or conditions that make you weak or at risk for falling (e.g., needing to go to the bathroom quickly)?
- Use a cane or walker if you have any of the above conditions.
- Talk to your prescriber if you need help.
- Make sure you have rails to hold onto when going up and down stairs.
- Have grab bars in the bathroom near the toilet and shower/bath.
- Remove clutter from walking areas around your home.
- Make sure the pathway between your bed and other resting areas and to bathrooms is clear and well lit.
- Increase lighting throughout your house, especially at the top and bottom of your stairs. Use nightlights to keep paths visible.
- Secure or remove throw rugs.
- Cover or remove sharp corners along your bed, hallways and other pathways.
- Keep all cords out of walking pathways.
- Walk carefully around pets to prevent tripping.
- Let your prescriber and Coram® nurse know if you have fallen.

Medical and Emergency Considerations

Adverse drug reactions

Call your prescriber right away if you have any feelings you didn't expect after you receive your medication. Also call the Coram pharmacist at the pharmacy number you received. You may also report side effects to the U.S. Food and Drug Administration (FDA) by calling **1-800-FDA-1088** (1-800-332-1088).

MinuteClinic®

Call 911 or your local hospital emergency department if you have a medical emergency.

Many of the concerns that bring people to an emergency department can be treated in walk-in medical clinics. MinuteClinic is the clinic inside CVS Pharmacy® and Target stores. It has certified nurse practitioners and physician assistants who may be able to help. If you can't reach your prescriber, you can go to MinuteClinic seven days a week, including evenings. No appointment is necessary.

MinuteClinic might be a convenient alternative if it is not life-threatening and you still need to seek treatment.

Alcohol and other medications

Alcohol and other prescription or non-prescription medications may change how you react to your home therapy. Tell your pharmacist or nurse if you drink any alcohol or take any other medications. Also let them know if you have any changes in your medications.

Other medical treatment

Please let your prescriber or dentist know that you are on home IV therapy before any surgery or dental work.

3. <https://www.ncoa.org/resources/falls-prevention-conversation-guide-caregivers/>, accessed September 5, 2019.

In case of emergency or disaster

Please refer to the Welcome Letter in the front of this Patient Resource Guide. You will find helpful contact information and steps to follow in case of an emergency or disaster in your area.

Access the Emergency plan from [CoramHC.com /patients/emergency-plan-checklist](https://CoramHC.com/patients/emergency-plan-checklist) or ask your pharmacy to download and mail you a copy. Discuss with your nurse and health care provider.

Emergency and disaster preparedness for home infusion patients

Emergencies can happen unexpectedly, but being prepared can help you stay safe and continue your treatment. Follow these simple steps to get ready:

Prepare for an emergency

- Make a contact list: Write down phone numbers for your doctors, specialty pharmacy and retail pharmacy.
- Create a plan: Talk to your health care providers about what to do in an emergency.
- Notify utility companies: Ask your doctor for a letter explaining your medical needs and share it with your local power company.
- Keep important information handy:
- Your name and date of birth
 - Allergies
 - Health insurance card
 - Doctor and pharmacy names and phone numbers
 - Medical conditions and disabilities
 - Medication list (including infusion therapy) and equipment settings
 - Special assistance needs (like oxygen)
 - Emergency contact information
 - Prepare a cooler: If your medication needs refrigeration, have a cooler with frozen packs ready.
 - Ask for local support: Contact your fire department or hospital to see if they offer help for people with medical needs.

- Know your risks: Learn about the types of emergencies common in your area by calling 211 or searching online for “211” and your state name.

- Pack a supply kit: Include three days’ worth of food, water, and medical supplies.
- Plan with your family: Create escape routes and evacuation plans. Make sure you know how to contact loved ones if you get separated.

What to do during an evacuation

Take your medications and supplies: Pack everything you need for your treatment.

- Get to safety: Follow evacuation instructions from local officials.
- Once you are safe: Call your specialty pharmacy. Let them know your situation and ask for help if needed.
- Helpful Resources
 - 211: Call or search online for “211” and your state name.
 - CDC Emergency Preparedness: [CDC.gov/Emergency/index.html](https://www.cdc.gov/emergency/index.html)
 - Oley Foundation: [Oley.org](https://www.oley.org)
 - Ready.gov for Disabilities: [Ready.gov/Disability](https://www.ready.gov/disability)
 - CDC Prep Your Health: [CDC.gov/PrepYourHealth](https://www.cdc.gov/PrepYourHealth)

Disclaimer

This guide is not a substitute for medical advice. Always talk to your doctor or health care provider about your condition and treatment plan. Your specialty pharmacy is not responsible for the information provided or any decisions made based on this guide.

Being prepared can give you peace of mind and help you stay on track with your treatment during emergencies. Take action today!

When Your Therapy Ends

You may stop services with Coram® for any of these reasons:

- Your treatment is finished.
- Your prescriber gives Coram an order to discharge you.
- Your prescriber does not renew your orders.
- You change prescribers and do not have orders from the new prescriber.
- Your original therapy orders have an end and discharge date.
- You have been hospitalized.
- You decide you no longer need Coram services.
- You refuse treatment.
- Infusion therapy can no longer be safely given in your home.
- You have not received therapy for more than 60 days (unless prescriber's orders say this is alright).
- You move outside of the service area.
- Coram is no longer able to meet your health care needs.

Visit [CoramHC.com](https://www.coramhc.com) to explore these features and more:

- Educational resources
- Patient stories
- How-to videos



Glossary

- **Administration Set:** Plastic tubing used to administer IV fluids or medications, and that connects to your IV catheter.
- **Advance Directive:** A written statement of a person's wishes about medical treatment. This spells out in advance what actions should be taken if a person is no longer able to make health care decisions for themselves because of illness or incapacity.
- **Antibiotics:** Drugs that fight infection by killing or stopping the growth of specific germs and bacteria.
- **Antivirals:** Text TBD.
- **Bacteria:** Germs that attack the body and can make you sick.
- **Cannula:** Part of a catheter; a plastic tube for medication infusion.
- **Catheter:** A device with a plastic tube that is inserted/put into the body. The catheter can be used to administer fluids or medications or to draw blood.
- **Catheter Injection Cap:** A small cap attached to the end of the IV catheter to allow the administration of medication and prevent the entry of air or germs into the catheter.
- **Central Catheter:** An IV catheter that is threaded through a vein to a point close to the heart.
- **Contaminate:** To put bacteria on a sterile area by contact with objects which are not sterile (such as ungloved hands).
- **Dehydrated:** Body does not have enough water, which can create a feeling of weakness and lightheadedness.
- **Dressing:** A sterile pad or clear covering over a site where the IV is inserted or where there is a wound. The covering protects the site from becoming infected or dirty.
- **Expiration Date:** The last date a medication or supply can be used.
- **Flush:** To clear out the solution remaining in the catheter or tubing.
- **Heparin:** A medication used to prevent blood from clotting and blocking the catheter.
- **Infection:** The invasion of bacteria or virus in the body which causes your body to react and become ill. Antibiotics are sometimes used to fight the infection.
- **Infusion Device:** A device that controls the speed (rate) of a solution as it enters the vein through the catheter.
- **Insertion/Exit Site:** The place where the IV catheter enters the skin.
- **Intravenous (IV):** Inside a vein.
- **Milliliter (mL):** A unit of measurement for a liquid or medication.
- **Needleless System:** A system used to enter the catheter in the vein that does not use any sharp metal needles. This system stops the risk of accidental injuries caused by needles.
- **Parenteral Nutrition:** A method of nutrition in which a special sterile liquid nutrient mixture is given into the blood through an IV catheter.
- **Peripheral Catheter:** A short IV catheter typically inserted in the hand or arm.
- **Side Effect:** An undesired result of taking a medication or therapy.
- **Sterile:** Completely free from bacteria. Most supplies packed in sealed containers are sterile.
- **Sterile End Cap:** A cap used to keep the end of your administration tubing sterile. It is used when you are receiving more than one dose of medication in a 24-hour period, or as directed by your nurse.
- **Syringe:** A plastic tube with a plunger that is used to administer medications.
- **Transparent Dressing:** A thin sheet of see-through material to cover a site where an IV catheter is placed or over a wound to protect it from getting dirty or infected.
- **Visit:** Scheduled time your nurse will come to your home to provide home infusion services.

Forms and Notices

There are several forms and notices in this folder that require your attention. Any signed form will be part of your medical and financial file.

Forms and Notices

Assignment of benefits (AOB)/consent form Printed Handout

The Assignment of Benefits (AOB)/consent form authorizes Coram® to bill your insurance provider. This form also shows that you agree to receive the services as prescribed by your doctor. A copy will be provided. You will need to review and sign before your initial medication is administered.

Financial agreement arrangement (FAA) form. Printed Handout

- Coram will check your insurance before you start services. We will tell you about the financial arrangements.
- You will be asked to sign an FAA form related to billing and payment for services.
- Your insurance is checked monthly. Coram will also verify your insurance again if you are hospitalized or return to our service. A copy will be provided. You will need to review and sign before your initial medication is administered.

Advance beneficiary notice (ABN) form (Medicare patients only). Printed Handout

An ABN form lists items or services that Medicare isn't expected to pay for, an estimate of the costs for the items/services and reasons why Medicare may not pay. A copy will be provided. You will need to review and sign before your initial medication is administered.

Notice of privacy practices (NOPP)22

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 and ask your Coram team if you have any questions.

Patient rights and responsibilities26

This information is located at the end of this booklet. Depending on your state, you may be asked to sign a form confirming receipt. Please read it, including the Customer and Patient Conduct Standards, carefully and ask your Coram team if you have any questions.

Medicare prescription drug coverage and your rights28

This notice is located at the end of this booklet.

Centers for Medicare & Medicaid Services (CMS) Medicare Durable Medical Equipment, Prosthetics, Orthotics & Supplies (DMEPOS) supplier standards29

This notice is located at the end of this booklet.

Advance directives32

This notice describes a signed form to explain to health care providers and your family your wishes to accept or refuse services that could save or sustain your life. If you have one, you will be asked to provide to your Coram team.

Nondiscrimination and Accessibility Notice (ACA § 1557) (also known as Language Line and Translation Resources).32

Language Assistance 34

Notice of Privacy Practices (NOPP)

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.

This Notice of Privacy Practices (the “Notice”) describes the privacy practices of Coram LLC (“Coram”) and the members of its Affiliated Covered Entity (“CVS® Provider ACE”). An Affiliated Covered Entity is a group of Covered Entities under common ownership or control that designates itself as a single Covered Entity for purposes of compliance with the Health Insurance Portability and Accountability Act (“HIPAA”). The members of the CVS Provider ACE will share Protected Health Information (“PHI”) with each other for the treatment, payment, and health care operations of the CVS Provider ACE and as permitted by HIPAA and this Notice. For a complete list of the members of the CVS Provider ACE, please contact the CVS Health® Privacy Office.

PHI is information about you that we obtain to provide our services to you and that can be used to identify you. It includes your name and contact information, as well as information about your health, medical conditions, and prescriptions. It may relate to your past, present or future physical or mental health or condition, the provision or health care products and services to you, or payment for such products or services.

We are required by law to protect the privacy of your PHI and to provide you with this Notice explaining our legal duties and privacy practices regarding your PHI. This Notice describes how we may use and disclose your PHI.

We have provided you with examples; however, not every permissible use or disclosure will be listed in this Notice. PHI disclosed as permitted by HIPAA may be subject to redisclosure by the recipient and no longer protected by HIPAA. This Notice also describes your rights and the obligations we have regarding the use and disclosure of your PHI.

We and our employees and workforce members are required to follow the terms of this Notice or any change to it that is in effect.

Uses and disclosures of your PHI for treatment, payment and health care operations

We may use and disclose your PHI for treatment, payment and health care operations without your written authorization. The following categories describe and provide some examples of the different ways that may use and disclose your PHI for these purposes:

Treatment: We may use and disclose your PHI to provide and coordinate the treatment, medication and services you receive. For example, we may:

- Use and disclose your PHI to provide and coordinate the treatment, medication and services you receive at CVS Health.
- Use and disclose your PHI to provide and coordinate the treatment, medication and services you receive at Coram.
- Disclose your PHI to other third parties, such as pharmacies, doctors, hospitals or other health care providers to assist them in providing care to you or for care coordination.
- In some instances, uses and disclosures of your PHI for these purposes may be made through a Health Information Exchange or similar shared system.
- Contact you to provide treatment-related services, such as refill reminders, adherence communications or treatment alternatives (e.g., available generic products).

Payment: We may use and disclose your PHI to obtain payment for the services we provide to you and for other payment activities related to the services we provide. For example, we may:

- Share your PHI with your insurer, pharmacy benefit manager or other health care payor to determine whether it will pay for your health care products and services you need and to determine the payment amount you may owe.
- Contact you about a payment or balance due for prescriptions dispensed to you at Coram or may disclose your PHI to other health care providers, health plans or other HIPAA Covered Entities who may need it for their payment activities.

Health care operations: We may use and disclose your PHI for health care operations – those activities necessary to operate our health care business. For example, we may:

Use and disclose your PHI to monitor the quality of our health care services, to provide customer services to you, to resolve complaints and to coordinate your care.

- Transfer or receive your PHI if we buy or sell pharmacy locations.
- Use and disclose your PHI to contact you about health-related products, services or opportunities that may interest you, such as programs for Coram® patients.
- Disclose your PHI to other HIPAA Covered Entities that have provided services to you so that they can improve the quality and efficacy of the health care services they provide or for their health care operations.
- Use your PHI to create de-identified data, which no longer identifies you, and which may be used or disclosed for analytics, business planning or other purposes.

Other uses and disclosures of your PHI that do not require authorization

We are also allowed or required to share your PHI, without your authorization, in certain situations or when certain conditions have been met.

Business associates: When we contract with third parties to perform certain services for us, such as billing or consulting, these third-party service providers, known as Business Associates, may need access to your PHI to perform these services. They are required by law and their agreements with us to protect your PHI in the same way we do.

Individuals involved in your care or payment for your care: We may disclose your PHI to a friend, personal representative, family member or any other person you identify as a caregiver, who is involved in your care, or the payment related to that care. For example, we may provide prescriptions and related information to your caregiver on your behalf. We may also make these disclosures after your death unless doing so is inconsistent with any prior expressed preference documented by Coram. Upon your death, we may disclose your PHI to an administrator, executor or other individual authorized under law to act on behalf of your estate. If you are a minor, we may release your PHI to your parents or legal guardians when permitted or required by law.

Workers' compensation: We may disclose your PHI as necessary to comply with laws related to workers' compensation or similar programs.

Law enforcement: We may disclose your PHI to law enforcement officials as permitted or required by law. For example, we may use or disclose your PHI to report certain injuries or to report criminal conduct that occurred on our premises. We may also disclose your PHI in response to a court order, subpoena, warrant or other similar written request from law enforcement officials.

Required by law: We will disclose your PHI when required to do so to comply with federal, state or local law.

Judicial and administrative proceedings: We may disclose your PHI in response to a court or administrative order, subpoena, discovery request or other lawful process.

Public health and safety purposes: We may disclose your PHI in certain situations to help with public health and safety issues when we are required or permitted to do so, for example to prevent disease; report adverse reactions to medications; report suspected abuse, neglect or domestic violence; or to prevent or reduce a threat to anyone's health or safety.

Health oversight activities: We may disclose your PHI to an oversight agency for certain activities including audits, investigations, inspections, licensure or disciplinary actions, or civil, administrative and criminal proceedings, and as necessary for oversight of the health care system, government programs or compliance with civil rights laws.

Research: Under certain circumstances, we may use or disclose your PHI for research purposes. For example, we may use or disclose your PHI as part of a research study when the research has been approved by an institutional review board and there is an established protocol to ensure the privacy of your information.

Coroners, medical examiners and funeral directors: We may disclose PHI to coroners, medical directors or funeral directors so that they can carry out their duties.

Organ or tissue donation: We may disclose your PHI to organ procurement organizations.

Notification: We may use or disclose your PHI to notify or assist in notifying a family member, personal representative or any other person responsible for

your care regarding your location, general condition, or death. We may also disclose your PHI to disaster relief organizations so that your family or other persons responsible for your care can be notified of your location, general condition, or death.

Correctional institution: If you are or become an inmate of a correctional institution, we may disclose your PHI to the institution or its agents to assist them in providing your health care, protecting your health and safety or the health and safety of others.

Specialized government functions: We may disclose your PHI to authorized federal officials for the conduct of military, national security activities and other specialized government functions.

Uses or disclosures for purposes that require your authorization

Use and disclosure of your PHI for other purposes may be made only with your written authorization and unless we have your authorization we will not:

Use or disclose your PHI for marketing purposes.

- Sell your PHI to third parties (except for in connection with the transfer of a business to another health care provider required to comply with HIPAA).
- Share psychotherapy notes (to the extent we have any).
- We will obtain your written authorization before using or disclosing your PHI for purposes other than those described in this Notice or otherwise permitted by law. You may revoke your authorization at any time by submitting a written notice to the CVS Health® Privacy Office. Your revocation will be effective upon receipt; however, it will not undo any use or disclosure of your PHI that occurred before you notified us, or any actions taken based upon your authorization.

Additional restrictions on use and disclosure

Some state and federal laws may require special privacy protections, including certain requirements to obtain attestations from requestors, that limited the use and disclosure of certain sensitive health information. Such laws may protect information related to:

- Alcohol or substance use disorder
- Biometric Information

- Child or adult abuse or neglect, including sexual assault
- Communicable diseases
- Genetic information
- HIV/AIDS
- Mental health
- Minors
- Reproductive health
- Sexually transmitted diseases

We will follow the law that is stricter (or more protective of your PHI), where it applies to us. If you would like additional information about additional use or disclosure restrictions that may apply to your sensitive PHI, please contact the CVS Health Privacy Office.

Your health information rights

Written requests and additional information: You may request additional information about CVS Health's privacy practices or obtain a form for submitting written requests by contacting the **CVS Health Privacy Officer**:

- By email at PrivacyOffice@CVSHealth.com
- By mail at **CVS Health Privacy Office, 1 CVS Drive, Woonsocket RI 02895**
- Or toll-free by telephone at **1-833-571-1784**.

You can also visit CoramHC.com/patient-authorization-form to obtain the form to submit written requests.

Obtain a copy of the notice: You have the right to obtain a paper copy of our current Notice at any time. You may do so by going to the site where you obtain health care services from us or by contacting the CVS Health Privacy Office.

Inspect and obtain a copy of your PHI: With a few exceptions, you have the right to see and get a copy of the PHI we maintain about you. You may request access to your PHI electronically. To inspect or obtain a copy of your PHI, submit a written request to the CVS Health® Privacy Office. You may also ask us to provide a copy of your PHI to another person or entity. A reasonable fee may be charged for the expense of fulfilling your request as permitted under HIPAA and/or state law. We may deny your request to inspect and copy your record in certain limited

circumstances. If we deny your request, we will notify you in writing and let you know if you may request a review of the denial.

Request an amendment: If you feel that the PHI we maintain about you is incomplete or incorrect, you may request that we amend it. For example, if your date of birth is incorrect, you may request that the information be corrected. To request an amendment, submit a written request to the CVS Health Privacy Office. You must include a reason that supports your request. If we deny your request for an amendment, we will provide with you a written explanation of why we denied it.

Receive an accounting of disclosures: You have the right to request an accounting of disclosures we make of your PHI for purposes other than treatment, payment, or health care operations. Please note that certain other disclosures need not be included in the accounting we provide to you. To obtain an accounting, submit a written request to the CVS Health Privacy Office. We will provide one accounting per 12-month period free of charge, but you may be charged for the cost of any subsequent accountings. We will notify you in advance of the cost involved, and you may choose to withdraw or modify your request at that time.

Request confidential communications: You have the right to request that we communicate with you in a certain way or at a certain location. For example, you may request that we contact you only in writing at a specific address. To request confidential communication of your PHI, submit a written request to the CVS Health Privacy Office. Your request must state how, where, or when you would like to be contacted. We will accommodate all reasonable requests.

Request a restriction on certain uses and disclosures: You have the right to request additional restrictions on our use and disclosure of your PHI by sending a written request to the CVS Health Privacy Office. We are not required to agree to your request except where the disclosure is to a health plan or insurer for purposes of carrying out payment or health care operations, is not otherwise required by law, and the PHI is related to a health care item or service for which you, or a person on your behalf, has paid in full out-of-pocket. If you do not want a claim for payment submitted to your health plan on record, please discuss with the pharmacist or health care provider when you check in for care or before your prescription is sent to the pharmacy.

Notification of breach: You have a right to be notified in the event there is a breach of your unsecured PHI as defined by HIPAA.

To Report a problem

Complaints: If you believe your privacy rights have been violated, you can file a complaint with the CVS Health Privacy Officer or with the Secretary of the United States Department of Health and Human Services. All complaints must be submitted in writing. You will not be penalized or otherwise retaliated against in any way for filing a complaint.

Changes to this notice

We reserve the right to make changes to this Notice as permitted by law and to make the revised Notice effective for PHI we already have about you as well as any information we receive in the future, as of the effective date of the revised Notice. If we make material or important changes to our privacy practices, we will promptly revise our Notice. Upon request to the Privacy Office, Coram® will provide a revised Notice to you. We will also post the revised Notice in our physical locations where we provide Coram services and on our website at [CoramHC.com/notice-privacy-practices](https://www.coramhc.com/notice-privacy-practices) and will make copies available at our facilities and locations where you receive health care products and services from us.

Effective Date: This Notice is effective as of July 1, 2025.

About CVS Health

CVS Health is the leading health solutions company, delivering care in ways no one else can. We reach more people and improve the health of communities across America through our local presence, digital channels and our nearly 300,000 dedicated colleagues – including more than 40,000 physicians, pharmacists, nurses and nurse practitioners.

Wherever and whenever people need us, we help them with their health – whether that's managing chronic diseases, staying compliant with their medications, or accessing affordable health and wellness services in the most convenient ways. We help people navigate the health care system – and their personal health care – by improving access, lowering costs and being a trusted partner for every meaningful moment of health. And we do it all with heart, each day.

Patient Rights and Responsibilities

As a patient, you have the right to:

- Receive complete information about your rights and responsibilities
- Choose your health care provider and receive information on service or care limitations or of any financial benefits when referred to Coram®
- Receive before a timely response from Coram notifying you when products and services, as prescribed by your prescriber, will begin
- Receive information about your condition, treatment, when and how services shall be provided before start of care, to allow you to give informed consent
- Considerate and respectful care regardless of race, religion, gender, gender identification, national origin, age, medical condition, sexual preference or payment source
- Receive information as to your eligibility for insurance reimbursement and your responsibility for any costs in advance of care provided
- Be actively involved in developing and participating in a plan of care that will meet your identified health care needs to the extent provided by law, as well as discuss any problems, changes or barriers in achieving goals
- Accept or refuse treatment to the extent permitted by law and to be informed of the consequences of such action, which may include termination of Coram services
- Decline participation, revoke consent or disenroll in the patient management program at any time
- Have your property and person treated with dignity by all Coram team members
- Be free from physical and mental abuse and/or neglect and speak with a health care professional
- Know the name, function and qualifications of all personnel who provide health care services to you and the name of the person responsible for the coordination of your care
- Be informed of the identity and job title of the staff members of the pharmacy providing services to you and to speak to a supervisor of the staff member if requested
- Make decisions about advance directives and to be informed of Coram's policy to honor those decisions
- Express dissatisfaction with equipment, supplies or services provided by Coram without fear of reprisal
- The protection of your medical information from unauthorized use and disclosure, unless otherwise permitted or required by law
- Receive a Notice of Coram's Privacy Practices, which describes how medical information about you may be used and disclosed to carry out treatment, payment or health care operations and for other purposes that are permitted by law
- Participate in discussions concerning ethical issues related to your care
- Receive an initial and ongoing assessment regarding the existence of pain, as well as a timely response to any symptoms of pain, with appropriate and adequate treatment by your health care team
- Complain, without being subject to discrimination or reprisal, to your state Department of Health if you are not satisfied with Coram's response to your concerns
- Receive information regarding our policies and procedures
- Be given reasonable notice regarding anticipated termination of services or plans to transfer to another provider and participate in that discharge or transfer process
- Examine, review, restrict, amend and request a copy of your medical records; and to authorize another individual to examine, review, restrict, amend and request a copy of your medical records
- Receive information and know about the philosophy and characteristics of the Coram® patient management program

As a patient, you have the responsibility to:

- Remain under a prescriber's care while receiving services and notify Coram of any change of physicians
- Provide a Coram clinician with your complete, accurate health history and notify Coram of any changes in your medical condition
- Provide a safe home environment in which your care can be given
- Notify Coram of any change in address or phone number
- Sign the required consents and releases for insurance billing
- Provide Coram® with all requested insurance and

financial records. Coram is to be notified of any change in insurance coverage

- Participate actively in your care by following the plan regarding administration of your prescribed medication, care of your catheter and monitoring of your health status, as instructed by a Coram clinician and prescribed by your prescriber
- Work with your health care team to identify the desired outcomes of your treatment
- Advise Coram if you are not willing to follow your established care plan/services and accept the consequences of any refusal of treatment or decision to disregard the agreed upon plan of care
- Treat Coram personnel with respect and consideration
- Advise Coram when you are unable to keep an appointment, when you are unavailable (out-of-town, on vacation, etc.) while on service, and when you are admitted to a hospital
- Contact Coram if you acquire an infectious disease during the time you are receiving services, except where exempt by law
- Provide Coram with a copy of any written advance directives
- Advise Coram of any problems or dissatisfaction with our care without fear of discrimination or reprisal
- Notify your treating provider of your participating in the patient management program

Everyone should expect a safe and caring environment. Our Customer and Patient Code of Conduct helps us to meet this goal:

We expect everyone to treat others with respect and dignity.

No threats.

No abuse.

No violence of any kind.

Coram CVS Specialty® is committed to providing a welcoming environment that protects the safety and wellbeing of our customers, patients and colleagues. Unacceptable behaviors may result in a ban from this or any other Coram CVS Specialty location nationwide, and/or engagement of law enforcement.

Medicare Prescription Drug Coverage and Your Rights

Your Medicare rights

You have the right to ask for a coverage determination from your Medicare drug plan to provide or pay for a drug you think should be covered, provided or continued. You also have the right to ask for a special type of coverage determination called an “exception” if you:

- Need a drug that’s not on your plan’s list of covered drugs
- Believe a coverage rule (like prior authorization or a quantity limit) shouldn’t apply to you for medical reasons
- Need to take a non-preferred drug and you want the plan to cover the drug at a preferred drug price

How to ask for a coverage determination

To ask for a coverage determination, you or your prescriber can call your Medicare drug plan’s toll-free phone number on the back of your plan membership card, or go to your plan’s website. You can ask for 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:

- The name of the prescription drug, including dose and strength (if known)
- The name of the pharmacy that tried to fill the prescription
- The date you tried to fill the prescription
- If you ask for an exception, your prescriber will need to explain why you need the off-formulary or non-preferred drug, or why a coverage rule shouldn’t apply to you

Your Medicare drug plan will send you a written decision. If coverage isn’t approved and you disagree with this decision, you have the right to appeal. The plan’s notice will explain why coverage was denied and how to ask for an appeal.

Get help and more information

Look at your plan materials or call **1-800-MEDICARE (1-800-633-4227)** for more information about how to ask for a coverage determination. TTY users can call **1-877-486-2048**. For help contacting your plan, call **1-800-MEDICARE**.

To get this form in an accessible format (like large print, Braille, or audio) contact your Medicare drug plan. You also have the right to file a complaint if you feel you’ve been discriminated against.

Visit [Medicare.gov/about-us/accessibility-nondiscrimination-notice](https://www.medicare.gov/about-us/accessibility-nondiscrimination-notice), or call **1-800-MEDICARE (1-800-633-4227)** for more information. TTY users can call **1-877-486-2048**.

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 information collection is 0938-0975. This information collection is used to provide notice to enrollees about how to contact their Part D plan to request a coverage determination. 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, gather the data needed, to review and complete the information collection. This information collection is required under § 423.562(a)(3) and an associated regulatory provision at § 423.128(b)(7)(iii). If you have 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, Mail Stop C4-26-05, Baltimore, Maryland 21244-1850.

OMB Approval No. 0938-0975
Form CMS -10147 (Expires: 12/31/2027)

Centers for Medicare & Medicaid Services (CMS) Medicare Durable Medical Equipment, Prosthetics, Orthotics & Supplies (DMEPOS) Supplier Standards

Note: This is an abbreviated version of the supplier standards every Medicare Durable Medical Equipment, Prosthetics, Orthotics and Supplies (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, sec 424.57(c), and can also be found online at [CoramHC.com/CMS-Medicare-DMEPOS-Supplier-Standards](https://www.cms.gov/CoramHC.com/CMS-Medicare-DMEPOS-Supplier-Standards).

General rule. A DMEPOS supplier must meet the following conditions in order to be eligible to receive payment for a Medicare-covered item:

- The supplier has submitted a completed application to CMS to furnish Medicare-covered items including required enrollment forms. (The supplier must enroll separate physical locations it uses to furnish Medicare-covered DMEPOS, with the exception of locations that it uses solely as warehouses or repair facilities.)
- The item was furnished on or after the date CMS issued to the supplier a DMEPOS supplier number conveying billing privileges. (CMS issues only one supplier number for each location.) This requirement does not apply to items furnished incident to a physician's service.
- CMS has not revoked or excluded the DMEPOS supplier's privileges during the period which the item was furnished has not been revoked or excluded.
- A supplier that furnishes a drug used as a Medicare-covered supply with durable medical equipment or prosthetic devices must be licensed by the State to dispense drugs +(A supplier of drugs must bill and receive payment for the drug in its own name. A physician, who is enrolled as a DMEPOS supplier, may dispense, and bill for, drugs under this standard if authorized by the State as part of the physician's license.)
- The supplier has furnished to CMS all information or documentation required to process the claim.
- Application certification standards. The supplier must meet and must certify in its application for billing privileges that it meets and will continue to meet the following standards:
 - Operates its business and furnishes Medicare-covered items in compliance with the following applicable laws:
 - Federal regulatory requirements that specify requirements for the provision of DMEPOS and ensure accessibility for the disabled.
 - State licensure and regulatory requirements. If a State requires licensure to furnish certain items or services, a DMEPOS supplier —
 - Must be licensed to provide the item or service; and
 - May contract with a licensed individual or other entity to provide the licensed services unless expressly prohibited by State law.
 - Has not made, or caused to be made, any false statement or misrepresentation of a material fact on its application for billing privileges. (The supplier must provide complete and accurate information in response to questions on its application for billing privileges. The supplier must report to CMS any changes in information supplied on the application within 30 days of the change.);
 - Must have the application for billing privileges signed by an individual whose signature binds a supplier;
 - Fills orders, fabricates or fits items from its own inventory or by contracting with other companies for the purchase of items necessary to fill the order. If it does, it must provide, upon request, copies of contracts or other documentation showing compliance with this standard. A supplier may not contract with any entity that is currently excluded from the Medicare program, any State health care programs, or from any other Federal Government Executive Branch procurement or non-procurement program or activity;
 - Advises beneficiaries that they may either rent or purchase inexpensive or routinely purchased durable medical equipment, and of the purchase option for capped rental durable medical equipment, as defined in §414.220(a) of this subchapter. (The supplier must provide, upon request, documentation that it has provided beneficiaries with this information, in the form of copies of letters, logs or signed notices.);
 - Honors all warranties expressed and implied under applicable State law. A supplier must not charge the beneficiary or the Medicare program for the repair or replacement of Medicare covered items or for services covered under warranty. This standard applies to all purchased and rented items, including capped rental items, as described in §414.229 of this subchapter. The supplier must

provide, upon request, documentation that it has provided beneficiaries with information about Medicare covered items covered under warranty, in the form of copies of letters, logs or signed notices;

- Maintains a physical facility on an appropriate site. An appropriate site must meet all of the following:
- Must meet the following criteria:
- Except for orthotic and prosthetic personnel described in paragraph (c)(7)(i)(A)(2) of this section, maintains a practice location that is at least 200 square feet beginning —
- September 27, 2010 for a prospective DMEPOS supplier;
- The first day after termination of an expiring lease for an existing DMEPOS supplier with a lease that expires on or after September 27, 2010 and before September 27, 2013; or
- September 27, 2013, for an existing DMEPOS supplier with a lease that expires on or after September 27, 2013.
- Orthotic and prosthetic personnel providing custom fabricated orthotics or prosthetics in private practice do not have to meet the practice location requirements in paragraph (c)(7)(i)(A)(1) of this section if the orthotic and prosthetic personnel are —
- State-licensed; or
- Practicing in a State that does not offer State licensure for orthotic and prosthetic personnel.
- Is in a location that is accessible to the public, Medicare beneficiaries, CMS, NSC and its agents. (The location must not be in a gated community or other area where access is restricted.)
- Is accessible and staffed during posted hours of operation.
- Maintains a permanent visible sign in plain view and posts hours of operation. If the supplier's place of business is located within a building complex, the sign must be visible at the main entrance of the building or the hours can be posted at the entrance of the supplier.
- Except for business records that are stored in centralized location as described in paragraph (c)(7)(ii) of this section, is in a location that contains space for storing business records (including the supplier's delivery, maintenance and beneficiary communication records).
- Is in a location that contains space for retaining the necessary ordering and referring documentation specified in §424.516(f).
- May be the centralized location for all of the business records and the ordering and referring documentation of a multisite supplier.
- May be a "closed door" business, such as a pharmacy or supplier providing services only to beneficiaries residing in a nursing home, that complies with all applicable Federal, State, and local laws and regulations. "Closed door" businesses must comply with all the requirements in this paragraph.
- Permits CMS, the NSC or agents of CMS or the NSC to conduct on-site inspections to ascertain supplier compliance with the requirements of this section.
- Maintains a primary business telephone that is operating at the appropriate site listed under the name of the business locally or toll-free for beneficiaries.
- Cellular phones, beepers or pagers must not be used as the primary business telephone.
- Calls must not be exclusively forwarded from the primary business telephone listed under the name of the business to a cellular phone, beeper or pager.
- Answering machines, answering services, facsimile machines or combination of these options must not be used exclusively as the primary business telephone during posted operating hours.
- Has a comprehensive liability insurance policy 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. In the case of a supplier that manufactures its own items, this insurance must also cover product liability and completed operations. Failure to maintain required insurance at all times will result in revocation of the supplier's billing privileges retroactive to the date the insurance lapsed;
- Must agree not to contact a beneficiary by telephone when supplying a Medicare-covered item unless one of the following applies:
- The individual has given written permission to the supplier to contact them by telephone concerning the furnishing of a Medicare-covered item that is to be rented or purchased.
- The supplier has furnished a Medicare-covered item to the individual and the supplier is contacting the individual to coordinate the delivery of the item.
- If the contact concerns the furnishing of a Medicare-covered item other than a covered

item already furnished to the individual, the supplier has furnished at least one covered item to the individual during the 15-month period preceding the date on which the supplier makes such contact.

- Must be responsible for the delivery of Medicare covered items to beneficiaries and maintain proof of delivery. (The supplier must document that it or another qualified party has at an appropriate time, provided beneficiaries with necessary information and instructions on how to use Medicare-covered items safely and effectively);
- Must answer questions and respond to complaints a beneficiary has about the Medicare-covered item that was sold or rented. A supplier must refer beneficiaries with Medicare questions to the appropriate carrier. A supplier must maintain documentation of contacts with beneficiaries regarding complaints or questions;
- Must maintain and replace at no charge or repair directly, or through a service contract with another company, Medicare-covered items it has rented to beneficiaries. The item must function as required and intended after being repaired or replaced;
- Must accept returns from beneficiaries 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);
- Must disclose these supplier standards to each beneficiary to whom it supplies a Medicare-covered item;
- Must comply with the disclosure provisions in §420.206 of this subchapter;
- Must not convey or reassign a supplier number;
- Must have a complaint resolution protocol to address beneficiary complaints that relate to supplier standards in paragraph (c) of this section and keep written complaints, related correspondence and any notes of actions taken in response to written and oral complaints. Failure to maintain such information may be considered evidence that supplier standards have not been met. (This information must be kept at its physical facility and made available to CMS, upon request.);
- Must maintain the following information on all written and oral beneficiary complaints, including telephone complaints, it receives:
 - The name, address, telephone number and health insurance claim number of the beneficiary.
- A summary of the complaint; the date it was received; the name of the person receiving the complaint, and a summary of actions taken to resolve the complaint.
- If an investigation was not conducted, the name of the person making the decision and the reason for the decision.
- Provides to CMS, upon request, any information required by the Medicare statute and implementing regulations.
- All suppliers of DMEPOS and other items and services 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.
- All DMEPOS suppliers must notify their accreditation organization when a new DMEPOS location is opened. The accreditation organization may accredit the new supplier location for three months after it is operational without requiring a new site visit.
- All DMEPOS supplier locations, whether owned or subcontracted, must meet the DMEPOS quality standards and be separately accredited in order to bill Medicare. An accredited supplier may be denied enrollment or their enrollment may be revoked, if CMS determines that they are not in compliance with the DMEPOS quality standards.
- All DMEPOS suppliers must disclose upon enrollment all products and services, including the addition of new product lines for which they are seeking accreditation. If a new product line is added after enrollment, the DMEPOS supplier will be responsible for notifying the accrediting body of the new product so that the DMEPOS supplier can be re-surveyed and accredited for these new products.
- Must meet the surety bond requirements specified in paragraph (d) of this section.
- Must obtain oxygen from a State-licensed oxygen supplier (applicable only to those suppliers in States that require oxygen licensure.)
- Is required to maintain ordering and referring documentation consistent with the provisions found in §424.516(f)

- Except as specified in paragraph (c)(29)(ii) of this section, is prohibited from sharing a practice location with any other Medicare supplier or provider.
- The prohibition specified in paragraph (c)(29)(i) of this section is not applicable at a practice location that meets one of the following:
- Where a physician whose services are defined in section 1848(j)(3) of the Act or a nonphysician practitioner, as described in section 1842(b)(18)(C) of the Act, furnishes items to his or her own patient as part of his or her professional service.
- Where a physical or occupational therapist whose services are defined in sections 1861(p) and 1861(g) of the Act, furnishes items to his or her own patient as part of his or her professional service.
- Where a DMEPOS supplier is colocated with and owned by an enrolled Medicare provider (as described in §489.2(b) of this chapter). The DMEPOS supplier —
- Must operate as a separate unit; and
- (Meet all other DMEPOS supplier standards.
- Except as specified in paragraph (c)(30)(ii) of this section, is open to the public a minimum of 30 hours per week.
- The provision of paragraph (c)(30)(i) of this section is not applicable at a practice location where a —
- (Physician whose services are defined in section 1848(j)(3) of the Act furnishes items to his or her own patient(s) as part of his or her professional service;
- A physical or occupational therapist whose services are defined in sections 1861(p) and 1861(g) of the Act furnishes items to his or her own patient(s) as part of his or her professional service.

(Updated 05/08/2025)

Advance Directives

An Advance Directive is your way of letting health care providers and your family know your decisions about health care and the right to accept or refuse services, even those that could save or sustain life. It is important that you share and tell your wishes to your family and health care team (e.g., prescriber, nurse) and that they are written down prior to starting treatment. You do not need to have a lawyer to create an advance directive, but you do need to sign it in front of the required witnesses in order for it to be accepted and valid.

Depending on your state requirements an Advance Directive allows you to name a person of your choice to make health care choices for you when you cannot make the choices yourself.

Your Coram® nurse will ask you about your advance directive. You have the right to revoke or replace the advance directive at any time. If you have one, your nurse will ask for a copy.

Nondiscrimination and Accessibility Notice (ACA § 1557) (also known as Language Line and Translation Resources)

Discrimination is against the law

Coram LLC complies with applicable Federal civil rights laws and does not discriminate on the basis of race, color, national origin, age, disability, or sex (consistent with 45 CFR § 92.101(a)(2)). Coram LLC does not exclude people or treat them less favorably because of race, color, national origin, age, disability, or sex.

Coram LLC:

- Provides people with disabilities reasonable modifications and free appropriate auxiliary aids and services to communicate effectively with us, such as:
- Qualified sign language interpreters
- Written information in other formats (large print, audio, accessible electronic formats, other formats).
- Provides free language assistance services to people whose primary language is not English, which may include:
- Qualified interpreters
- Information written in other languages.

- If you need reasonable modifications, appropriate auxiliary aids and services, or language assistance services, call Customer Care at **1-800-423-1411** (TTY: 711).

If you believe that Coram LLC has failed to provide these services or discriminated in another way on the basis of race, color, national origin, age, disability, or sex, you can file a grievance with:

Civil Rights Coordinator
Attn: 1557 Coordinator
CVS Pharmacy, Inc.
1 CVS Drive, MC 2332
Woonsocket, RI 02895
Email: Coordinator1557@CVSHealth.com
Fax: 401-652-9935

You can file a grievance in person or by mail, email, or fax. If you need help filing a grievance, the Civil Rights Coordinator is available to help you.

You can also file a civil rights complaint with the U.S. Department of Health and Human Services, Office for Civil Rights, electronically through the Office for Civil Rights Complaint Portal, available at ocrportal.hhs.gov/ocr/portal/lobby.jsf, or by mail or phone at:

U.S. Department of Health and Human Services
200 Independence Avenue, SW
Room 509F, HHH Building
Washington, D.C. 20201
1-800-368-1019, 800-537-7697 (TDD)

Complaint forms are available at HHS.gov/ocr/office/file/index.html. This notice is available at Coram LLC's website: CoramHC.com/.

Language Assistance

ENGLISH

To access language services at no cost to you, call **1-800-423-1411** (TTY: 711).

ARABIC

للحصول على الخدمات اللغوية دون أي تكلفة، الرجاء الاتصال على الرقم 1-800-423-1411 (رقم هاتف الصم والبكم: 711).

CHINESE (TRADITIONAL)

如欲使用免費語言服務，請致電 1-800-423-1411 (TTY: 711)。

FARSI (PERSIAN)

برای دسترسی به خدمات زبان به طور رایگان، با شماره 1-800-423-1411 (TTY: 711) تماس بگیرید.

FRENCH

Afin d'accéder aux services langagiers sans frais, composez le 1-800-423-1411 (TTY: 711).

FRENCH CREOLE HAITIAN

Pou jwenn sèvis lang gratis, rele 1-800-423-1411 (TTY: 711).

GERMAN

Um auf für Sie kostenlose Sprachdienstleistungen zuzugreifen, rufen Sie 1-800-423-1411 (TTY: 711) an.

ITALIAN

Para acessar os serviços de idiomas sem custo para você, ligue para 1-800-423-1411 (TTY: 711).

JAPANESE

言語サービスを無料でご利用いただくには、1-800-423-1411 (TTY: 711) までお電話ください。

KOREAN

무료 언어 서비스를 이용하려면 1-800-423-1411 (TTY: 711)번으로 전화해 주십시오.

POLISH

Aby uzyskać dostęp do bezpłatnych usług językowych proszę 1-800-423-1411 (TTY: 711).

PORTUGUESE

Para acessar os serviços de idiomas sem custo para você, ligue para 1-800-423-1411 (TTY: 711).

RUSSIAN

Для того чтобы бесплатно получить помощь переводчика, позвоните по телефону 1-800-423-1411 (TTY: 711).

SPANISH

Para acceder a los servicios de idiomas sin costo, llame al 1-800-423-1411 (TTY: 711).

TAGALOG

Para ma-access ang mga serbisyo sa wika nang wala kayong babayaran, tumawag sa 1-800-423-1411 (TTY: 711).

VIETNAMESE

Nếu quý vị muốn sử dụng miễn phí các dịch vụ ngôn ngữ, hãy gọi tới số 1-800-423-1411 (TTY: 711)



1-800-423-1411 | [CoramHC.com](https://www.coramhc.com)

1. <https://www.inogen.com/blog/10-home-oxygen-safety-tips/>, accessed July 2023.
2. <http://www.redcross.org/get-help/how-to-prepare-for-emergencies/types-of-emergencies/fire>, accessed July 2023.
3. <https://www.ncoa.org/resources/falls-prevention-conversation-guide-caregivers/>, accessed July 2023.
**Coram uses a combination disposal system that ensures incineration of contaminated sharps and other supplies contaminated with hazardous drugs.*
†MinuteClinic® employs physician assistants in select states.
This information is not a substitute for medical advice or treatment. Talk to your doctor or health care provider about this information and any health-related questions you have. Coram assumes no liability whatsoever for the information provided or for any diagnosis or treatment made as a result of this information.
Your privacy is important to us. Our employees are trained regarding the appropriate way to handle your private health information.
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