



Lumicera Health Services patients have a right to be notified in writing of their rights and obligations before care/service is begun. Lumicera staff members have a responsibility to protect and promote the rights of their patients. This includes their patients' care and treatment, and the services that are provided within their capability. Care is provided in compliance with applicable laws, regulations and standards, including the following rights.

YOU HAVE THE RIGHT TO:

- Be fully informed ahead of time about services and care to be provided. This includes information about any modifications to the care or service plan.
- Be treated with dignity, courtesy and respect. Lumicera staff should recognize that each person is a unique individual.
- Speak to a health professional.
- Receive information about the scope of care/services that are provided Lumicera Health Services directly or through contractual arrangements. This includes the right to receive information about the patient management program. Also, you have the right to administrative information regarding changes in the patient management program or termination of the patient management program.
- Know about Lumicera's philosophy and characteristics of the program. This includes knowing about potential health benefits and limitations of the services you require.
- Reasonable coordination and continuity of services from your previous specialty pharmacy to Lumicera Health Services. This means that you will get a timely response when you ask about care, treatment and services.
- Be notified when you begin receiving care or services with an explanation of charges for care, treatment, services and equipment. This should include how to make a payment for charges for which you may be responsible. You should also get information about any payments from Medicaid or Medicare or any other third-party payer. You should also get an explanation of all forms you are requested to sign.
- Receive quality medications, infusion equipment, supplies and services that meet or exceed professional and industry standards. You should get these regardless of race, religion, political belief, sex, social or economic status, age, disease process, DNR status or disability. These items should always be received in accordance with physician orders.
- Receive medications, treatment and services from qualified personnel. You have the right to receive instructions on self-care, safe and effective operation of equipment and your responsibilities regarding medications, equipment and services.



- Confidentiality and privacy of all the information contained in your records and of Protected Health Information (except as otherwise provided for by law or third-party payer contracts). You can review and even challenge those records. You have the right to have your records corrected for accuracy.
- Receive information about who gets your personal health information. You also have the right to know when your personal health information was disclosed. This is according to applicable law and as specified in the company's policies and procedures.
- The right to have personal health information shared with the patient management program only in accordance with state and federal law
- Express dissatisfaction, concerns or complaints about any care, treatment or service and report any suspected errors. You can also suggest changes in policy or care and services without discrimination, reprisal, coercion or unreasonable interruption of care and services.
- Have concerns, complaints and dissatisfaction about services that are or are not furnished looked into in a timely manner.
- Be advised of any change in the plan of service before the change is made.
- Receive information in a manner, format or language that you understand.
- Get the name and job title of the person providing you with service.
- Request to speak to the supervisor of the person providing you with care.
- Have family members involved in care, treatment, and/or service decisions. This is only when it is appropriate and when it is allowed by law. You must provide your permission or we must have the permission of the decision maker that you chose.
- Be fully informed of your responsibilities.
- Decline participation, revoke consent or disenroll in the patient management program at any time.

YOU HAVE THE RESPONSIBILITY TO:

- Follow the plan of treatment or service prescribed by your physician.
- Help develop a plan for your care, treatment and services.
- Provide truthful and complete medical and personal information, and to notify the patient management program of changes in this information. This is necessary to plan for and provide care and services.
- Complete and submit any forms that are necessary for your care.



- Ask questions about your care, treatment and/or services. We can clarify any instructions you have received about your medications.
- Let us know any information, concerns and/or questions about your health or problems you see in adhering to your medication. Also tell us about any unexpected changes in your condition.
- Let your treating providers know that you're participating in the Lumicera Specialty program.
- Notify Lumicera if you are going to be unavailable to receive your medication.
- Treat Lumicera personnel with respect and dignity. Interact with them without discrimination because of their color, religion, gender, or national or ethnic origin.
- Care for and safely use medications, supplies and/or equipment. Follow the instructions provided. Use the drugs, supplies and equipment for the purpose it was prescribed and only for the person on the prescription.
- Let us know about any concerns you may have about following the instructions or using the equipment provided.
- Protect equipment from fire, water, theft or other damage. You agree not to transfer or allow your equipment to be used by any other person without getting Lumicera's written consent. You also agree not to modify or attempt to make repairs of any kind to the equipment. Modifying equipment or attempting equipment repairs releases the company from any liability related to the equipment and its uses, and from any resulting negative customer outcomes.
- Pay for equipment rental charges that your insurance company or companies does not cover, unless that goes against federal or state law. You are responsible to make payments on time and to pay the full amount unless you have already made other arrangements with Lumicera.
- Provide accurate clinical and contact information. Let us know if there are any changes in your physical condition. You should also tell us if there are changes to your prescription or insurance coverage. Tell Lumicera right away if your address or telephone number changes, even if the change isn't permanent.
- Voice your feedback, concerns or complaints or report errors regarding your specialty drug services. We welcome your input and want to hear and act on this information with a polite and quick response. Ensuring quality and safe care, correcting errors, and preventing future issues are top priorities.



CUSTOMER INFORMATION:

- After-Hours Services:
 - An answering service will answer Lumicera Health Service's phones after normal business hours. You may leave a message or inform the operator that you wish to speak to a company representative and the on-call staff will be contacted.

- Complaint Procedure:
 - You have the right and responsibility to express concerns, dissatisfaction, report any suspected errors, or make complaints about services you do or do not receive. You have this right without fear of reprisal, discrimination or unreasonable interruption of services. The company corporate office telephone number is (855) 847-3553.
 - Lumicera Health Service has a grievance procedure that ensures that your concerns/complaints shall be reviewed and an investigation started within 5 business days of receipt of the concern/complaint. Every attempt shall be made to resolve all grievances within 30 days. You will be informed in writing of the resolution of the complaint/grievance. If more time is needed to resolve the concern/complaint, you will also be informed verbally and in writing.

- Procedure to Opt-Out of Patient Management Program:
 - If you should not wish to be part of the patient management program please feel free to contact us at 855-847-3553 to opt out of the program.
 - Opting out of the patient management program will not affect the specialty medication services we provide to you.