



Specialty Pharmacy Information Booklet

*This packet contains important information.
Please keep it in a safe place.*





About this Booklet

Welcome to the University Hospitals Specialty Pharmacy. Our service is designed to help patients who are taking complex, high-cost medications also known as “specialty medications.”

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What is a Specialty Pharmacy?

A specialty pharmacy fills prescriptions for certain complex, high-cost medications and therapies. And, unlike retail pharmacies, specialty pharmacies also provide a wide range of services to support you based on your unique needs. We work directly with your physician and insurance provider to ensure that you have access to the right medications.

Helping you manage complex treatment plans

Starting a new treatment can be overwhelming and confusing. At UH Meds Specialty Pharmacy, we have a team and resources in place to maximize your comfort and give you peace of mind.

Our fully integrated team of clinical pharmacists, clinical specialists and certified pharmacy technicians works together to help you manage your complex treatment plan. We also communicate with your physician and nursing staff to ensure optimal patient care, help you manage any side effects you may experience and process medication refills.

We are available to answer any questions or concerns that you may have. Best of all, we deliver the personalized care and attention you have come to know and expect from University Hospitals.



Quality & Accreditation

University Hospitals Specialty Pharmacy is proud to be dually accredited by the URAC and the ACHC (Accreditation Commission for Health Care). Both URAC & ACHC hold our pharmacy to a set of standards of excellence in patient care, management and continuous quality improvement.

These achievements display University Hospitals' unwavering commitment to adhere to high standards and provide exemplary health care to our patients. This outstanding dedication to our patients and employees is just one of the many ways in which they strive for the highest quality care that is focused on the best outcomes.



Specialty Pharmacy
Expires 12/29/2025



Specialty Pharmacy
Expires 11/01/2027

Contact Information

You can pick up your prescriptions in person or have them delivered directly to your home. Please use the phone numbers listed below if you have any questions about your medication(s), to order refills and to make arrangements for medication delivery.

Pharmacy Care Team

Call 216-765-2784 from
Monday – Friday,
8:30 a.m. – 5 p.m.

- William Kupka, *PharmD, BCPS, 340B ACE; Pharmacy Director*
- Alicia Bowman, *PharmD, RPh Pharmacy Manager*
- Timothy Blake, *CPhT, MBA Business Manager*
- Kristen Kissling, *PharmD, RPh, CSP Specialty Pharmacy Manager*

On-Call Emergency Services

Available 24 / 7
216-765-2784

Toll-Free Number
1-800-552-8442

State Boards of Pharmacy Contact Numbers

Ohio

614-466-4143

Pennsylvania

717-783-7156

Florida

850-245-4474

Arizona

602-771-2727

Contact us immediately if you(r):

- Are admitted to a hospital
- Change physicians
- Insurance coverage changes
- Medications change

We are here to answer your questions. Don't hesitate to call.

Specialty Pharmacy Hours & Location

We are conveniently located in Warrensville Heights with easy access to I-480 and I-271. In addition to the regular business hours listed below, we offer on-call services 24/7.

Regular Business Hours

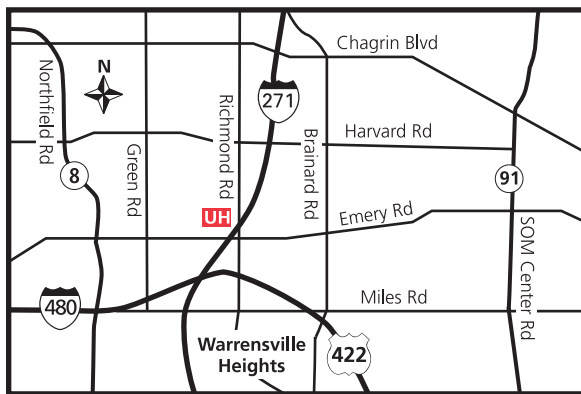
Monday – Friday, 8:30 a.m. – 5 p.m.

Phone: 216-765-2784

Toll-Free Phone: 833-473-3455

Fax: 216-201-7760

Business Location



UH Meds Specialty Pharmacy Services

4510 Richmond Road

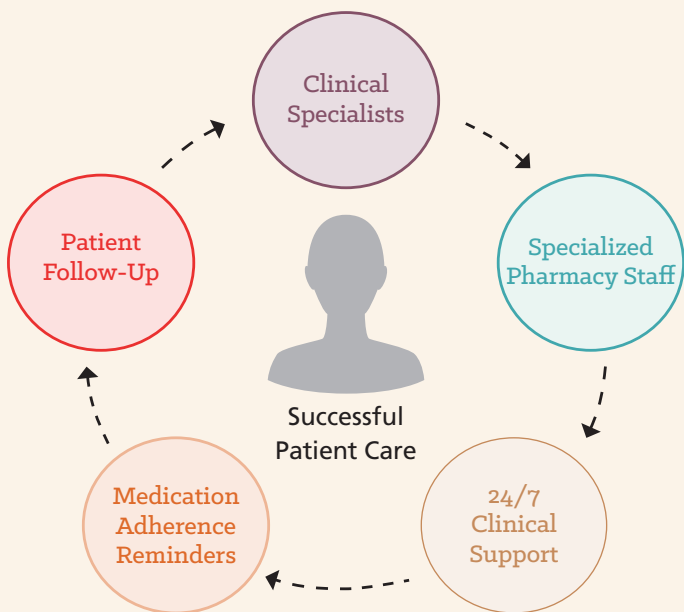
Warrensville Heights, Ohio 44128

Visit Us Online

UHhospitals.org/SpecialtyPharmacy

Services Offered

The UH Meds Specialty Pharmacy provides access to specialized pharmacists and technicians who are knowledgeable about specialty medications and their side effects.



Our services include:

- Prior authorization with insurance providers
- Free medication delivery directly to your home
- Formulary management
- Dosing reminders (*medication-specific adherence tools*)
- Refill reminders from your pharmacy technicians
- Side effect management
- Patient follow-up throughout treatment cycles
- Copay assistance
- 24/7 clinical support



Supported Conditions

We currently offer pharmacy support for many different medical conditions, including but not limited to:

- Anemia
- Asthma
- Cancer
- Crohn's disease
- Cystic fibrosis
- Fertility services
- Growth hormone deficiency
- Hepatitis B
- Hepatitis C
- Immune disorders
- Multiple sclerosis
- Osteoarthritis
- Osteoporosis
- Psoriasis
- Psoriatic arthritis
- Rheumatoid arthritis
- Transplant

We expect to add more conditions to this list, as the demand for specialty pharmacy services continues to grow.

Obtaining Medications and Services

Ordering a New or Refill Prescription

Once an order of your new medication is received, UH Specialty Pharmacy will complete a benefits review and contact you to set up shipment, answer questions and arrange payment, if applicable.

To refill a prescription you may call us or a member of our team will contact you before your medication is scheduled to run out. We will check on your progress, ask about side effects, verify dosage and determine the shipment for your next refill.

If you have questions or need an update on the status of your order, please call us at 216-765-2784 or toll free 1-833-473-3455. If there is a delay of your medication order, your pharmacy team will be in contact with you to ensure prompt processing of your order to prevent delay in therapy.

Delivery of Your Medications

If you would like your medications delivered to your home, we will set up the delivery. We will also send any additional supplies that you may need. This may include needles, syringes and alcohol swabs. Some medications require a signature at delivery. Our team will make sure that you know if your medication delivery requires a signature. The team will make every effort to make the process easy for you.

Pharmacist Assistance

The pharmacists at the UH Specialty Pharmacy are trained experts on the medications you are taking. They are available to answer any questions you may have 24 hours a day, seven days a week. In case of an emergency, call 9-1-1.

Medication Substitutions

The pharmacist will substitute a generic and therapeutically equivalent drug for the drug specified on the prescription as long as the price of the substituted drug does not exceed the price of the drug specified by the practitioner. Medication substitutions will not be made if the practitioner indicates “dispense as written”, “DAW”, “brand”, or “brand necessary” on the signed prescription.

Medication substitutions are only permitted when a generic medication is deemed to be therapeutically equivalent by the FDA. A patient may also request a brand medication to be dispensed but it may have a much higher copay.

Transferring Prescriptions

University Hospitals Home Care-Specialty Pharmacy Services has access to and stocks a wide range of specialty medications. If we are unable to obtain your medications due to manufacturer restrictions, back order, or other limitations, we will work with you and another pharmacy to ensure you receive your prescription medication.

If you prefer to use another pharmacy to receive medication, we will transfer the prescription to a pharmacy of your choice upon request.

Medication Recalls

If there is a recall on one of your medications, we will:

- Review our inventory and records for in stock medication and remove and quarantine any stock of the medication.
- Document and follow the manufacturer’s recommended steps.
- Contact any effected patient and their prescriber.

Patient Complaints, Concerns or Issues

You have the right and responsibility to express concerns, complaints or dissatisfaction about the services you have received. We will strive to resolve any concerns or issues you experience as quickly as possible.

If we cannot resolve your complaint promptly, or your complaint requires additional research, we will contact you with the results of our investigation, either via telephone or in writing of the complaint as soon as possible. If the pharmacy staff is unable to help resolve your complaint to your expectation, you may contact the Pharmacy Manager/Director at 216-765-2784 or toll free at 833-473-3455.

If you are still unsatisfied you may contact the Boards of Pharmacy or any of the following agencies:

The State of Ohio

Board of Pharmacy

77 S High Street, 17th Floor

Columbus, OH 43215

Phone: 614-466-4143

Fax: 614-644-8556

Hours of Operation:

Monday – Friday, 8 a.m. – 5 p.m.

Saturday and Sunday, Closed

**The State of Pennsylvania
Board of Pharmacy**

One Penn Center
2601 N. 3rd Street
Harrisburg, PA 17110
Phone: 717-783-7156
Fax: 717-787-7769

Hours of Operation:

Monday – Friday,
8:30 a.m. – 4 p.m.
Saturday and Sunday, Closed

**The State of Florida
Board of Pharmacy**

4052 Bald Cypress Way
Tallahassee, FL 32399
Phone: 850-245-4474
Fax: 850-921-5389

Hours of Operation:

Monday – Friday, 8 a.m. – 5 p.m.
Saturday and Sunday, Closed

**The State of Arizona
Board of Pharmacy**

1110 W. Washington St.,
Suite 260
Phoenix, AZ 8507
Phone: 602-771-2727
Fax: 602-771-2749

Hours of Operation:

Monday – Friday,
8 a.m. – 5 p.m. MST
Saturday and Sunday, Closed

**Accreditation Commission
for Healthcare (ACHC)**

139 Weston Oaks CT
Cary, NC 27513
Phone: 855-937-2242
Fax: 919-785-3011

Hours of Operation:

Monday – Friday, 8 a.m. – 5 p.m.
Saturday and Sunday, Closed

Reporting Suspected Medication Issues

We take medication issues very seriously, if you suspect an issue with your medication, please contact the UH Specialty Pharmacy immediately and ask to speak with a pharmacist or Pharmacy Manager. Medication issues may include: counterfeit medications, medication errors and/or adverse drug events.

If you feel you are experiencing an adverse drug reaction with medical symptoms such as shortness of breath, skin rash, hives, fever, swelling, wheezing that require urgent attention, you should be seen in a local emergency room, or call 911. Please contact the pharmacy the next business day and inform our staff of the reaction and any actions that may have been taken.



Patient Management Program Notification

The services provided by University Hospitals Health System (Specialty Pharmacy) are included at no cost to you. You are automatically enrolled in our patient management program just by being a patient of University Hospitals Health System (Specialty Pharmacy). You can always choose to opt-out at any time. Just call our pharmacy and speak with one of our team members.

As a part of University Hospitals Health System (Specialty Pharmacy) patient management program, our clinical team will work with you. We will answer any concerns or questions you may have about your drug therapy. We will make sure you understand why you are taking your medication. We will teach you on how to take your medicine correctly. We will tell you any drugs to avoid and any common side effects. We will also give you information on how to treat common side effects. Our team will contact your doctor when needed.

The benefit of our program is improved overall health. Being aware and educated on both, the disease and the drug ensure your success. Our clinical team will work together with your doctor. Working together will help you make informed decisions about your health.

The success of our program depends on you. You must be willing to work together with your doctor and pharmacist. You must be willing to take your medicine as directed by your doctor. You must be willing to discuss the details of your disease and medical history with your pharmacist.

Please let your doctor know you are a patient of the University Hospitals Health System (Specialty Pharmacy). Having a good relationship between your doctor and your pharmacist will benefit everyone involved in your care

If you wish to speak with a team member, please call University Hospitals (Specialty Pharmacy) at **216-765-2784**.

as a participant of the Patient Management Program, you have the following rights and responsibilities.

1. The right to have personal health information shared with the patient management program only in accordance with state and federal law.
2. The right to identify the program's staff members including their job title, and to speak with a staff member's supervisor if requested.
3. The right to speak to a health professional.
4. The right to receive information about the patient management program.
5. The right to decline participation, revoke consent or disenroll at any point in time.
6. The responsibilities to submit any forms that are necessary to participate in the program, to the extent required by law.
7. The responsibility to give accurate clinical and contact information and to notify the patient management program of changes in this information.
8. The responsibility to notify their treating provider of their participation in the patient management program, if applicable.



The Billing Process

UH Meds Specialty Pharmacy Payment Line: 216-378-8555

The UH Specialty Pharmacy works together with your insurance company to get the best financial results for you.

If your insurance company does not cover the entire amount, you will be responsible for the rest of the cost. This cost is called a copayment or copay. We will tell you the exact amount you need to pay. We will help you make your therapy plan as affordable as possible.

If you are experiencing any financial burdens, we will help you explore options. We have relationships with different pharmaceutical companies as well as many foundations that provide funding for specialty medications.

Additional Tools and Resources

Below are some tips to help manage your new medication(s).

Keep Your Medication List Current

Write down a list of all current medications, including over-the-counter medications, vitamins and supplements. Having an up-to-date list will help your health care providers determine certain treatment plans and avoid any unwanted drug interactions.

Remembering to Take Your Medication

- Pillboxes can help you stay organized with your medications. Fill your pillbox at the beginning of each week. The pharmacy staff can always help you set up your pillbox if needed.
- Set an alarm to remind you when to take your medications. Or send yourself reminder emails to maintain your medication schedule.
- Ask for help! We are all here to help make your treatment experience the best it can be.

Patient Safety

Hand-Washing Instructions

The best way to prevent infection is to wash your hands. Germs are all around us, including on the body. The hands are especially likely to gather germs. Always wash your hands before and after you prepare or handle any medication(s).

Follow these simple steps for proper hand-washing:

- Wet hands with warm water.
- Place a small amount of soap on hands.
- Rub hands together for at least 30 seconds. Make sure to clean under the nails and between the fingers.
- Rinse hands with warm running water.
- Dry with a paper towel or a clean cloth.

Hand Sanitizers

Alcohol-based hand sanitizers can quickly reduce the number of germs when soap and water are not available. Hand sanitizers are not effective when hands are visibly dirty.

To use:

- Apply a small amount of hand sanitizer to the palm of one hand.
- Rub your hands together until they are dry. Be sure to cover all the surfaces of your hands.

Adverse Drug Reactions

If you are experiencing any adverse drug reactions or other issues, contact your doctor, local emergency room or call 9-1-1.

Biomedical Waste Disposal at Home

Biomedical waste generated at home includes syringes, lancets and sharps (needles) that you use to either inject medication(s) or draw blood. In order to keep you, your family and the environment clean and safe, special care must be taken when disposing of these items.

Please follow these simple rules to ensure your safety:

Sharps: Place ALL needles, syringes and lancets into a sharps container after use. If a sharps container is not available, you can use a hard plastic or metal container with a securable lid such as an empty liquid detergent container or an empty coffee can with a lid. Do not fill containers more than three-quarters and do not use clear plastic or glass containers.

Reinforce the lid with heavy-duty tape before discarding. Never flush sharps down the toilet or dispose of them unsealed in your trash.

Disposal: We recommend that you contact your local waste collection service or public health department to confirm that

these disposal procedures are acceptable in your area. You may also check with your doctor's office about the possibility of disposing of your sharps containers in his or her office at your next appointment.

For additional information regarding safe needle disposal processes, please visit the Centers for Disease Control and Prevention (CDC) website at [Cdc.gov/niosh/stopsticks/default.html](https://www.cdc.gov/niosh/stopsticks/default.html).

Needle Safety

- Never replace the cap
- Throw away needles in a sharps container after use
- Report all needle sticks or sharps-related injuries to your doctor

Home Safety – Patient Education

Below are a few easy tips to make your home safe, decrease hidden hazards and help prevent injuries within your home.

Falling

Falling is the most common injury in the home. Taking certain medications can cause dizziness and make you unsteady on your feet, increasing the risk for falls. It is important to prepare your home in advance to reduce the chance of serious injury. Some suggestions include:

- Keep the floors clean and clean up any spills quickly
- Avoid using throw rugs
- Be sure to have a non-slip bathmat in the shower or tub
- Keep electrical, telephone and computer cords out of walkways
- Make sure that all steps and stairs have handrails
- Have all walkways well lit and use nightlights as needed
- Always have a working flashlight available

Patients Receiving Infusion Therapy

The UH Meds Specialty Pharmacy will make every effort to deliver your supplies and medications if a winter storm warning is in place. Go to the nearest hospital for assistance if the power fails.

Poisoning

Medications can be dangerous when they are not taken as directed and should only be taken by the person named on the prescription. It is important to store medications properly to avoid any poisoning accidents.

- Store medications in their original containers and out of reach of children
- Use child-resistant packaging and replace caps tightly
- Never refer to medications as “candy” in front of children
- If a poisoning is suspected, call Poison Control at 1-800-222-1222

Emergency Preparedness

Here are some tips for planning ahead in case of an emergency:

- Know the evacuation routes in your area
- Have emergency or first-aid kits available in your home and car
- Keep extra water bottles and nonperishable snacks on hand
- Maintain an up-to-date emergency contact list
- Keep your medications stocked and stored in a safe place
- Store important documents in a safe place

More information about emergency preparedness is available at [RedCross.org](https://www.RedCross.org). In case of an emergency, call the police or dial 9-1-1.

Power Outage

- If there is a loss of power, notify the gas and electric company
- Have a flashlight and fresh batteries available
- If you are on oxygen, turn it off before lighting any candles

Fire

- If you are on oxygen, turn it off
- Rescue anyone from immediate danger, including yourself, and evacuate the area
- Once you are in a safe place, alert the fire department

You should only attempt to extinguish a fire if it is very small and in a localized area. In most cases, the safest and smartest thing to do is get out and call for help.

If relocation is necessary and your address changes either temporarily or permanently, please contact the UH Meds Specialty Pharmacy with your updated contact information and address so there will not be any lapse in your medication deliveries.

Winter Storm

- Prepare an emergency kit that includes:
 - Water
 - Nonperishable foods
 - Flashlight and batteries
 - First-aid kit and prescriptions
- Make sure that your cell phone is fully charged.
- Do NOT use your stove for heat. If you lose power, use extra blankets, sleeping bags, winter clothing or a wood-burning fireplace for warmth.
- Never use a charcoal grill or portable gas camping stove inside your home. These items can produce deadly fumes.
- Do not leave any lit candles unattended.

Burn Prevention

- Be sure that you have a working smoke detector on each level of your home. Batteries should be replaced at least twice a year – many people like to do this when the time changes in the spring and fall.
- Have a fire safety plan and share it with anyone who lives in the home.
- Don't set your water heater higher than 120 degrees Fahrenheit.
- Keep matches and lighters out of reach of children.
- Do not leave any open flames (candles, fireplaces) unattended.

Natural Disasters (Flood, Tornado or Earthquake)

- Keep a supply of bottled water and nonperishable foods on hand.
- Make sure to have a flashlight and fresh batteries available.
- Stay away from any broken glass, windows or water leaks. Always wear shoes to prevent injury.
- Evacuate the area, when necessary for safety.
- If relocation is necessary and your address changes either temporarily or permanently, please contact the UH Meds Specialty Pharmacy with your updated contact information and address so there will not be any lapse in your medication deliveries.

Patient Rights & Responsibilities

You have the right to:

Respect and Dignity

1. Thoughtful and respectful care*. This includes being free from all forms of abuse, discrimination, exploitation, neglect and harassment.
2. Freely voice complaints without being harmed, coerced or discriminated against.
3. Respect for your cultural and personal values, beliefs and preferences.
4. Use and keep personal items as long as they are not unsafe to you or others.

Clear Communication

1. Communication about your care in a way you understand.
2. Know who is caring for you, their title and role.
3. Be told before we give or stop care when possible.
4. Be told about your discharge plan in a timely manner and be given, before you leave, information about follow-up care you may need.
5. Know why you are being moved to another area inside or outside the hospital.
6. Be told about our rules for patient care and responsibilities.
7. Be told about hospital charges for your care and your payment options.
8. Have a family member or person of your choice and/or your doctor notified promptly of your admission to the hospital.

Access to Care

1. Access care no matter your race, language, religion, sex, ethnicity, national origin, culture, age, sexual orientation, gender identity, income, education, veteran status or ability.
2. Help with physical disabilities and limitations. This includes help with communication if you have problems with vision, speech, hearing, memory or thinking.
3. Have your pain assessed and treated in a safe and proper way.
4. Access help for domestic violence concerns.
5. Request guardianship, patient advocate and child/adult protective services.

Information

1. Access or request a change to your healthcare record.
2. Know who we share your healthcare record with.
3. Be told about your rights and care in a language you know. We can provide foreign language services at no cost to you.
4. Be told, in a way you can understand, about your health status and prognosis, the risks and benefits of treatment, and the results of your care, including results we did not expect.
5. Know if we have business relationship(s) with others involved in your care.
6. Receive a written copy of these Patient Rights and Responsibilities if you get care at any of our sites. These rights are posted in patient areas that can be easily accessed for review by the public. They are available in several common languages upon request to 216-286-2334.

Support

1. Have support persons* present while you are in the hospital for emotional support. They can be involved as much as you want. Sometimes there are exceptions to help make sure you and/or others are kept safe.
2. Receive support for your spiritual or pastoral care needs.

Visitation

1. The presence of loved ones has a positive effect on patients and their recovery, and University Hospitals (“UH”) encourages visitors. The patient’s verbal approval of a visitor is sufficient. If the patient is incapacitated, UH is flexible and accommodating in providing access to visitors.
2. Visitors are not restricted, limited or otherwise denied visitation privileges on the basis of race, national origin, religion, sex, gender identity, sexual orientation or disability.
3. Patients are informed of their rights to have designated visitors, including but not limited to, a spouse, a domestic partner (including a same-sex domestic partner), another family member, or a friend, and the right to withdraw or deny consent to visitation. Patients have the right to request privacy status (Keeping the patient’s name private from visitors/callers).
4. The hospital will inform patients of clinically necessary or reasonable restriction or limitation that the hospital may need to place on visitation and the reasons for the clinical restriction or limitation, including by posting such restrictions to visitation on its website and throughout the hospitals, if they are broadly applicable.

* A support person is a spouse, family member, same-sex partner, friend or other person who supports you during your stay. With your OK, they may manage visitation on your behalf. You can choose anyone you want to be your support person(s). There is no limit based on race, color, national origin, culture, religion, sex, gender identity, sexual orientation or disability.

Privacy

1. Personal privacy.
2. Expect that all communications and records about your care are kept confidential by the hospital, except when sharing is allowed by you or the law.

Safety

1. Receive care in a safe setting.
2. Not be restrained unless it is medically necessary for your safety and/or the safety of others.

Make your own choices

1. Make informed decisions about your care and treatment. If you can't do so, you may choose to have someone else do it for you.
2. Be involved in your care planning.
3. Refuse care and get information about problems that may happen if you refuse care.
4. Give your written OK before any non-emergency procedure that needs your informed consent.
5. Refuse visitors.
6. Choose a company or organization to provide care you may need after a hospital visit.
7. Make or change advance directives and get care from hospital staff who honor your choices.
8. Choose to not take part in any research project; saying no will not affect your access to our services.

Continued on next page

9. Give your OK for recordings, photos, films or other images we may use inside or outside of the hospital other than those used for identification, quality improvement, security, or treatment.
10. Ask for and receive a quick review and resolution of complaints. If you do not agree with how your complaint is resolved, you can contact:
 - Centers for Medicare and Medicaid Services at Livanta LLC
BFCC0QIO 10820 Guilford Road, Suite 202, Annapolis Junction, MD 20701-1105; 888-524-9900.
 - Ohio Department of Health complaint line 800-342-0553; email HCComplaints@odh.ohio.gov or complete the Complaint form (HEA1685) on-line and submit to the Complaint Unit.
 - For complaints related to the Disease Specific Certifications programs for Stroke and/or Ventricular Assist Devices (VAD), you can contact The Joint Commission at www.jointcommission.org, using the “Report a Patient Safety Event” link or by mail to The Office of Quality and Patient Safety (OPQS), The Joint Commission, One Renaissance Boulevard, Oakbrook Terrace, Illinois 60181.

You can always ask your care team for help with:

1. Making or changing Advance Directives
2. Contacting our Ethics Committee
3. Contacting UH police or security
4. Contacting a chaplain

We value the diversity of every patient and staff member. Therefore, we cannot accommodate requests to change hospital staff based on race, religion, language, sex, ethnicity, national origin, culture, age, sexual orientation, gender identity, job, veteran status or ability.

Patient Rights & Responsibilities

What am I responsible for?

Dignity and Respect

1. Treating hospital staff with dignity, courtesy and respect no matter their race, religion, language, sex, ethnicity, national origin, culture, age, sexual orientation, gender identity, job, veteran status or ability.
2. Maintaining civil language and conduct with all hospital staff.
3. Showing respect for patients, visitors, hospital property and the property of others.
4. Following all hospital rules and policies.

Being Involved in Your Care

1. Providing correct and complete information about your health.
2. Asking us questions when you do not understand something.
3. Following your care plan. You are responsible for the results if you refuse treatment or do not follow your care plan.
4. Giving us all needed information for insurance claims.
5. Paying bills for care that is not covered by your insurance plan.
6. Telling us if you have pain and how well it is helped by treatment.
7. Telling us if you have concerns about your health or changes in the way you feel.
8. Keeping your personal items secure or at home.
9. Keeping appointments, being on time and letting us know if you can't make it.
10. Giving us a current copy of your Advance Directives, if you have them.

Patient Care Advocate Program

How Can Patient Care Advocates Help?

If you have concerns about any part of your care, we encourage you to first talk with your doctor, nurse or other caregiver. If your concerns are not resolved, or you prefer to talk with a third party, our Patient Care Advocates are here to help.

You can freely voice complaints and suggest changes without being subject to coercion, discrimination, reprisal or unreasonable interruption of care, treatment and services. You may contact a Patient Care Advocate by phone, mail, email, fax or in person by making an appointment. Our goal is to acknowledge your concern within one business day.

We can:

- Address questions or concerns you have about your care
- Help you exercise your healthcare rights
- Review patient safety issues
- Clarify hospital policies
- Bridge the gap where you feel your expectations have not been met
- Receive compliments for outstanding doctors and staff members
- Serve as a formal grievance mechanism for you and your family

We hope that through our efforts, you and your family will have a positive experience at University Hospitals.

To contact the Patient Care Advocate Office

Call: 216-844-7502

Email: UHCPatientCareAdvocate@UHHospitals.org

Tips for Working with a Patient Care Advocate

- Be specific about what kind of help you do and don't want.
- Clarify what the Patient Care Advocate can do for you and when to expect follow-up.
- Let the Patient Care Advocate know if you'd like him/her to communicate directly with a family member or friend.

The Grievance Process

If you feel the response to your complaint is unacceptable, you can request a review through the formal grievance process. It is not required but is often helpful to put your grievance in writing.

All grievances are reviewed by a committee of hospital employees who may include doctors, nurses, supervisors, administrators and members of our Quality Center staff. Often the medical record is reviewed and members of the team who cared for the patient are interviewed. Upon completion of the investigation which often takes up to 60 days, a written response is sent to the patient that outlines the findings.

Confidentiality

To protect your privacy, any information you share will remain confidential, unless you authorize us to release it. You may remain anonymous when voicing a concern but it may make investigating the concern difficult.

Advanced Directives

Advance Healthcare Planning

This section is about planning for your health care if you ever become unable to speak up for yourself. This kind of healthcare planning is called Advance Directives. If you have any questions after reading this speak with your doctor, nurse, or social worker.

Sharing Your Wishes and Making Healthcare Choices

Do you know what healthcare treatments you would or would not want if you became too sick to speak for yourself?

- Do your loved ones know what your healthcare wishes are?
- Do you know how to make your wishes known?
- Do you have Advance Directives?

What are Advance Directives?

Advance Directives are legal forms that:

- Tell your loved ones and doctors what to do for you if you get too sick to tell them
- Let you decide ahead of time how you want to be treated
- Name who you want to make healthcare decisions for you if you are too sick to make them yourself
- Can be filled out before a crisis or major illness occurs

The two types of Advance Directives forms are:

- **Living Will:** States what type of healthcare treatments you do or do not want if you were in a coma or terminally ill and not able to express your wishes.
- **Durable Power of Attorney for Health Care (DPOA):** Names the person you want to make healthcare treatment decisions for you if at any time you are too sick to make them yourself. The person you name is called your healthcare agent, or proxy.

What are Some Reasons to Create Advance Directives?

Adults over the age of 18 should think about filling out one or both of these forms because illness or injury can happen at any age. Advance Directives can give peace of mind for you and your loved ones.

If you become too sick to express your wishes about your healthcare treatment, then the choices you made on your Advance Directives will be followed. The person you name as your healthcare agent will make healthcare treatment decisions for you.

Advance Directives are important because they:

- Protect your right to make your own healthcare decisions
- Help your loved one make more informed healthcare decisions on your behalf
- Help healthcare workers know what your wishes are and follow them

Living Will

A Living Will is used only when you are not able to tell doctors what kind of healthcare treatments you do or do not want. A Living Will states your wishes for the care you want at the end of life.

Your Living Will goes into effect only if you are:

- Terminally ill and
- Not able to express your healthcare wishes.

A Living Will is not used if you are able to speak and tell your doctors what types of treatments you do or do not want.

Durable Power of Attorney for Health Care

A Durable Power of Attorney for Health Care is a form that lets you name a person to make healthcare decisions for you if you are too sick to make them for yourself, even if it is only for a short amount of time. This person is called your healthcare agent. Your healthcare agent has the power to accept or refuse healthcare treatment for you only when you are not able to express your own wishes.

Make sure you talk with this person about what your healthcare wishes are. This will help this person speak for you. He or she will be able to make decisions based on what you do or do not want. Get this person's OK before putting his or her name on this form.

Who Can Help Me Fill Out My Advance Directives?

Your nurse, doctor or social worker can help you get and fill out these forms. A lawyer is not needed, but if you have any legal questions you should speak with a lawyer.

Can I Choose Not to Have Advance Directives?

Yes. Although they can be very helpful, you do not have to have Advance Directives. The choice is yours. If you decide at a later time that you would like them, please ask one of your healthcare team members to help you.

Keep in mind that you can always make changes to the forms. You can also cancel them in writing or by telling your doctor or lawyer. If you do this, also ask everyone who has copies of the forms to give them back to you.



What Happens if I Don't Have Advance Directives?

If you don't have Advance Directives and become too sick to make your own healthcare decisions, then your doctor will speak with closely related and available family members about what your wishes would be.

If you want someone other than a family member to make these decisions for you, then you must fill out an Advance Directive.

What if I Already Have Advance Directives?

If you have one or both of these forms, make sure that you give copies to any new doctors that you see and when you enter the hospital. Keep the original forms in a safe place.

Tell your loved ones where they can find them.

If you make any changes to the forms, be sure to tell your healthcare team and family members. Give them the new copies. You should also collect any old copies of the forms and destroy them.

UH honors treatment decisions in valid Advanced Directives and recognizes the rights of patients to choose and refuse treatment. UH supports the rights of patients to make Advance Directives and strongly encourages patients to plan ahead and prepare Advance Directive forms.

To learn more

- Talk with any member of your healthcare team
- Visit these websites:
 - Midwest Care Alliance – ohpco.org
 - Ohio State Medical Association – osma.org
 - Ohio Hospital Association – ohanet.org

Notice of Privacy Practices

Effective Date: September 23, 2013

THIS NOTICE DESCRIBES HOW MEDICAL INFORMATION ABOUT YOU MAY BE USED AND DISCLOSED AND HOW YOU CAN GET ACCESS TO THIS INFORMATION.

PLEASE REVIEW THIS NOTICE CAREFULLY.

If you have any questions about this Notice or would like to file a privacy-related complaint, please contact our Privacy Officer:

UH Privacy Officer

UH Management Services Center

3605 Warrensville Center Road

Mail Stop # MSC 9105

Shaker Heights, Ohio 44122

Phone: 216-286-6362 or

800-227-6934

Email: Compliance@UHhospitals.org

About this Notice

University Hospitals ("UH," "we," "our," or "us") is committed to protecting your medical information ("Medical Information"). This Notice tells you how we may use and disclose your Medical Information. It also describes your rights regarding your Medical Information. We are required by law to maintain the privacy of your Medical Information; give you this Notice of our legal duties and privacy practices regarding your Medical Information; notify you following a breach of your unsecured Medical Information; and follow the terms of our current Notice. The privacy practices described in this Notice will be followed by all healthcare professionals, employees, medical staff, trainees, students, and volunteers of the UH System. At the end of this Notice, you can find a list of the entities in the UH System that follow this Notice and have agreed to participate as an organized healthcare arrangement. A copy of this Notice, as well as specific information about each participant in the UH System, is also listed on our website: visit UHhospitals.org.

UH may use and disclose your Medical Information in the following ways:

The following categories describe different ways that we use and disclose Medical Information without your written permission. A "use" of your Medical Information means sharing, accessing, or analyzing Medical Information within the UH System. A "disclosure" of your Medical Information means sharing, releasing, or giving access to your Medical Information to a person or company outside UH. Not every use or disclosure in a category will be listed. However, all of the ways that we are allowed to use or disclose your Medical Information should fall within one of these categories:

Treatment: We may use and disclose your Medical Information to give you medical care. For example, we may use your Medical Information to write a prescription or treat an injury. We may also share Medical Information about you for treatment purposes with other people or entities in the UH System. To coordinate the different things you need, such as X-rays, lab work, or prescriptions, we may also disclose Medical Information to non-UH healthcare providers.

Payment: We may use and disclose your Medical Information to bill and be paid for your treatment.

For example, we may give your health insurer information about your treatment so your insurer can pay for it. If a bill is overdue, we may give Medical Information to a collection agency to help collect payment. We may also provide Medical Information to other healthcare providers, such as ambulance companies, to assist in their billing efforts.

Healthcare Operations:

We may use and disclose Medical Information for healthcare operations purposes. These uses and disclosures are necessary to make

sure that all of our patients receive quality care and for management purposes. For example, we may use Medical Information to check how well our staff cared for you. We also may disclose information to students for educational purposes. The entities and individuals covered by this Notice also may share information with each other for their joint healthcare operations.

**Appointment and Medication Reminders/
Treatment Options/Health-Related**

Benefits and Services: We may use and disclose Medical Information to contact you with appointment or medication reminders. You may request that we provide such reminders in a certain way or at a certain place. We will try to honor all reasonable requests. We may also communicate to you by newsletters, mailings, e-mail, or other means about treatment options, health related information, disease-management programs, wellness programs, or other communitybased activities in which UH participates.

Patient Directory: We may compile the following directory information about patients receiving inpatient or outpatient services at our hospitals: name; location; general condition; and religious affiliation. This information may be disclosed to clergy or, except for religious affiliation, to any person who asks for a patient by name. You may request that any or all of this information not be disclosed by notifying Patient Access Services at the time you register.

Individuals Involved in Your Care or

Payment for Your Care: We may disclose Medical Information to a person who is involved in your medical care or helps pay for your care, such as a family member or friend. We also may notify your family about your location or general condition or disclose such information to an entity assisting in a disaster relief effort.

Business Associates: We may disclose Medical Information to third parties so that they can perform a job we have asked them to do. For example, we may use another company to perform billing services on our behalf. All of these third parties are required to protect the privacy and security of your Medical Information.

Fundraising: We may contact you to provide information about UH sponsored activities, including fundraising. To do so, we may use your contact information, demographic information, dates of service, department of service, treating physician, health insurance status, and outcome information. You have the right to opt-out of future fundraising communications. We will process your request promptly but may not be able to stop contacts that were initiated prior to receiving your opt-out request.

Lawsuits and Disputes: If you are involved in a lawsuit or a dispute, we may disclose Medical Information in response to a court or administrative order. Under certain circumstances, we also may disclose Medical Information in response to a subpoena or discovery request by someone else involved in the dispute.

Personal Representative: If you have a personal representative, such as a legal guardian, we will treat that person the same as you with respect to disclosures of your Medical Information. If you die, we may disclose Medical Information to an executor or administrator of your estate to the extent that person is acting as your personal representative.

Research: Under certain circumstances, we may use and disclose Medical Information for research purposes. All UH research is approved through a special review process to protect patient safety, welfare and confidentiality. This process evaluates a proposed research project and its use of Medical Information to balance

the benefits of research with the need for privacy of Medical Information. Even without special approval, we may permit researchers to look at records to help them identify patients who may be included in their research project or for similar purposes, so long as they do not remove or take a copy of any Medical Information.

As Required by Law: We will disclose your Medical Information when required to do so by international, federal, state or local law.

To Avert a Serious Threat to Health or Safety: We may use and disclose Medical Information when necessary, in our professional judgment, to prevent a serious threat to your health and safety or the health and safety of the public or another person.

Public Health Purposes: We may disclose Medical Information for public health purposes. Some examples of these purposes are reporting:

- births and deaths;
- communicable diseases to health officials;
- child abuse or neglect; or
- elder abuse, neglect or exploitation.

Organ and Tissue Donation: If you are an organ or tissue donor, we may release Medical Information to organizations that handle organ procurement or organ, eye or tissue transplantation or to an organ donation bank, as necessary, to facilitate organ or tissue donation and transplantation.

Workers' Compensation: We may disclose Medical Information for Workers' Compensation or similar programs that provide benefits for work-related injuries or illness.

Health Oversight Activities: We may disclose Medical Information to a health oversight agency for authorized government review of the healthcare system, civil rights and privacy laws, and compliance with government programs.

Law Enforcement: We may disclose Medical Information to law enforcement officials. Some examples of these types of disclosures are:

- in response to a valid court order, subpoena or search warrant;
- to identify or locate a suspect, fugitive or missing person; or
- to report a crime committed on UH premises.

National Security and Intelligence Activities and Protective Services: We may disclose Medical Information to authorized federal officials for intelligence and other national security activities permitted by law.

Coroners, Medical Examiners and Funeral Directors: We may disclose Medical Information to coroners, medical examiners or funeral directors so they can do their jobs.

Special Protections for HIV, Alcohol and Substance Abuse, Mental Health and Genetic Information: Special privacy protections apply to HIV-related information, alcohol and substance abuse treatment information, mental health information, and genetic information. This means that parts of this Notice may not apply to these types of information because stricter privacy requirements may apply. UH will only disclose this information as permitted by applicable state and federal laws. If your treatment involves this information, you may contact our Privacy Officer to ask about the special protections.

Other Uses of Medical Information: Other uses and disclosures of Medical Information not covered by this Notice or the laws that apply to us will be made only with your written authorization. For example, most uses and disclosures of psychotherapy notes, uses and disclosures of Medical Information for marketing purposes, and disclosures that constitute a sale of Medical Information require your written authorization. You

may cancel that authorization at any time by sending a written request to our Privacy Officer. We are unable to take back any disclosures we have already made with your authorization.

UH participates in the Ohio Health

Information Partnership: University Hospitals participates in CliniSync, a Health Information Exchange operated by the Ohio Health Information Partnership. Through CliniSync, participating UH providers may exchange the Medical Information of patients with other healthcare providers throughout the State of Ohio that also participate in CliniSync.

For example, if you regularly see a UH physician that participates in CliniSync, and then visit the emergency room of a Cincinnati hospital that also participates in CliniSync, the physicians in Cincinnati would be able to access your UH Medical Information. Patients may withdraw from participation in the Health Information Exchange by contacting the UH Privacy Officer at 216-286-6362. UH participates in CliniSync voluntarily, and does not warrant or guarantee that any particular Medical Information will be accessible via CliniSync.

Your Medical Information Rights

The records we maintain about your health care are the property of UH. To protect your privacy, we may check your identity when you have questions about treatment or billing issues. We will also confirm the identity and authority of anyone who asks to review, copy or amend Medical Information or to obtain a list of disclosures of Medical Information as described below. These are your specific rights, subject to certain limitations, regarding Medical Information we maintain about you.

Right to Obtain a Paper Copy of This

Notice: You have the right to a paper copy of this Notice at any time. Even if you have agreed to receive this Notice electronically, you are still entitled to a paper copy.

Right to Inspect and Copy: In general, you have the right to inspect and copy your Medical Information. If you request a copy of your Medical Information, we may charge a reasonable fee for the costs of labor, postage and supplies associated with your request. If the Medical Information you request is maintained electronically, we will provide you access to the Medical Information in an agreed-upon electronic format.

We may deny your request to inspect, copy or send Medical Information in certain limited circumstances. If you are denied access to Medical Information, you may request that the denial be reviewed.

Right to Request Amendments:

If you feel that Medical Information we have about you is incorrect or incomplete, you may ask us to amend the information or to make an addition to your record. You have the right to request this for as long as we maintain the information. To request an amendment, please submit your written request, along with a reason that supports it, to our Privacy Officer.

If we accept your request, we will tell you and will amend your records. We cannot take out what is in the record, but we will supplement the information. If we deny your request for amendment, you may submit a statement of disagreement, to which UH may choose to respond in writing. In addition, you have the right to request that UH send a copy of your amendment request and your statement of disagreement (if any) with any future disclosures of your Medical Information.

Right to an Accounting of Disclosures:

You have the right to request a list of certain of our disclosures of your Medical Information. The first list you request in a 12-month period will be free. For additional lists, we may charge you for the costs of providing the list. To request an accounting of disclosures, please

submit your request to our Privacy Officer using the contact information above.

Right to Request Restrictions: You have the right to request a restriction or limitation on the Medical Information we use or disclose about you for treatment, payment or healthcare operations. You also have the right to request that we disclose a limited amount of Medical Information to someone involved in your care or involved in payment for your care. We are not required to agree to your restriction request. If we do agree, we will notify you in writing and will honor our agreement unless we need to use or disclose the information to provide emergency treatment to you or if the law requires us to disclose it.

We will agree to your request to restrict disclosure of your Medical Information to a health plan if the disclosure is for the purpose of payment or healthcare operations; is not otherwise required by law; and the Medical Information you wish to restrict pertains solely to a healthcare item or service for which you, or someone other than your health plan, has paid in full.

Right to Request Confidential Communications:

You have the right to request that we communicate with you about health matters in a certain way or at a certain location. For example, you can ask that we only contact you at work or by e-mail. We will honor all reasonable requests. However, if we are unable to contact you using your requested methods or locations, we may contact you using any information we have.

Right to Notice of a Breach of Certain

Medical Information: We are required to notify you by first class mail or e-mail (if you have told us you prefer to receive information by e-mail), of a breach of your Medical Information. A breach is any unauthorized acquisition, access, use, or disclosure of certain categories of Medical Information that compromises the security or privacy of this Medical Information.

Changes to this Notice

We reserve the right to change this Notice. We reserve the right to make the revised or changed Notice effective for Medical Information we already have as well as any information we receive in the future. We will post a copy of the current Notice at each UH hospital, physician office and outpatient location and on our website. The beginning of our Notice will contain the Notice's effective date.

Complaints

You may file a written or verbal complaint with us if you believe your privacy rights have been violated. If you have any privacy-related questions or complaints, please contact our Privacy Officer using one of the methods listed above. You may also file a complaint with the Secretary of the U.S. Department of Health and Human Services. We support your right to privacy of your Medical Information and you will not be penalized for filing a complaint.

The following entities have adopted and agree to follow the standards listed in this Notice:

UH Cleveland Medical Center
UH Ahuja Medical Center
UH Beachwood Medical Center
UH Conneaut Medical Center
UH Elyria Medical Center
UH Geauga Medical Center, a campus of UH Regional Hospitals
UH Geneva Medical Center
UH Home Care Services
UH Laboratory Services Foundation
UH Lake West Medical Center
UH MacDonald Women's Hospital
UH Medical Group
UH Medical Practices
UH Parma Medical Center
UH Physician Services
UH Portage Medical Center
UH Rainbow Babies and Children's Hospital
UH Samaritan Medical Center
UH Seidman Cancer Center
UH St. John Medical Center, A Catholic Hospital
UH TriPoint Medical Center
All wholly-owned subsidiaries of University Hospitals Health Systems

