

Patient Services Guide

 1-888-336-9363

 mydme@synapsehealth.com

 synapsehealth.com

How to contact us



Email

mydme@synapsehealth.com



Toll-free

1-888-336-9363

(Text-to-speech equipped at the same number)

8 a.m. – 8 p.m. ET, Monday – Friday

(After-hours, on-call support is available for urgent equipment matters)



To report concerns

Synapse Health Customer Resolutions

1-888-336-9363

customerresolutions@synapsehealth.com

Synapse Health Integrity Hotline

1-833-609-5224

synapseintegrityline.com



Access your account

getmydme.com

synapsehealth.com



If you're experiencing a medical emergency, dial 911

- Give the location of your emergency (full address)
- Explain what happened to the best of your ability
- Let them know how many people need help
- Don't hang up until help arrives

**Mailing address**

Synapse Health Inc.
169 Madison Avenue, Suite #15752
New York, NY 10016

Headquarters

Synapse Health Inc.
3755 Chase Avenue
Skokie, IL 60076
Monday-Friday: 10 a.m. – 4 p.m. CST

Alabama Branch

Synapse Health Inc.
500 Chase Park South, Suite 102
Hoover, AL 35244
Monday-Friday: 10 a.m. – 4 p.m. CST

Florida Branch

Synapse Health Inc.
600 Northlake Blvd, Suite 145
Altamonte Springs, FL 32701
Monday-Friday: 10 a.m. – 4 p.m. EST

South Carolina Branch

Synapse Health Inc.
101 Grace Drive, Suite A
Easley, SC 29604
Monday-Friday: 10 a.m. – 4 p.m. EST

Texas Branch

Synapse Health Texas, LLC
8304 Esters Blvd, Suite 850
Irving, TX 75063
Monday-Friday: 10 a.m. – 4 p.m. CST

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Who we are

Synapse Health is here to help you get the medical equipment you need — quickly and without stress.

We work with your doctor, your insurance and the company that delivers your equipment to make the process easy for you. We take care of the paperwork, approvals, and support so everything goes smoothly.

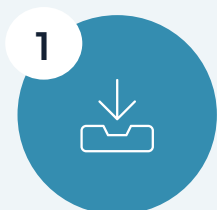
Once your equipment is delivered, our team is here to help with:

- Learning how to use your equipment safely
- Keeping your equipment in good working order
- Answering any questions you have

We're here to support you every step of the way.



How we help you



Your medical equipment order is placed through one of our systems.



Order is fulfilled by our network of medical equipment providers.



Your medical equipment and instructions are delivered to you.



Claim is filed with your health insurance and payments are finalized.

Onboarding

Thank you for letting us support your health care needs! Here's how to get started with Synapse Health:

1. Register on the Patient Portal

The Patient Portal allows you to securely complete required forms, view your orders, track shipments, and more, all in one convenient location.

To register, visit getmydme.com and select "Create an account".

2. Fill out the Patient Authorization Form

The Patient Authorization, Acknowledgment & Consent (PAAC) Form is included with this guide.

The PAAC Form:

- Gives Synapse Health your permission to provide and bill your insurance for your equipment and supplies
- Confirms you received the information in this Patient Services Guide
- Captures your communication preferences
- Lets you designate a caregiver or someone authorized to speak with us about your order and equipment and supplies

The PAAC Form needs to be completed and signed by you or your authorized representative.

The screenshot shows the Synapse Health Order Tracking interface. At the top, it says "synapse HEALTH". Below that, there's a "Back to track order" link. The main section is titled "Order tracking" and includes an "Estimated delivery" date of "Sunday April 06". It also shows the "Carrier Status" as "Out for Delivery" and the "Order #": "SO-B1230098". There's a "Detailed tracking" section with a timeline showing the order was shipped on Friday, April 4 at 12:40 PM from Redkey, California, and is now out for delivery on Friday, April 4 at 12:35 PM from Lakewood, Colorado. On the right, there's an "Order status" section showing "In Progress" and a "Join us" section with a "Create an account" button and a "Login" link. At the bottom, there's a "Do you have a question?" section with a "1-888-13MYDME" phone number.

The screenshot shows the Synapse Health Patient Authorization, Acknowledgement & Consent form. At the top, it says "synapse HEALTH". Below that, there's a "Patient Name:" field, a "DOB:" field, and a "Patient ID#:" field. The main section is titled "PATIENT AUTHORIZATION, ACKNOWLEDGEMENT & CONSENT" and includes a "For Services Indicated on the Corresponding Delivery Ticket or Listed Here:" section with a "Insert List of Equipment, Supplies, or Services" box. Below this, there are three numbered sections: 1. "Provision of Prescribed Medical Equipment & Supplies Acknowledgement", 2. "Patient Authorization & Assignment of Benefits", and 3. "Financial Responsibilities Acknowledgement". At the bottom, there's a "Prefer to complete this online?" section with a link to "mydme.synapsehealth.com" and a "Page 1 of 4" indicator.

Our products

- Bath
- Breast pumps
- Diabetic
- Enteral nutrition
- Gastric suction pumps
- Hospital beds
- Mobility
- Negative pressure wound therapy
- Ostomy supplies
- Respiratory
- Sleep
- Surgical dressing and wound supplies
- Urological supplies

Note: This isn't a complete list of all of our products and services. Please contact us for more information about our products and services.

1-888-336-9363

Product education

When your delivery arrives, you will get information and training about how to properly use and maintain your equipment and/or supplies. Our clinicians and team members are trained to assist you and your caregiver(s) as you learn more about your items. If you have questions, call 1-888-336-9363. We're available after-hours to address urgent concerns.

Return policy

Purchase returns

We want to make sure you receive the highest quality equipment and supplies. If you need to return items, we will accept returns within 14 days of purchase. The item(s) must be in the original, unopened and undamaged packaging. Items that are used, custom-made, worn against the body, or modified in any way are not eligible for return.

Rental returns

Following the rental term, Synapse Health offers a 3-day grace period for the return of monthly rentals and a 1-day grace period for weekly rentals. Full rental charges will be incurred after the grace period.

If you enter a hospital, nursing home or hospice care, or no longer medically need the rented equipment, you must let us know immediately. Most insurance plans, including Medicare and Medicaid, do not cover medical equipment while you are under the care of a hospital, nursing home or hospice.

Warranty policy

Synapse Health honors all manufacturers' warranties for new equipment and supplies. Unless otherwise required by applicable law, items without a specific warranty will be warrantied for damage or manufacturer's defect for up to 30 calendar days from the date of purchase, as long as damage was not due to patient negligence or misuse.

Item damage or loss

To avoid damage to your equipment, you must be attentive to the care instructions provided with your items. Otherwise, lost, damaged or stolen items may fall outside of the warranty and may result in additional costs to you or your insurance company.

Circumstances, like equipment loss due to natural disasters, will be reviewed on a case-by-case basis.

Let us know about any changes

You need to let Synapse Health know as soon as possible if any of the following changes occur:

Medical insurance

If Synapse is a contracted provider with your new insurance, we'll work with them to confirm benefits coverage, obtain authorization and bill. If Synapse isn't contracted, we'll help you transition to a contracted DME supplier of your choosing. If you don't let us know about changes to your insurance coverage, your claims may be denied and you'll have to pay for your equipment and supplies.

Demographic information

To make sure we continue to support your health needs, it's important that we have a current and valid address and phone number. If your address, phone number, or any other key demographic information changes, please be sure to contact us as soon as possible.

Treating prescriber

Synapse Health coordinates your DME care with your treating prescriber. Treating prescribers provide us with prescriptions, medical necessity documentation and other critical information required to ship and bill your equipment and supplies. If your treating prescriber changes, please make sure to let us know as soon as possible to avoid potential delays in processing your order.

Patient feedback and surveys

We value your feedback! You may request a survey at the end of a call with one of our team members or during an interaction with our Intake Team. We may also send you a survey following the delivery of your equipment or supplies.

Your input helps us improve our service.

Complaints and grievances

At Synapse Health, we strive to provide the highest quality of service — your concerns are our concerns. Please contact us with any problem, concern or compliment.

Be assured that you can share feedback without fear of discrimination, reprisal or interruption of care, treatment or service.

We appreciate your candid comments as well as your assistance in helping us continually improve our services. However, if you feel our investigation or response to your complaint was unsatisfactory, you have the right to reach out to Medicare or your insurance plan.

Contact us



Synapse Health Customer Resolutions
1-888-336-9363
customerresolutions@synapsehealth.com



Synapse Health Integrity Hotline
1-833-609-5224
synapseintegrityline.com

Financial

Your financial responsibility

When your order equipment or supplies, we'll give you an estimate of what you may have to pay. You can ask for your estimate in writing, if you prefer. Your estimate is based on information we get from your health plan at the time of your order.

After your health plan processes your claim, they will send you an Explanation of Benefits (EOB) that includes your claim details. The EOB will also include the final amount you may owe, which may be more or less than the estimate provided when ordering.

If you owe anything after your health plan processes your claim Synapse Health will send you a billing statement that includes details about the items you received and the amount you owe.

You are responsible for paying Synapse Health the outstanding balance your health plan determines is your responsibility. This can include deductibles, copays, coinsurance, non-covered items or services, and costs associated with upgraded services or equipment. Synapse Health will collect your credit card information up-front to keep on file for any future balances owed after your claims are processed. If you're set up for autopayment, you will get reminders before your card is charged.

You share of the cost

Deductible: The amount you pay for certain covered services in a plan year before your health plan begins to pay.

Copay: A fixed amount (for example, \$15) you pay for a covered health care service or item.

Coinsurance: The portion (as a percentage) of the total cost you're responsible for paying for a covered health care service or item. After meeting your deductible, you pay your portion, and the plan pays the rest. For example, if your coinsurance is 25% and the total cost is \$100, you would pay \$25. Your health plan would pay the remaining \$75.

Your billing statement

Synapse Health will send you a billing statement that outlines:

- The name of the health plan your claim was submitted to
- Item(s) billed on the claim
- Any amount you may owe

You will only get a statement if you have an outstanding balance after your health plan processes your claim. Remember, your billing statement from Synapse Health is not your EOB. An EOB is provided by your health plan and describes the costs they will cover.

Additional insurance coverage

Synapse Health will bill your primary insurance by default. If you have additional insurance — secondary or tertiary coverage — please give us those details so we can bill them on your behalf.

Remember, billing these additional insurance plans does not guarantee payment. You may still have to pay for items or services. Please contact us with any questions about your financial responsibility or your plan's coverage.

Equipment sale vs. rental

Most equipment or supplies that are lower cost and/or routinely purchased can be billed to insurance and become the patient's property. Other items, such as wheelchairs, hospital beds and CPAP machines may be considered rental items.

If the item is considered rental equipment, it is the property of Synapse Health, and your health plan is billed for the rental costs over the plan's defined rental period. At the end of the rental period, and in accordance with the insurance guidelines, the item would convert to purchase and you may choose to purchase it. If you choose to purchase the equipment, the transfer of ownership can only be considered completed once payment in full is received for all rental periods.

including any patient cost-share amounts (e.g., copays, deductibles, coinsurance). Once the ownership has been transferred, you will be responsible for arranging any necessary service or repairs.

Ventilators, some oxygen equipment and other frequently serviced products are considered rentals only and will remain the property of Synapse Health. This equipment must be returned if you stop using it for any reason.

Traditional Medicare rental cap

Traditional Medicare covers a monthly rental fee for a period of no more than 13 months (36 months for oxygen). After this period, ownership of the equipment is transferred to the patient. Once the transfer is completed, it is the patient's responsibility to arrange any required equipment service or repair. Please note: there may be some oxygen equipment that will always remain the property of Synapse Health.

How to make a payment

Synapse Health accepts the following methods of payment:

- Credit card, debit card, or check

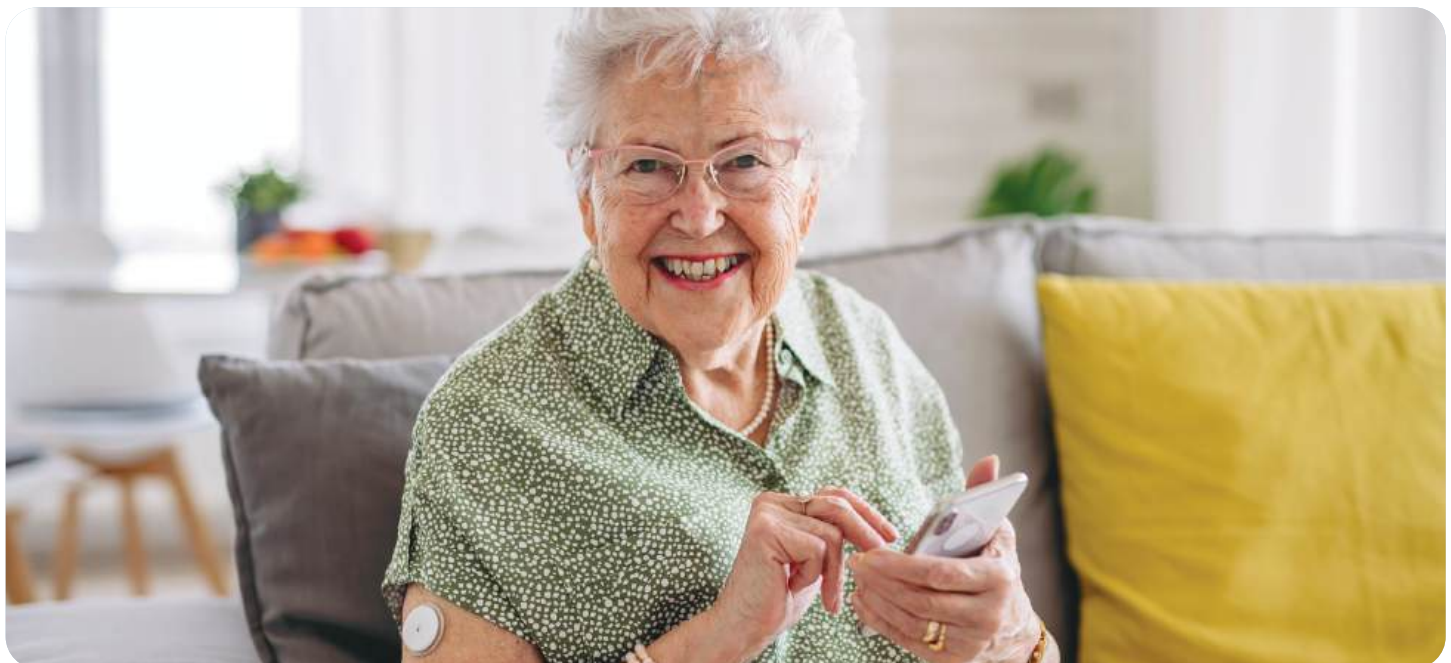
To make a credit card payment:

- Use the self-serve PersonaPay Patient Portal:
personapay.com/synapsehealth/login
- Call Synapse Health at 1-888-336-9363

To make a payment by check, mail your check along with the payment stub from the billing statement to the address on the payment stub.

For help with outstanding balances, contact: 1-888-336-9363 or mydme@synapsehealth.com

[Scan here to pay](#)



Patient rights & responsibilities

Advance directive and emergency response notification

It is your right to have an advanced directive and/or living will. The purpose of an advanced directive or living will is to tell your providers how you would like to be treated in an emergency if you aren't able to speak or make decisions about your treatment and care. If you have an advanced directive or living will, please let us know and place it inside your home where it can be easily accessed in case of an emergency.

If you don't have an advanced directive and/or living will and would like more information on how to get one, please contact your provider, an attorney, or a leader with your religious community. Synapse Health team members aren't able to give you this information.

Your rights

When you receive services in your home, you have the right to:

1. Choose who provides your health care, including your DME items and services, and your treating prescriber
2. Get clear information about what services Synapse Health provides and any limits on those services
3. Get an easy-to-understand explanation of your condition and why your doctor has ordered DME items and services
4. Be involved in the creation and review of your plan of care
5. Get information about any costs for which you may be responsible in advance, before you receive services
6. Say no to care or treatment after you understand what could happen if you refuse
7. Ask for and see identification from Synapse Health who comes into your home
8. Have your home and personal property treated with respect during delivery and while you receive services
9. Be treated with courtesy, respect and dignity and without any discrimination, including but not limited to age, gender, race, ethnic origin, religion, sexual preference and/or disability status
10. Be free from mistreatment, neglect, or verbal, mental and physical abuse, including injuries of unknown source or misuse of your property
11. Share concerns, complaints and grievances without worrying it will affect your care and services
12. Have your concerns reviewed and resolved in a timely manner
13. Received DME items that are clean and in good condition
14. Get information and education on using, caring for, cleaning and maintaining of your DME items
15. Know who to contact with questions or concerns about your equipment, including use, care maintenance, repair, replacement or malfunction

Your responsibilities

To help us support you, we ask that you:

1. Share complete and accurate medical and contact information
2. Let us know as soon as you can if your medical or contact information changes
3. Complete and return any forms we need to provide services
4. Tell us who is authorized to speak or make decisions on your behalf (if applicable)
5. Follow your doctor's instructions for using your equipment and supplies, and ask questions if anything isn't clear
6. Contact Synapse Health if you need help using, caring for, cleaning, disinfecting, or maintaining your equipment
7. Have a plan for emergencies that could happen in your home

8. Treat Synapse Health team members and representatives with courtesy and respect
9. Have someone home when your delivery is scheduled or if your mail order requires a signature
10. Properly store and maintain your DME items
11. Pay any out-of-pocket costs not covered by your health plan, including copays, deductibles, and coinsurance



Patient plan of care

Welcome and thank you for choosing Synapse Health. You received delivery of your medical equipment and/or supplies, along with information and training:

- How to safely use and operate, clean, and care for your equipment
- Your prescribed usage, as ordered by your health care provider
- How to properly store your equipment, if applicable
- How to order replacement supplies when you need them

Taking an active role in your plan of care can help you use your equipment and supplies safely and get the best result. Please take time to complete this plan of care and keep it for your records.

Your name: _____

1. Equipment and/or supplies received

Please list the equipment and/or supplies you received.

For example: oxygen, CPAP, diabetic supplies, wheelchair, etc.

2. Your health needs and goals

Why are you using this equipment and/or supplies:

3. Your personal goals using this equipment and/or supplies (check all that apply)

- ☐ Improve comfort ☐ Improve mobility ☐ Improve breathing/sleep
☐ Prevent complications ☐ Maintain independence ☐ Other: _____

4. How will you use this equipment and/or supplies

You understand when and how often to use your equipment and supplies as prescribed by your health care provider, which is: _____

5. Your personal emergency preparation plan (check all that apply)

- ☐ Make sure all batteries are fully charged
☐ Maintain an adequate supply of necessary equipment and supplies
☐ If you use life-sustaining or power-dependent equipment, let your electric utility company know and enroll in local emergency services or emergency assistance registries
☐ Keep emergency contact numbers readily available
☐ Identify an alternate location where you can get care or power-dependent services if needed

Contact Synapse Health at **1-888-336-9363** for any assistance you need with your equipment and/or supplies. Synapse Health is available 24/7 for emergency equipment/supply related needs.

Safety

At-home fall prevention

Falls are a leading cause of injuries at home and can affect your health and independence. If you have questions about staying safe at home, talk with your doctor or physical therapist about steps you can take and whether equipment or services may help.

Here are some tips you can use to help prevent falls and injuries in your home:

1. Use bright lighting in your home, especially on stairs, so it's easier to see objects that could cause a trip and fall
2. Use nightlights in hallways, bedrooms and bathrooms to help you see where you're going at night
3. Use sturdy, professionally installed handrails when going up or down stairs inside and outside of your home
4. Install grab bars in your bathroom — especially in showers and tubs — so you don't need to rely on towel bars or soap dishes that can pull away from the wall
5. Secure all rugs to the floor or use a non-skid backing
6. Remove all rugs that can't be secured to the floor, don't have a non-skid backing, are worn or damaged, or have curled ends
7. Keep or hide electrical cords away from the areas you walk inside your home, like your living room, dining room and hallways. If possible, use remote controls and cordless phones
8. Keep kitchen items you normally use in easy-to-reach places. Avoid storing kitchen items, such as glasses and dishes, in cabinets that are too high or too low. Use a sturdy step ladder to get items from a high cabinet above shoulder height. Be careful when bending over to get items from a lower cabinet, especially if you have high blood pressure or other health conditions
9. Wear well-fitting shoes and boots that have a sturdy bottom and a sole with traction. Wearing loose-fitting shoes and slippers may increase your chances of tripping and/or falling

Please talk to your doctor if you have any of these health concerns that may increase your risk of falling:

1. Pain, numbness, tingling, or foot issues (such as calluses, corns, or thick toenails) that make it harder to stand or walk safely
2. Medicines that make you feel dizzy, tired or have other side effects that may make you feel unsteady when standing or walking
3. Dizziness when sitting up after lying down or when standing after sitting
4. Vision changes, such as blurred or double vision, flashes of light, or dark spots
5. Ask your eye doctor how often your eyes should be checked and how to use color and contrast to help your balance at home
6. Clean your glasses often

If you fall at home, try to stay calm and determine if you can get up safely:

1. If you have a life alert or other emergency device you wear, press the button, and let the operator know you fell and you may need help getting up
2. If you feel like you can get up safely, use a sturdy piece of furniture to support you
3. After you get up, take some time to rest
4. Then, let someone know you fell
5. Get medical help if you're injured or don't feel like you can get up safely
6. If you're alone and need help, decide whether you can safely crawl to a phone, use your emergency device, or crawl to a door to call out
7. If you can't safely crawl for help, make loud noises such as yelling or banging on an object until help arrives

Home oxygen safety

Smoking issues

No one should smoke in your home if oxygen is in use. This includes you, your family and your friends. Quitting is the best thing you can do for your health and safety.

What you and your family should know

Using home oxygen increases the risk of fires and burns. Oxygen can build up in the air, furniture, clothing and hair, making it easier for a fire to start and spread. When more oxygen is in the air, fires can burn hotter and spread faster.

When using home oxygen, it's important to learn how to handle it safely, especially around heat sources. Make sure you keep oxygen and tubing at least 10 feet away from all heat sources. Common heat sources are matches, cigarettes, gas stoves, appliances, electric razors, hair dryers and heaters. Don't use flammable products such as oils, grease, petroleum products and oil-based lip balms or lotions.

Home fire safety

Post "No Smoking" signs in and around your home. Make sure your home has working smoke alarms and create and practice a home escape plan.

If you're experiencing a medical emergency, dial 911

- Give the location of your emergency (full address)
- Explain what happened to the best of your ability
- Let them know how many people need help
- Don't hang up until help arrives

If you have an infection, may have been exposed to an infection or are taking care of someone who has an infection, it is important to know how to keep it from spreading. Follow your health care provider's instructions and use the tips on the next page.



Infection control

Preventing the spread of infection

Here are few steps you can take to help prevent infection from spreading:

- Wash your hands often with soap and water for at least 20 seconds. If soap and water aren't available, use alcohol-based hand sanitizer
- Avoid touching your face, mouth, nose or eyes
- Cough or sneeze into a tissue, sleeve or elbow instead of into your hand or into the air. If you cough or sneeze into a tissue, throw it away immediately and wash your hands
- Replace towels and washcloths frequently
- Change toothbrushes often and store them separately in a clean, dry place
- Clean and disinfect all surfaces in your bathroom including the toilet, floor, tub, shower and sink
- Wash your hands before and after preparing food and before you eat
- Keep work surfaces clean and disinfect them regularly
- Wash your dishes in hot, soapy water or use a dishwasher
- **Do not share** personal items, like toothbrushes, dishes, combs, etc.
- Wear gloves if laundry is visibly soiled
- **Do not** shake soiled laundry. Shaking may send germs into the air
- Wash laundry in hot water
- If you can't wash laundry right away, place it in a plastic bag and wash it as soon as you can

If you get sick

- Stay home except to get medical care. Call your doctor or health care provider before you see them for any special instructions
- Ask someone to bring you groceries, household supplies and medication
- Avoid public places, including riding public transportation like a bus or train

- Avoid seeing friends and other visitors until you're recovered and no longer have symptoms, such as fever or a runny nose
- Avoid preparing food or caring for others. If you must, wear a mask and wash your hands before and after

If you live with others and get sick

- Stay at least 3 feet away from others, if possible
- Use a separate bathroom, if possible, or use cleaning wipes after
- Sleep in a separate bedroom or bed to prevent infecting others
- Avoid sharing cups, glasses, and eating utensils
- Ask everyone you live with to wash their hands often with soap and water or use an alcohol-based hand sanitizer

Precautions

- Some cleaning products work better for certain germs than others. Be sure to read the product label or online resources to determine if you're using the right cleaning product for the type of germ
- If you use bleach, clean with care. Never mix bleach with any other cleaner products, especially ones with ammonia. When bleach mixes with ammonia, it can create a dangerous gas that may be deadly
- Keep fresh air flowing into your home, especially when using cleaning products such as bleach and ammonia that can have a strong odor
- Never pour dirty or mop water down the kitchen sink. Always pour dirty or mop water down the toilet

Cleaning & disinfecting equipment

Keeping your equipment clean and disinfected is the best way to prevent getting sick or getting an infection. When your equipment is delivered, the technician will tell you how to correctly clean and disinfect it and give you a copy of written instructions and/or the manufacturer's cleaning instructions.

For your safety, follow the cleaning and disinfecting instructions from the delivery technician and the manufacturer.

Please read these instructions carefully and keep them for reference

If your equipment is electric, unplug it before cleaning to help prevent electrical shock. Before cleaning your equipment, be sure to inspect it for any cracks or breaks that could affect safe cleaning and/or disinfecting.

Replace or repair any equipment that can't be cleaned and/or disinfected as instructed.

Clean and disinfect your equipment after each use (or as directed) to remove any dirt you may see and help reduce germs you can't see.

To help prevent contamination, mix a fresh cleaning and disinfecting solution each time you clean your equipment. Dispose of used solution when you're done.

Please call us at 1-888-336-9363 if you have questions about how to clean and disinfect your equipment, you didn't get a copy of cleaning and/or disinfecting instructions, or your equipment is damaged and needs to be repaired or replaced.

Disaster plan

Emergencies — such as fires, power outages, and severe weather — can happen unexpectedly. Having a disaster plan can help you stay safe and make sure you have the equipment and supplies you need.

Check with your local emergency management office for guidance on where to go and what to do in your area. Knowing this information ahead of time can help you act quickly and stay safe during an emergency.

If local or state officials tell you to evacuate or move to a safer location, leave as soon as you can. Bring your equipment and supplies with you, even if you have a generator. If your system includes backup batteries, keep them fully charged so you have power during an outage. Keep in mind that generators and backup batteries may not provide enough power for the full length of an outage.

Synapse Health has a disaster plan we follow in times of emergencies and natural disasters. These types of things happen, and Synapse Health deliveries may be delayed. Synapse Health cares about you and wants to help keep you safe during these times.

We may repair or replace your equipment as directed to do so by your insurance company, such as Medicare, Medicaid, commercial health insurance, the company that provides your equipment's patient agreements, equipment warranties or other instructions we have to follow.

During large-scale emergencies, support and replacements may be prioritized for people who rely on life-saving equipment. We appreciate your patience if response times are longer than usual.

Notice of Privacy Practices

This notice describes how your medical information may be used and disclosed and how you get access to this information. Please review this notice carefully.

This notice describes how Synapse Health Inc. (the “we,” “us,” “our,” or “Synapse”) may use and/or disclose your protected health information (PHI), and the rights you have with respect to your PHI. PHI includes any information that (i) may identify you, (ii) is created, received, maintained, or transmitted, (iii) relates to your past, present, or future physical or mental health or condition, the provision of health care to you, or the past, present, or future payment for the provision of health care to you. We are committed to protecting the privacy of your PHI. This notice applies to all PHI created, received, maintained or transmitted by Synapse. All employees and business associates of Synapse who may have access to your PHI are permitted to use and disclose your PHI only as set forth in this notice.

Your rights

You have the right to:

- 1. Receive a copy of your medical record.** You have the right to see or obtain an electronic or paper copy of your medical record and other health information we have about you. You must submit your request in writing to Synapse’s Privacy Officer, as identified on the last page of this notice. We will provide a copy or a summary of your medical record, usually within 30 days of your request. We may charge a reasonable, cost-based fee for providing you a copy of your medical record.
- 2. Ask us to amend your medical record.** If you feel that information in your medical record is incorrect or incomplete, you may ask us to amend the information. To request an amendment, your request must be made in writing and submitted to Synapse’s Privacy Officer, as identified on the last page of this Notice. We will respond to your request within 60 days. In certain circumstances, we may deny your request for an amendment. Our written denial will state the reasons for the denial and explain your right to file a written statement of disagreement with the denial. If you choose not to file a written statement of disagreement, you have the right to ask that your request and our denial be attached to all future disclosures of your PHI.
- 3. Receive a list of disclosures.** You have the right to ask for a list of the times we have shared your health information, who we have shared it with and why. The list will include all disclosures except for those pertaining to treatment, payment, and health care operations, and certain other disclosures (such as any disclosures that were made at your request). To request a list of disclosures, you must submit your request in writing to Synapse’s Privacy Officer, as identified on the last page of this notice. Your request must include a time period for which you are requesting a list of disclosures, which may not be longer than 6 years prior to the date of your request. We will respond within 60 days of receiving your request. We will provide you with one list per year at no cost, but may charge a reasonable, cost-based fee for any additional requests for list.
- 4. Request how we use or share your PHI.** You may ask us not to use or share certain PHI for treatment, payment or health care operations purposes, and may request to limit the information we share with an individual who is involved in your care, like a family member or friend. We are not required to agree to your request. If we do agree, we will comply with your request unless the information is needed to provide your emergency treatment or unless the information is required to be disclosed by law. If you pay for a healthcare item or service out-of-pocket in full, you may ask us not to share information regarding such item or service with your health insurance company. We will comply with your request unless the information is required to be disclosed by applicable law. To request a restriction, you must make your request in writing to our Privacy Officer, as identified on the last page of this notice.
- 5. Request confidential communications.** You may ask us to contact you in a specific way (for example, home or office phone) or to send mail to a different address. We will not ask you the reason for your

request and will accommodate all reasonable requests. To request confidential communications, you must make your request in writing to our Privacy Officer, as identified on the last page of this notice. Your request must specify how or where you wish to be contacted.

6. **Receive a copy of this notice.** You may ask for a paper copy of this notice at any time, even if you have agreed to receive the notice electronically. We will promptly provide you with a paper copy. To obtain a paper copy of this notice, contact our Privacy Officer, as identified on the last page of this notice.
7. **Choose someone to act for you.** If you have designated a health care power of attorney or if someone is your legal guardian or personal representative, that person may exercise your rights and make choices about your health information. We will confirm that the person has authority to act on your behalf before we take any action.
8. **File a complaint.** If you believe your privacy rights have been violated, you may file a complaint with Synapse or the Department of Health and Human Services, Office for Civil Rights (OCR). To file a complaint with us, please contact our Privacy Officer as identified on the last page of this notice. Forms and instructions for filing a complaint with OCR may be found at the following web address: hhs.gov/hipaa/filing-a-complaint/complaint-process/index.html. You will not be retaliated against or penalized by us for filing a complaint.

Your choices

For certain PHI, you may tell us your choices regarding what we share. In the following situations, you have the right and choice to tell us to:

- Share information with your family, close friends or others involved in your care.
- Share information in a disaster relief situation.

If you are not able to tell us your preference (for example, if you are unconscious), we may share your information if we believe it is in your best interest.

We may also share your information when needed to lessen a serious and imminent threat to health or safety. We never share your information for the following purposes unless you give us written permission:

- Marketing purposes
- Sale of your information
- Most sharing of psychotherapy notes

How we use and share PHI

We typically use or share your information for the following purposes, as permitted by the Health Insurance Portability and Accountability Act (HIPAA):

Treatment. We may use and disclose your PHI to provide, coordinate or manage your treatment and related services. We may disclose PHI about you to doctors, nurses, technicians or other personnel who are involved in taking care of you.

Payment. We may use and disclose your PHI for the treatment and services you receive to bill, and receive payment from, an insurance company or other third party. For example, we may need to disclose information about your treatment to your health plan so it can pay us or reimburse you for the cost of that treatment.

Health care operations. We may use and disclose your PHI for our own health care operations purposes. For example, we may use PHI to review our treatment and services. We may also disclose PHI to another health care provider for certain health care operations of that entity, if the entity either has or had a treatment relationship with you, and the PHI pertains to such relationship.

Disclosures to business associates. We may disclose your PHI to third party “business associates” that perform various functions on behalf of Synapse and that have agreed to provide the same protections for your PHI.

Other permitted uses and disclosures. The following are additional purposes for which we may use and disclose your PHI, as permitted by HIPAA:

- **As required by law.** We may share information about you if state or federal law requires it, including with the Department of Health and Human Services to show we are complying with federal privacy laws like HIPAA.
- **Organ and tissue donation.** If you are an organ donor, we may disclose PHI about you to organizations that handle organ or tissue transplantation or to an organ donation bank, as necessary to facilitate organ or tissue donation and transplantation.
- **Workers' compensation, law enforcement and other government requests.** We may use or share your PHI: (i) for workers' compensation claims; (ii) for law enforcement purposes or with a law enforcement official; (iii) with health oversight agencies for activities authorized by law; (iv) for special government functions such as military, national security, and presidential protective services.
- **Public health and safety issues.** We may disclose PHI about you for certain situations, such as: (i) preventing disease; (ii) helping with product recalls; (iii) reporting adverse reactions to medications; (iv) reporting suspected abuse, neglect or domestic violence; and (v) preventing or reducing a serious threat to anyone's health or safety.
- **Research.** We may use or share your PHI for health research.
- **Medical examiners and funeral directors.** We may share PHI with a coroner, medical examiner or funeral director if you die.
- **Lawsuits and legal actions.** We may share your PHI in response to a court or administrative order, or in response to a subpoena.

Our responsibilities

We are required by law to keep your PHI private and secure. We are required to provide you notice of our legal duties and privacy practices with respect to PHI. We will let you know promptly if a breach occurs that may have compromised the privacy or security of your PHI. We must fulfill the duties and follow the privacy practices described in this notice. We must provide you a copy of this notice upon request.

We will not use or share your PHI other than as described in this notice unless you give us permission in writing. Even if you give us that permission, you may change your mind at any time by letting us know in writing.

Changes to this notice

We may change the terms of this notice at any time, and the changes will apply to all information we have about you. The revised notice will be available upon request, in our office and on our website.

Questions about your right

For questions about your rights under HIPAA, contact our Compliance Hotline at **synapsehealth.ethicspoint.com**, by phone at 1-833-609-5224 or by writing to the following address:

Synapse Health, Inc.
Attn: Privacy Officer
3755 Chase Avenue
Skokie, IL 60076



Protected Health Information

You are releasing/disclosing your protected health information (PHI) records pertaining to your medical history for products or services rendered – to be reviewed by Synapse Health, the Centers for Medicare and Medicaid Services, your insurance carrier, or other health care entities/providers involved in your care, unless you refuse in writing. (See our *Privacy Notice* for full list of disclosures.)

Medicare DMEPOS Supplier Standards

This is an abbreviated version of the supplier standards every Medicare DMEPOS supplier must meet in order to obtain and retain their billing privileges. These standards, in their entirety, are listed in 42 C.F.R. 424.57(c).

1. A supplier must be in compliance with all applicable federal and state licensure and regulatory requirements
2. A supplier must provide complete and accurate information on the DMEPOS supplier application. Any changes to this information must be reported to the contractor within 30 days
3. A supplier must have an authorized individual whose signature is binding sign the enrollment application for billing privileges
4. A supplier must fill orders from its own inventory or contract with other companies for the purchase of items necessary to fill orders. A supplier cannot contract with any entity that is currently excluded from the Medicare program, any state health care programs, or any other federal procurement or non-procurement programs
5. A supplier must advise beneficiaries that they may rent or purchase inexpensive or routinely purchased durable medical equipment, and of the purchase option for capped rental equipment
6. A supplier must notify beneficiaries of warranty coverage and honor all warranties under applicable state law, and repair or replace free of charge Medicare covered items that are under warranty
7. A supplier must maintain a physical facility on an appropriate site and must maintain a visible sign with posted hours of operation. The location must be accessible to the public and staffed during posted hours of business. The location must be at least 200 square feet and contain space for storing records
8. A supplier must permit Centers for Medicare & Medicaid Services (CMS) or its agents to conduct on-site inspections to ascertain the supplier's compliance with these standards
9. A supplier must maintain a primary business phone number listed under the name of the business in a local directory or a toll-free number available through directory assistance. The exclusive use of a beeper, answering machine, answering service or cell phone during posted business hours is prohibited
10. A supplier must have comprehensive liability insurance in the amount of at least \$300,000 that covers both the supplier's place of business and all customers and employees of the supplier. If the supplier manufactures its own items this insurance must also cover product liability and completed operations
11. A supplier is prohibited from direct solicitation to Medicare beneficiaries. For complete details on this prohibition see 42 C.F.R. section 424.57(c)(11)
12. A supplier is responsible for delivery of and must instruct beneficiaries on the use of Medicare covered items and maintain proof of delivery and beneficiary instruction
13. A supplier must answer questions and respond to complaints of beneficiaries and maintain documentation of such contacts
14. A supplier must maintain and replace at no charge or repair cost either directly or through a service contract with another company, any Medicare-covered items it has rented to beneficiaries
15. A supplier must accept returns of substandard (less than full quality for the particular item) or unsuitable items (inappropriate for the beneficiary at the time it was fitted and rented or sold) from beneficiaries
16. A supplier must disclose these standards to each beneficiary it supplies a Medicare-covered item
17. A supplier must disclose any person having ownership, financial or control interest in the supplier
18. A supplier must not convey or reassign a supplier number; i.e., the supplier may not sell or allow another entity to use its Medicare billing number

19. A supplier must have a complaint resolution protocol established to address beneficiary complaints that relate to these standards. A record of these complaints must be maintained at the physical facility
20. Complaint records must include: the name, address, phone number and Medicare Beneficiary Identifier of the beneficiary, a summary of the complaint, and any actions taken to resolve it
21. A supplier must agree to furnish CMS any information required by the Medicare statute and regulations
22. A supplier must be accredited by a CMS-approved accreditation organization in order to receive and retain a supplier billing number. The accreditation must indicate the specific products and services for which the supplier is accredited in order for the supplier to receive payment for those specific products and services (unless an exception applies)
23. A supplier must notify their accreditation organization when a new DMEPOS location is opened
24. All supplier locations, whether owned or subcontracted, must meet the DMEPOS quality standards and be separately accredited in order to bill Medicare
25. A supplier must disclose upon enrollment all products and services, including the addition of new product lines for which they are seeking accreditation
26. A supplier must meet the surety bond requirements specified in 42 C.F.R. section 424.57(d) (unless an exception applies)
27. A supplier must obtain oxygen from a state-licensed oxygen supplier
28. A supplier must maintain ordering and referring documentation consistent with provisions found in 42 C.F.R. section 424.516(f)
29. A supplier is prohibited from sharing a practice location with other Medicare providers and suppliers
30. A supplier must remain open to the public for a minimum of 30 hours per week except physicians (as defined in section 1848(j) (3) of the Act), physical and occupational therapists or DMEPOS suppliers working with custom-made orthotics and prosthetics



Additional resources

Board of Accreditation (BOC)

1-877-776-2200

Centers for Medicare & Medicaid Services (CMS)

1-800-633-4227

*You can also contact your insurance company using the number on your insurance card.

To report abuse, neglect or exploitation:

Child:

National Child Help Child Abuse Hotline

1-800-422-4453

Alabama Department of Human Resource County Contacts

dhr.alabama.gov/county-office-contact

Florida Department of Children & Families

1-800-962-2873

Illinois Department of Children & Family Services

1.800.25.ABUSE

1-800-252-2873

South Carolina Department of Social Services

1.888.CARE4US

1-888-227-3487)

Texas Department of Family & Protective Services

1-800-252-5400

Elder:

National Eldercare Locator

1-800-677-1116

Alabama Adult Protective Services

1-800-458-7214

Florida Adult Protective Services

1-800-962-2873

Illinois Adult Protective Services

1-866-800-1409

South Carolina Adult Protective Services

1-888-227-3487

Texas Department of Family & Protective Services

1-800-252-5400

Phone 1-888-336-9363

Email mydme@synapsehealth.com

Web synapsehealth.com

By request, the Patient Services Guide is available in Spanish.

