



A Plus Medical
SUPPLY INC.

What to expect should you receive a bill from A Plus Medical Supply Inc.

We trust you will find great value in the products you've received. Our company bills CMS according to the 2021 Medicare Fee Schedules when processing your claim. We only bill for the products a physician has prescribed, and you will see those amounts reflected in the Explanation of Benefits you receive from Medicare and your Secondary Insurance Company.

You may, however, be responsible for the deductible and coinsurance amounts not covered by your insurance provider, depending on secondary insurance or financial hardship. You may be invoiced for any remaining balance.

Should you have a remaining balance our company will provide you with four different payment options to choose from, as referenced below. Please allow 4-6 weeks processing time from date of delivery.

Option #1 – Secondary Insurance

Option #2 - Pay balance by Credit Card

Option #3 – Pay balance in installments

Our company bills products and services in accordance with Medicare fee schedule guidelines.

By receiving, accepting by retaining, or either by electronically signing for products and services delivered by UPS, FedEx or such carriers under penalty of perjury, you have provided true and accurate information regarding the processing of this claim. This consent is specifically to permit the acceptance of product(s) or the electronic signature acquired by United Parcel Services, FedEx or such carriers in lieu of hand-written signatures on any one or more of the documents you have received.

Proof of delivery is one of the supplier standards as noted in 42 CFR 424.57(c)(12). Proof of delivery documentation must be made available to Medicare upon request. By acceptance of this product(s), you're giving your acknowledgment as Proof of Delivery of the following documents:

CMS Supplier Standards

Instructions for use

Assignment of Benefits

Protocol for Resolving Complaints

Equipment Warranty Information

Beneficiary Information – Rights and Responsibilities

HIPAA Notice of Privacy Practices

Emergency Planning Information

Home Safety Information

Infection Control Information
Making Decisions About Your Health Care



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Welcome Letter and Hours of Operation

APlus Medical Supply Inc. is processing the enclosed orthotic that has been prescribed by your physician.

The purpose of this packet is to inform you of your order, patient rights and responsibilities along with valuable information concerning other health care issues.

Our mission is to build trusting relationships with patients, families, physicians, and all others devoted to patient care in the home.

Working as a team we wish to provide you with quality healthcare in order to speed your recovery. Together we can help you reach your maximum potential.

Please note our return policy:

- Purchased equipment that does not meet the needs of the patient may be returned to A Plus Medical Supply Inc within five (5) days of delivery date with the approval of A Plus Medical Supply Inc:
- Product has not been modified or repaired by someone other than an authorized representative.
- Replacement equipment will be provided when necessary/requested.
- Equipment will NOT be accepted that has been used or to which unauthorized modifications or repairs have been made.

A Plus Medical Supply Inc
2 E main Street STE 103
Medford, Oregon 97501-6012
458-225-9988

After Hours

Please leave a voice mail and a representative will respond the next business day.

Hours of Operation
8:00 AM – 6:00 PM Pacific Time
Tuesday thru Thursday



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CMS SUPPLIER STANDARDS

MEDICARE DMEPOS SUPPLIER STANDARDS DMEPOS suppliers have the option to disclose the following statement to satisfy the requirement outlined in Supplier Standard 16 in lieu of providing a copy of the standards to the beneficiary.

The products and/or services provided to you by A Plus Medical Supply Inc. are subject to the supplier standards contained in the Federal regulations shown at 42 Code of Federal Regulations Section 424.57(c). These standards concern business professional and operational matters (e.g. honoring warranties and hours of operation). The full text of these standards can be obtained at <http://ecfr.gpoaccess.gov>. Upon request we will furnish you with a written copy of the standards.

INSTRUCTIONS FOR USE

You have received instructional application brochures on the proper use of the equipment, through a demonstration located on our manufacturer's website at www.https://preferredmedsupply.com along with printed material, should you have questions regarding any possible warnings and contraindications. Furthermore, you understand that as per your written physician prescription, A Plus Medical Supply Inc will automatically coordinate the level of supplies that you may require.

ASSIGNMENT OF BENEFITS / AUTHORIZATION TO RELEASE INFORMATION

I request that the payment of authorized benefits be made on my behalf to A Plus Medical Supply Inc. For products and services that they have provided me. I further authorize a copy of this agreement to be used in place of the original release to other payors, any information needed to determine these benefits or compliance with current healthcare standards.

I authorize and direct you, my attorney, and or insurance company to pay directly to A Plus Medical Supply Inc such sums that may be due for services rendered. In the event that my insurance company has a preferred provider that is considered in network, I instruct my insurance company to apply my out of network benefits. I further give a lien on my case to A Plus Medical Supply Inc. against any and all proceeds of any settlement, judgment, or verdict that may be paid to you, my attorney, or me.

I authorize A Plus Medical Supply Inc to use acceptance of their product(s) or the recorded electronic signature as your "Authorization of Benefits" to bill your insurance carrier for the equipment prescribed by your physician. This consent is specifically to permit the acceptance of product(s) or the electronic signature acquired by United Parcel Services, FedEx or such carriers in lieu of hand-written signatures on any one or more of the documents you have received.

A Plus Medical Supply Inc consents to accept your delivery acceptance or electronic signature as true, correct and binding to enter into the billable transaction in reliance thereon.

PROTOCOL FOR RESOLVING COMPLAINTS

You have the right to freely voice grievances and recommend changes in care or services without fear of reprisal or unreasonable interruption of services. Service, equipment, and billing complaints will be communicated to management and upper management. These complaints will be documented in the Medicare Beneficiaries Complaint Log, and completed forms will include your name, address, telephone number, and health insurance claim number, a summary of the complaint, the date it was received, the name of the person receiving the complaint, and a summary of actions taken to resolve the complaint. All complaints will be handled in a professional manner. All logged complaints will be investigated, acted upon, and responded to in writing or by telephone by a manager within a reasonable amount of time after the receipt of the complaint. If there is no satisfactory resolution of the complaint, the next level of management will be notified progressively and up to the president or owner of the company.

(ACHC/Accreditations)

Organization must include & statement within written information provided to customers/patients on the complaint process. Documentation is maintained in the Medical Record. Statement: "In the event your complaint remains unresolved with A Plus Medical Supply Inc you may file a complaint with our accrediting agency ACHC via their website customerservice@achc.org or call: 8559372242)

EQUIPMENT WARRANTY INFORMATION

Every product sold or rented by our company carries a 1-year manufacturer's warranty. A Plus Medical Supply Inc will notify all Medicare beneficiaries of the warranty coverage, and we will honor all warranties under applicable law.

A Plus Medical Supply Inc will repair or replace, free of charge, Medicare-covered equipment that is under warranty. In addition, an owner's manual with warranty Information will be provided to beneficiaries for all durable medical equipment where this manual is available.

BENEFICIARY INFORMATION – RIGHT AND RESPONSIBILITIES

A Plus Medical Supply Inc will provide patients, caregivers, customers, facilities and referrals with general information concerning our staff and time frame for completing physician orders and delivery times.

Patient Rights:

- The patient has the right to receive considerate and respectful service.
- The patient has the right to obtain service without regard to race, creed, national origin, sex, age, disability, diagnosis or religious affiliation.
- Subject to applicable law, the patient has the right to confidentiality of all information pertaining to his/her medical equipment service. Individuals or organizations not involved in the patient's care may not have access to the information without the patient's written consent.
- The patient has the right to make informed decisions about his/her care.
- The patient has the right to reasonable continuity of care and service.
- The patient has the right to voice grievances without fear of termination of service or other reprisal in the service process.

Patient Responsibilities:

- The patient should promptly notify the Home Medical Equipment Company of any equipment failure or damage.
- The patient is responsible for any equipment that is lost or stolen while in their possession and should promptly notify Home Medical Equipment Company in such instances.
- The patient should promptly notify the Home Medical Equipment Company of any changes to their address or telephone.
- The patient should promptly notify the Home Medical Equipment Company of any changes concerning their physician.
- Except where contrary to federal or state law, the patient is responsible for any equipment rental and sale charges which the patient's insurance company/companies does not pay.

2 E main Street STE 103
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HIPAA NOTICE OF PRIVACY PRACTICES

THIS NOTICE DESCRIBES HOW MEDICAL INFORMATION ABOUT YOU MAY BE USED AND DISCLOSED, AND HOW YOU CAN GET ACCESS TO THIS INFORMATION. PLEASE REVIEW IT CAREFULLY.

A Plus Medical Supply Inc is required by law to maintain the privacy of your Protected Health Information (PHI), provide you with this notice of our legal duties and privacy practices, and follow the terms of this notice.

How We May Use and Disclose Your Health Information: We may use and disclose your health information for Treatment (to provide, coordinate, or manage your equipment/supplies/services and communicate with your physician); for Payment (to bill and collect payment from you, Medicare, Medicaid, or other insurers); for Health Care Operations (quality assessment, staff training, compliance, and business management); as Required by Law; and for Public Health and Safety purposes.

Your Rights: You have the right to request a copy of your health record, request that we amend incorrect or incomplete information, request an accounting of certain disclosures, request restrictions on certain uses/disclosures, request confidential communications, obtain a paper copy of this notice at any time, and file a complaint if you believe your privacy rights have been violated.

Our Responsibilities: We are required to maintain the privacy of your PHI, provide you with this notice, abide by its terms, and notify you if a breach occurs that compromises your PHI. We will not use or share your information other than as described here unless you provide written authorization, which you may revoke at any time.

Complaints: If you believe your privacy rights have been violated, you may file a complaint with A Plus Medical Supply Inc or with the U.S. Department of Health and Human Services, Office for Civil Rights (1-800-368-1019), without fear of retaliation. Contact our office at 458-225-9988 with any privacy questions or concerns.

EMERGENCY PLANNING

INFORMATION

A Plus Medical Supply Inc wants you to be prepared in case of an emergency, natural disaster, or other disruption that affects your equipment or supplies.

How to Contact Us: Call 458-225-9988. After hours, please leave a voicemail and a representative will respond the next business day.

If You Rely on Powered Equipment: Contact your local utility company in advance to register as a priority customer for power restoration if applicable, and know your backup plan in case of an extended outage.

If You Rely on Ongoing Supplies: Keep a reasonable backup supply on hand when possible, and contact us as soon as you can if a delivery is missed or delayed due to severe weather or another disruption.

Missed or Delayed Delivery: If a scheduled delivery is missed due to an emergency, contact us right away and we will work with you on an alternative timeline. In a life-threatening emergency, always call 911 first.

HOME SAFETY INFORMATION

A Plus Medical Supply Inc wants you to use your equipment and supplies safely at home.

Equipment Safety: Use your equipment only as instructed by A Plus Medical Supply Inc and your prescriber. Do not attempt to repair or modify equipment yourself, contact us if something isn't working correctly.

Basic Home Safety: Store household chemicals safely and away from food; remove or secure throw rugs that could cause a trip or fall; keep walkways, stairways, and exits clear of clutter; use grab bars and non-slip mats in the bathroom where possible; and check that electrical cords are in good condition.

If you have questions about making your home safer for your specific equipment, contact us at 458-225-9988.

INFECTION CONTROL

INFORMATION

A Plus Medical Supply Inc follows infection prevention practices to protect you and your family.

Hand Hygiene: Wash your hands with soap and water, or use hand sanitizer, before and after handling your equipment or supplies.

Equipment Cleaning and Supply Storage: Follow the cleaning instructions provided with your equipment, and store supplies in a clean, dry area away from dust and contamination. Check expiration dates before use.

When to Contact Us or Your Physician: Contact us or your physician promptly if you notice redness, swelling, warmth, or unusual drainage where equipment contacts your skin, a fever or chills, or equipment that appears damaged or contaminated.

MAKING DECISIONS ABOUT

YOUR HEALTH CARE

You have the right to make decisions about your own health care, including the right to accept or refuse any treatment, service, or piece of equipment. This section is general information, not legal advice.

Advance Directives: An Advance Directive is a legal document that lets you state your health care wishes in advance, such as a Living Will or a Health Care Power of Attorney. Advance Directive laws vary by state, we recommend speaking with an attorney or your physician, or contacting your state's department of health, if you'd like to create or update one.

If you already have an Advance Directive, please provide A Plus Medical Supply Inc with a copy for your record, and make sure your family and physician have copies as well.

Questions? Contact A Plus Medical Supply Inc at 458-225-9988.