

# UCI Health

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## Outpatient Specialty Pharmacy



## Welcome

[ucihealth.org/specialtypharm](https://ucihealth.org/specialtypharm)





# Outpatient Specialty Pharmacy

UCI Medical Center  
101 The City Drive South  
Pavilion 4, Building 25  
Orange, CA 92868

## **Hours**

Monday–Friday  
8 a.m.–7 p.m.

Closed on university holidays  
24/7 pharmacy support available

## **Phone**

888-267-9095, option 2

## **Fax**

714-509-2484



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# Welcome

Dear patient,

Welcome to UCI Health Outpatient Specialty Pharmacy. We appreciate the opportunity to serve you for all of your specialty pharmacy needs. Our program is designed to provide patient care that is integrated with your healthcare providers. We work collaboratively to make sure you have continued access to specialty medications for your complex medical condition.

We are dedicated to providing you with the personal service necessary to ensure that you achieve the most benefit from your therapy. This welcome packet describes the services we offer, including:

- Enrollment in our Patient Management Program (PMP). This program helps you:
  - Manage side effects
  - Take your medications correctly
  - Improve overall health
- Ongoing communication with your healthcare providers
- Coordination with your insurance company for medication coverage
- Financial assistance based on your needs
- Training and education in person or by phone
- Refill reminders
- Free delivery of your medication
- Access to pharmacists 24 hours a day, 7 days a week (including weekends and holidays)

We look forward to providing you with the best service possible. If you have any questions or comments, please call us at [888-267-9095](tel:888-267-9095).

You may also visit us online at [ucihealth.org/specialtypharm](https://ucihealth.org/specialtypharm).

Thank you for choosing us as your specialty pharmacy!

Sincerely,

UCI Health Outpatient Specialty Pharmacy

# Our mission

At UCI Health Outpatient Specialty Pharmacy, our mission is to provide unparalleled pharmacy services with individualized patient care, continuous care coordination with healthcare providers and tailored financial assistance. We bridge the gaps in care as we aim to optimize therapy and improve patient outcomes.

## What to expect

### Personalized patient care

Our staff works with you to help you:

- understand your treatment plan
- understand your medication
- improve your health with your therapy

### Collaboration with your healthcare providers

We work with your healthcare providers to quickly resolve any issues or barriers to your treatment.

### Routine follow-up

Enrollment in our Patient Management Program is voluntary and provided to you at no cost. Our staff regularly reaches out to you to make sure you are:

- tolerating your medication well
- getting your refills on time
- getting the help you may need throughout your treatment

### Benefits and financial assistance

Specialty medications can be expensive. Here is how we can help:

- We help you explore all your options.

- We provide information on your prescription insurance benefits.
- We help you apply for financial assistance programs.

### Pharmacy Network Status

We will let you know if we are an out-of-network pharmacy, the changes in cost, and can give you the cash price of the medication if asked.

### Delivery

We offer fast and convenient delivery to your home, workplace or the location you prefer. Our staff contacts you to set up the way in which you want to receive your medication. Other options include: pickup at the pharmacy or delivery to you in clinic.

### 24/7 support

Our pharmacy staff is available 24 hours a day, 7 days a week. We are always here to answer any questions or address any concerns you may have.



# When to contact us



To help us provide you with the highest quality care, please contact us if:

- You have any questions or concerns about your medication
- You experience an allergic reaction to, or side effect from, your medication
- There is a change in your medication use
- Your contact information or delivery address has changed
- Your insurance information or payment source has changed
- You need to check the status of your prescription
- You need to check the status of your delivery
- You need to reschedule your delivery
- There is a delay in receiving your medication
- You have a question about storage conditions
- If you think that a medication error has been made
- You have any questions or concerns about our specialty pharmacy service

Please contact your physician if you have any concerns about your health.  
If you need immediate attention, please visit the Emergency Department.  
In case of emergency, please call 9-1-1.

# Payment policy

Some medications are not fully covered by your insurance or other third-party sources. Before your care begins, our staff will tell you how much you are responsible for paying. Your out-of-pocket costs may include, but are not limited to, deductibles, co-payments, co-insurance and annual out-of-pocket limits. We will provide this information each time your medication is filled and if there is a change in your insurance plan.

## Methods

### Insurance claims

UCI Health Outpatient Specialty Pharmacy bills your health insurance on the date your prescription is filled. If your insurance will not pay for your medication, our staff will let you know. We can work together to resolve the issue.

### Co-payments

You may be required to pay a part of your medication cost, called a co-payment. If you have a co-payment, it must be paid at the time of shipping or pickup. We accept payment by cash, credit card (Visa®, MasterCard®, American Express® and Discover®) and check.

### Financial assistance

We make sure there are no financial barriers to getting your medication. Our staff presents all financial assistance options available to you. We help you apply for all programs, including:

- drug coupons
- assistance from drug manufacturers
- funding from foundations

# Services offered

UCI Health Outpatient Specialty Pharmacy provides services in many different areas, such as:

- Bone disorders
- Dermatological conditions
- Endocrine disorders
- Gastrointestinal conditions
- Neuromuscular conditions
- Oncology
- Rheumatological inflammatory conditions
- Viral hepatitis

# Important information

## Patient Management Program (PMP)

We monitor your medications and progress through a patient management program. The program is tailored to your disease and your needs. This program is designed to:

- Assess your response to treatment
- Improve your overall health and satisfaction
- Increase adherence to drug therapy
- Manage side effects
- Review all your current medications

You, your physician, and pharmacist will work together to come up with the treatment plan. You must be willing to follow this treatment plan.

This service is provided to you at no cost. Your participation is voluntary. If you no longer wish to participate, please contact our team to opt out.

## Side effects

If you are experiencing adverse effects or an allergic reaction to your medication, please contact your physician or UCI Health Outpatient Specialty Pharmacy as soon as possible.

If you need immediate attention, please visit the Emergency Department. In case of emergency, please call 9-1-1.

## Fill a Prescription

If you have a new prescription, we will let you know when your prescription has been approved and ready to be filled. If you have a question about filling your prescription, please call us.

## Medication refills

Our staff will contact you five to seven days before your refill date. If you would like to contact us for a refill, please call **888-267-9095** to speak to a member of our pharmacy staff.

## Prescription transfers

If you feel that UCI Health Outpatient Specialty Pharmacy is unable to meet your needs, we can transfer your prescription to the appropriate pharmacy of your choice.

If we can no longer service your medication, a pharmacist will transfer your prescription to a specialty pharmacy that can. We will inform you of this transfer of care.

## Medication delivery and storage

We deliver the medication at no cost to you. We can deliver to your home, doctor’s office, or other preferred location. Upon request, we can also include other supplies, such as a sharps container. We make sure that you or an adult caregiver is available to receive the medication shipments. A signature may or may not be required for the delivery. You may choose to sign for each shipment.

Some medications require refrigeration. We send these medications in special packaging that will keep your medications at the appropriate temperature. Once you receive the package, take the medication out of the box and place it in the refrigerator.

If the package looks damaged or is not in the correct temperature range, please call us.

If there is an order delay, we will reach out to you. We will help you get the medication elsewhere if necessary.

## Drug substitution protocols

From time to time, it is necessary to substitute generic drugs for brand name drugs. This can occur if your insurance company prefers you to use the generic or to reduce your co-payment.

If a substitution is necessary, our staff will tell you about the change before shipping the medication.

## Drug recalls

If your medication is recalled (needs to be sent back), we will contact you with further instructions as directed by the U.S. Food and Drug Administration or the drug manufacturer.

## Proper disposal of sharps

Place all needles, syringes and other sharp objects into a sharps container. If you are prescribed an injectable medication, you may request a sharps container from us.

Check with your local waste collection service on disposal requirements. You may also visit the following website for more information: [safeneedledisposal.org](http://safeneedledisposal.org)

## Proper disposal of unused medications

For instructions on how to properly dispose of unused medications, check with your local waste collection service. You may also check the following websites for additional information:

- [www.fda.gov/forconsumers/consumerupdates/ucm101653.htm](http://www.fda.gov/forconsumers/consumerupdates/ucm101653.htm)
- [www.fda.gov/drugs/resourcesforyou/consumers/buyingusingmedicinesafely/ensuringsafeuseofmedicine/safedisposalofmedicines/ucm186187.htm](http://www.fda.gov/drugs/resourcesforyou/consumers/buyingusingmedicinesafely/ensuringsafeuseofmedicine/safedisposalofmedicines/ucm186187.htm)

## Emergency disaster information

In the event of a disaster in your area, please contact UCI Health Outpatient Specialty Pharmacy with delivery instructions for your medication. This will ensure that your therapy is not interrupted.

## Concerns or suspected errors

We want you to be completely satisfied with the care we provide. If you have any issues with your medication, the services rendered or any other issues related to your order, please contact us directly.

Patients and caregivers have the right to make complaints and give feedback on services to UCI Health Outpatient Specialty Pharmacy. Patients and caregivers can do this by phone, fax, in writing or by email. We will address your concern within five business days.

You may also contact the following organizations:

- **California State Board of Pharmacy**  
Website: [pharmacy.ca.gov/consumers/complaint\\_info.shtml](http://pharmacy.ca.gov/consumers/complaint_info.shtml)  
Phone: 916-574-3100
- **URAC**  
Website: [urac.org/file-a-complaint/](http://urac.org/file-a-complaint/)  
Email: [grievances@urac.org](mailto:grievances@urac.org)  
Phone: 202-216-9010
- **ACHC**  
Website: [achc.org/contact/complaint-policy-process](http://achc.org/contact/complaint-policy-process)  
Phone: 855-937-2242

## Community resources

Please visit our website at [ucihealth.org/communityresources](http://ucihealth.org/communityresources)



# Patient bill of rights and responsibilities

## Patients' rights

As a patient, you have the right to:

1. Considerate and respectful care, and to be made comfortable. This includes respect for personal values and beliefs and access to pastoral care to meet spiritual needs.
2. Request the services of an interpreter if needed, at no cost.
3. Have a family member or representative of your choice and your own physician notified promptly of your admission to the hospital.
4. Know the name of the physician/provider who has primary responsibility for coordinating your care and the names and professional relationships of other physicians and non-physicians who will see you.
5. Receive information about your health status, course of treatment, prospects for recovery and outcomes of care (including unanticipated outcomes) in terms you can understand. You have the right to participate in the development and implementation of your plan of care. You have the right to participate in ethical questions that arise in the course of your care, including issues of conflict resolution, withholding resuscitative services and forgoing or withdrawing life-sustaining treatment.
6. Participate actively in decisions regarding your medical care, and receive as much information about any proposed treatment or procedure as you may need in order to give informed consent or to refuse a course of treatment. Except in emergencies, this information shall include a description of the procedure or treatment, the medically significant risks involved, alternate courses of treatment or non-treatment and the risks involved in each, and the name of the person who will carry out the procedure or treatment.
7. Request or refuse treatment, to the extent permitted by law. However, you do not have the right to demand inappropriate or medically unnecessary treatment or services. You have the right to leave the hospital even against the advice of physicians, to the extent permitted by law.
8. Be advised that if the physician/provider proposes to engage in or perform research and clinical trials affecting your care or treatment, you have the right to refuse to participate in such research projects and your decisions will not affect your care.
9. Reasonable responses to any reasonable requests made for service.
10. Have an appropriate assessment and management of your pain, information about pain and pain relief measures, and to participate in pain management decisions. You may request or reject the use of any of all modalities to relieve pain, including opiate medication, if you suffer from severe chronic intractable pain. The doctor may refuse to prescribe the opiate medication, but if so, must inform you that there are physicians who specialize in the treatment of severe chronic intractable pain with methods that include the use of opiates.



11. Prepare advance directives. You have the right to give instructions about your own healthcare. You also have the right to name someone else to make decisions for you, including designating a healthcare decision-maker. You may designate a decision-maker if you wish to have someone else make treatment decisions for you or in the event you become incapable of understanding a proposed treatment or become unable to communicate your wishes regarding care. Physicians/providers who provide care in the healthcare facility shall comply with these directives. All patients' rights apply to the person who has legal responsibility to make decisions regarding medical care on your behalf.
12. Have personal privacy respected. Case discussion, consultation, examination and treatment are confidential and should be conducted discreetly. You have the right to be told the reason for the presence of any individual. You have the right to have visitors leave prior to examination and when treatment issues are being discussed. Privacy curtains will be used in semi-private rooms.
13. Confidential treatment of all communications and records pertaining to your care. Written permission shall be obtained before medical records are made available to anyone not directly concerned with your care, except as otherwise required or permitted by law.



14. Access information contained in your records within a reasonable time frame, except in certain circumstances specified by law.
  15. Receive a written “Notice of Privacy Practices” that explains how your protected health information (PHI) is disclosed. PHI is defined as any clinical health information related to a patient’s past, present or future physical or mental health condition that is obtained by any healthcare provider, either verbally, in writing or electronically, and that also includes information that identifies or reasonably identifies an individual.
  16. Receive care in a safe setting, free from verbal or physical abuse or harassment. You have the right to access protective services,
- including notifying government agencies of neglect or abuse.
17. Be free from restraints and seclusion of any form used as a means of coercion, discipline, convenience or retaliation by staff.
  18. Receive reasonable continuity of care and to know in advance the time and location of your appointments as well as the identity of the persons providing the care.
  19. Be informed by the physician/provider of continuing healthcare requirements following discharge from the hospital. Upon your request, a friend or family member may also be provided this information

20. Designate visitors of your choosing, if you have decision-making capacity, whether or not the visitor is related by blood or marriage, unless:
  - a. No visitors are allowed
  - b. The facility reasonably determines that the presence of a particular visitor would endanger the staff or other visitor to the healthcare facility, or would significantly disrupt the operations of the facility
  - c. You have told the healthcare facility staff that you no longer want a particular person to visit

However, a healthcare facility may establish reasonable restrictions upon visitation and the number of visitors. You will have your wishes considered, if you lack decision-making capacity, for the purposes of determining who may visit. The method of that consideration will be disclosed in the medical center policy on visitation.

21. Examine and receive an explanation of the medical center’s bill regardless of the source of payment.
22. Exercise these rights without regard to sex, economic status, educational background, race, color, religion, ancestry, national origin, sexual orientation, marital status or the source of payment for care.

23. Express concerns or complaints about your care with the assurance that the quality of your care or future access to care will not be compromised. You have the right to expect a reasonable and timely response to your concerns.
24. To report concerns about patient safety and quality of care at UCI Health. To do this, call Patient Experience at **714-456-7004** or write to:

**Patient Experience**

UCI Health  
P.O. Box 14091  
Orange, CA 92868-4091

You have the right to be informed of the outcome of the grievance investigation. If your concerns remain unresolved, please contact The Joint Commission toll-free Monday–Friday at **800-994-6610** from 6:30 a.m.–3 p.m. (PDT). To file a concern with California’s Department of Public Health, call **714-567-2906** or toll-free at **800-228-5234** or write to:

**California Department of Public Health**

681 S. Parker St.  
Suite 200  
Orange, CA 92868





## Patients' responsibilities

As a patient, you need to know about your responsibilities because you are an important member of your healthcare team.

It is the patient's responsibility to:

- Follow UCI Health rules and regulations affecting patient care and conduct.
- Be considerate of UCI Health facilities and equipment. Do not abuse them.
- Respect the rights and property of other patients and personnel. Limit your visitors, follow smoking regulations and use the telephone, television and lights courteously so that you do not disturb others.
- Give accurate and complete information about your health to the physicians and other healthcare professionals caring for you.
- Be informed and ask questions. Your healthcare provider may not know when you're confused or uncertain or want more information.
- Follow the treatment plan recommended by the healthcare provider responsible for your care. It is your responsibility to tell your healthcare provider whether or not you can and want to follow the treatment plan recommended for you.
- Understand how to continue your care after you leave the medical center, including when and where to get further treatment and what you need to do at home to help you with your treatment.
- Accept the consequences of your decisions and actions if you refuse treatment or choose not to comply with the instructions given by your healthcare provider.
- Keep appointments and cooperate with your healthcare provider. If you need to cancel an appointment, you should do so at least 24 hours before your appointment time.
- Pay bills on time to ensure that your financial obligations for your healthcare are fulfilled. You are responsible for working with your account representative to make payment arrangements and for providing information needed to determine how your medical center bill will be paid.

If you have questions or concerns, please call us at 888-267-9095.

## UCI Health Outpatient Specialty Pharmacy patients' rights and responsibilities



As a patient, you have:

- The right to know about philosophy and characteristics of the Patient Management Program.
- The right to have personal health information shared with the Patient Management Program only in accordance with state and federal law.
- The right to identify the program's staff members, including their job title, and to speak with a staff member's supervisor if requested.
- The right to speak to a health professional.
- The right to receive information about the program.
- The right to receive administrative information regarding changes in, or termination of, the program.
- The right to decline participation, revoke consent or end enrollment at any time.
- The responsibility to submit any forms necessary to participate in the program, to the extent required by law.
- The responsibility to give accurate clinical and contact information and to notify the program of changes in this information.
- The responsibility to notify their treating provider of their participation in the program, if applicable.

## Notes



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