Patient Information

For Specialty Pharmacy Patients



What we do

Our specialty pharmacy supports YVFWC patients in Washington and Oregon who take medications that qualify as Specialty medications. Specialty medications are medications that can be used to treat complex or chronic conditions. Examples of these conditions are Rheumatoid Arthritis, Multiple Sclerosis, and Psoriasis. We work with your healthcare team to deliver service based on your needs.

What makes our pharmacy different?

Our goal is to help you get the best from your medication.

We will assist by:

- Working with you, your doctor, and your insurance to manage costs
- Providing the highest quality of care possible
- Sharing expert health information

We enroll all specialty pharmacy patients in a program:

- Our pharmacist will give you an initial assessment
- We'll teach you how to take your medication
- We'll tell you about any potential side effects
- We'll provide you with access to specialized medicines that are not available at local pharmacies
- We'll check for any possible drug interactions and drug allergies
- We'll listen to your concerns and find the right way to serve you

Questions? Call your pharmacists 24/7 at (509) 249-4606.

Your part in this program includes outreach calls, health updates, and taking your medication as instructed.

If you wish to opt out, let us know anytime.

Eligibility

The specialty pharmacy is available to patients with prescriptions to treat the following conditions:

- Lung Disorders
- Skin Disorders
- Growth Disorders
- Hepatitis
- Inflammatory Bowel Disorders
- Migraine
- Movement Disorders
- Multiple Sclerosis
- Osteoporosis
- Arthritis Disorders

How to get services

Phone

(509) 249-4606

Monday - Friday from 8:00 AM to 5:00 PM.

Closed for the following holidays:

- New Year's Day
- President's Day
- Memorial Day
- Independence Day
- Labor Day
- Thanksgiving Day
- Day After Thanksgiving
- Christmas Day

Our pharmacists are available 24/7 including holidays and weekends. If you call when we're closed, you can speak to an on-call pharmacist or leave a voice message, and a staff member will contact you. Always dial 911 for emergencies.

Online

You can use MyChart to message your pharmacist. To get started with MyChart, visit MyChart.YVFWC.org

Filling Prescriptions, Order Status, and Requesting Refills

You can ask your doctor to send a prescription or referral. If possible pharmacy can set up 90-day supplies on your prescriptions. Pharmacy can automatically start a refill for you and will always call you to confirm the delivery before shipping.

You can request refills, transfer prescriptions, and check on orders:

Phone: (509) 249-4606Online: through MyChart

How will you get your prescriptions?

Free mail delivery to your home is your best option! You will always have your medication with our free delivery.

When you receive your mail delivery:

- Review the contents
- Ensure your order is correct
- Confirm your order is complete
- Properly store your medication as soon as possible.

Contact us at (509) 249-4606 within one business day to report missing or damaged contents.

Emergency Access to Medications

If emergencies make getting your medications difficult, call us at (509) 249-4606 for assistance.

We will work extra in natural disasters to fill your prescription needs and ensure you have enough medication.

We will deliver your medication by FedEx or USPS the next day during severe weather or other emergencies. We can also transfer your prescription to another pharmacy, so you do not go without medication.

If a local disaster occurs and the pharmacy cannot reach you, or you cannot reach the pharmacy:

- Listen to local news and rescue centers for advice on obtaining medication, or
- Visit your local hospital immediately



Medication Substitutions and Unavailable Medications

Our team will work with you and your doctor to find the best medication for your needs. You have the right to refuse a medication substitution. If we cannot fill your prescription, we will work with you to find a nearby pharmacy to serve you instead.

Medication Recalls

Sometimes, a drug company will recall a medication. We will contact you about any recall that requires you to stop taking the medication immediately. We will work with your doctor to replace the medication or find alternatives if necessary. We are always available to answer questions about recalls.

Disposal of Medications

You must safely dispose of medication to reduce the risk of misuse or accidental exposure. Please do not dispose of drugs in the trash or flush them down the toilet. To dispose of most unused or expired medicines (both prescription and over-the-counter), drop them off at an authorized drug take-back site. Go to med-project.org to find information about drug take-back sites near you.

Used needles for injectable medications require special care and disposal. Go to safeneedledisposal.org to find out how to dispose of used needles in your area.

Questions or Problems

We are here to help. Feel free to ask for the Specialty Pharmacy Director if you cannot resolve your concern with the available team. The Specialty Pharmacy Director will contact you if you must leave a message.

Medication Reactions, Concerns, or Errors

For any life-threatening conditions, call 911 immediately.

Don't hesitate to contact us if you notice any errors, such as the wrong drug, dose, or directions. We will investigate and correct the mistake.

Call us at (509) 249-4606 or through your MyChart patient portal. You can also contact your doctor.

Contact us:

- If you have questions or concerns about your medication
- If you suspect a reaction or allergy to your medication
- If you have a change in your medication use
- If you have moved or changed your contact information
- If your insurance information or payment method has changed
- If you need to check the status of your order, discuss an order delay, or reschedule your delivery
- If you want information about your insurance claims

You may take a feedback card from the front lobby at your YVFWC clinic and use the contact information provided.

Contact options include:

 Mail: Quality Department, P.O. Box 190, Toppenish, WA 98948

• Phone: (509) 865-6175, ext. 2477

• Fax: (509) 865-3148

Email: concerns@yvfwc.org

We are committed to high-quality care and hope you allow us to hear and resolve your concerns. But if you choose not to, you may also contact The Joint Commission, state pharmacy regulators, or the other national accrediting bodies.



Washington State

- Mail: Health Systems Quality Assurance Complaint Intake P.O. Box 47857 Olympia, WA 98504-7857
- Phone: Washington State Pharmacy Quality Assurance Commission (360) 236-4946.
- Email: all complaint-related questions to HSQAComplaintIntake@doh.wa.gov

Oregon

- Phone: Oregon Board of Pharmacy (971)-673-0001
- Online: Complete and submit the Oregon Board of Pharmacy online complaint form at https://www.oregon.gov/pharmacy/Pages/Complaint.aspx.
- Email: all complaint-related questions to pharmacy.compliance@bop.oregon.gov

Accrediting Bodies

The Joint Commission

- Mail: Office of Quality and Patient Safety, The Joint Commission, One Renaissance Blvd, Oakbrook Terrace, IL 60181
- Online: https://www.jointcomission.org/report_a_ complaint.aspx
- Email: patientsafetyreport@jointcommission.org
- Fax: (630) 792-5636

Financial Information

You can use credit cards, debit cards, and prepaid gift (or reloadable) purchasing cards to pay out-of-pocket costs. We accept Medicaid, Medicare, and most private health plans. We can check to see if we take your insurance. We can also help you apply for coverage with Medicaid, Medicare, private insurance, and other State and local programs.

Reduced Fee Services

We offer a sliding fee discount for YVFWC patients who qualify. Visit a patient benefit coordinator at any YVFWC clinic to see if you are eligible. We must see a copy of your latest tax return (required) and at least one of the following items:

- Previous year's W-2
- Copies of current pay stub
- Social Security, Disability, or DSHS income information
- Cash aid income information
- Documentation of public assistance, unemployment, or other financial assistance
- Court-ordered child support or alimony

We will ask you to sign a self-declaration form if you are unemployed and receive no assistance.

Understanding costs and fees

Our team will help you understand out-of-pocket costs such as deductibles, copays, and co-insurance and assist them with insurance claims for medications, prior authorizations, copay assistance, and patient assistance programs. You may request the cash price for drugs at any time.



Other Financial Assistance Programs for Patients

- PAN Foundation: www.panfoundation.org
- HealthWell Foundation: www.healthwellfoundation.org
- Patient Services, Inc.: www.patientservicesinc.org
- Patient Advocate Foundation Copay Relief: www.copays.org
- Partnership for Prescription Assistance: www.pparx.org
- Safety Net Foundation: www.safetynetfoundation.com
- The Assistance Fund: www.theassistancefund.org

Patient Resources

External Resources for Chronic Conditions

You can find additional information regarding your medication, condition, or diagnosis, and community and financial resources on the following websites:

• Crohn's Disease

http://www.crohnsonline.com http://www.crohnsforum.com

Cystic Fibrosis

https://www.cff.org/

Growth / Endocrine Disorders

https://www.magicfoundation.org/

Hepatitis

http://www.liverfoundation.org

http://www.hepatitis-central.com

http://www.hepb.org/resources/printable_information.htm

Lipid Disorders

https://www.lipid.org/foundations

Migraine / Headaches

https://americanmigrainefoundation.org/

• Movement Disorders / Tardive Dyskinesia

https://tdhelp.org/

• Multiple Sclerosis

http://www.mymsaa.org

http://www.msfocus.org

http://www.nationalmssociety.org

Oncology

https://www.nccn.org/patientresources/patient-resources

https://www.cancer.org

https://www.livestrong.org/we-can-help

Osteoporosis

https://www.bonehealthandosteoporosis.org/

Psoriasis

http://www.psoriasis.org

Rheumatoid Arthritis

https://www.rheumatology.org/I-Am-A/Patient-Caregiver/Diseases-Conditions/Rheumatoid-Arthritis

http://www.rheumatoidarthritis.com

http://www.arthritis.org



Infection Control

Did you know that hand washing is essential to preventing the spread of germs and infections? You can help yourself and your loved ones to stay healthy by washing your hands often:

- · Before, during, and after preparing food
- Before eating food
- Before and after caring for someone at home who is sick with vomiting or diarrhea
- Before and after treating a cut or wound
- After using the toilet
- After changing diapers or cleaning up a child who has used the toilet
- After blowing your nose, coughing, or sneezing
- After touching an animal, animal feed, or animal waste
- After handling pet food or pet treats
- After touching garbage

Follow these five steps every time you wash your hands:

- 1. Wet your hands with clean, running water (warm or cold), turn off the tap, and apply soap
- 2. Lather your hands by rubbing them together with the soap. Lather the backs of your hands, between your fingers, and under your nails
- 3. Scrub your hands for at least 20 seconds. Need a timer? Hum the "Happy Birthday" song from beginning to end twice
- 4. Rinse your hands well under clean, running water
- 5. Dry your hands using a clean towel or air dry them

How to use hand sanitizer:

- 1. Apply the gel product to the palm of one hand (read the label to learn the correct amount)
- 2. Rub your hands together
- 3. Rub the gel over all the surfaces of your hands and fingers until your hands are dry. This procedure should take around 20 seconds

Specialty Pharmacy Patient Rights and Responsibilities

Patients/Clients of Yakima Valley Farm Workers Clinic have the right to:

- 1. Be treated with respect, consideration and without judgment by all staff and volunteers.
- 2. YVFWC staff does not discriminate in the provision of services to an individual;
 - a. because the individual is unable to pay;
 - b. because payment for those services would be made under Medicare, Medicaid, or the Children's Health Insurance Program (CHIP); or
 - c. based upon the individual's race, color, sex, national origin, disability, religion, age, sexual orientation, or gender identity.
- 3. Actively participate in their health care, including advance discussion of decision- making, treatment options, and ethical decisions.
- 4. Be provided with a patient information packet before initiating care, or upon request, describing the services they can expect and any limitations on those services.
- 5. Be given care and service that respects their values and beliefs.
- 6. Have their privacy, confidentiality, and dignity respected.
- 7. Be provided care and service in a safe, secure, comfortable, clean environment.



- 8. Choose a primary care clinician and change clinicians or speak to another health professional.
- 9. Know the name, title, and qualifications of the providers and staff members who provide their care.
- 10. Speak with the supervisor of the providers and staff members providing care, upon request.
- 11. Receive information about their health in a language they understand.
- 12. Have language interpreters and interpreters for the hearing impaired available during health care visits and when talking to office personnel.
- 13. Be informed about our complaint process, express concerns about any aspect of our service without retaliation and receive a response in a timely manner.
- 14. Receive care, treatment and services free of neglect, exploitation and abuse.
- 15. Have their medical record and information regarding their health care treated confidentially; sharing such information only as is required by law or when they have given their written permission.
- 16. Review their medical record with a staff member present.
- 17. Receive proper and timely health care advice, 24 hours a day, 7 days a week, free of prejudice or discrimination of any kind.
- 18. Receive information about the health care services available, including when and how to access them.
- 19. Be informed about their health status, treatment options, risks involved, future health care needs, charges, and be given the opportunity to provide informed consent.
- 20. Have their care coordinated when receiving services across multiple settings such as specialists, hospitals, diagnostic facilities and other health care providers.
- 21. Allow their family to be involved in their patient care, treatment or service decisions to the extent they deem appropriate.
- 22. Seek a second opinion from another clinician when there are questions or disagreements regarding a treatment plan.
- 23. Refuse treatment or withdraw from any program and be informed of the possible consequences of those actions.
- 24. Be fully informed regarding any research or educational activities, including involvement of students in patient care, and refuse to participate in any such activities if desired.
- 25. Be informed and assisted in the opportunity to express their wishes concerning future care, including the option to choose who will make medical decisions for them if they are unable to do so, and to prepare a living will or any other advanced directive.
- **26**. Be informed in regard to billing practices, contract agreements with outside providers, and available financial assistance for medical treatment.
- 27. Receive an explanation of any charges for services.

Patients/Clients of Yakima Valley Farm Workers Clinic have the responsibility to:

- 1. Provide complete and accurate information regarding their health history, current medical status, any care received outside of the clinic and changes in symptoms or medical condition.
- 2. Participate in decision making about their health care and to make informed decisions about treatments and procedures before they are performed.
- 3. Follow the treatment plan agreed upon by them and their clinician.
- 4. Inform their clinician if they do not understand their treatment plan and what is expected of them, or if they believe they cannot follow through with the treatment plan.
- 5. Accept the risks that have been explained to them, if they decide to refuse recommended treatment.
- 6. Treat health care professionals, staff, other patients/clients, and the health center's property in a considerate and respectful manner.



- 7. Seek medical services only through their chosen primary care clinician except in a life threatening emergency.
- 8. Make and keep appointments for non-emergency care and to notify the center if they are going to be late or need to cancel an appointment.
- 9. Receive proper authorization from their primary care clinician before going to a specialist.
- 10. Fulfill financial obligations, if any, for the health care services provided.
- 11. Notify staff if they have questions about any aspect of services provided.
- 12. Notify staff if they have suggestions for improvements, concerns, or complaints.



