

# **Lehigh Valley Medical Supplies**

**250 Cetronia Road  
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Allentown, PA 18104  
610-674-4902**

# **Lehigh Valley Medical Supplies**

## **Mission Statement**

**The mission of Lehigh Valley Medical Supplies is to heal, comfort and care for the people of our community by providing advanced and compassionate health care of superior quality and value, supported by education and clinical research.**

# **Lehigh Valley Medical Supplies**

Thank you for choosing Lehigh Valley Medical Supplies for your orthotic supplies. We will work very closely with you and your physician to assure that you will receive the best care possible.

Please review this packet of information and notify us if you have any questions. We can be reached via telephone at 610-674-4902. If you have a question after business hours, please leave a message and your call will be returned on the next business day.

Once again, welcome to our service. We hope to make your recovery as smooth as possible.

Sincerely,

The Staff at Lehigh Valley Medical Supplies

## **Patient/Client Bill of Rights**

As an individual receiving services let it be known and understood that you have the following right:

1. To receive the appropriate or prescribed service in a professional manner without discrimination upon race, color, religion, gender identity, sexual orientation, age, disability, national origin, educational level, income, culture, language, marital status or ability to pay.
2. To know the names of all those taking care of you and what their roles are.
3. To receive care in a safe environment, free from abuse, harassment and neglect.
4. To be provided with adequate information from which you can give your informed consent for the commencement of service and the continuation of service.
5. To express concerns or grievances without fear of discrimination or reprisal.
6. You, or your representative, have the right to make informed decisions about your medical care, including the right to refuse treatment.
7. To have information in the language you prefer including instructions on follow-up care. This includes interpretation and translation, free of charge. This also applies to services you may require to address vision, speech, hearing or cognitive needs in order to effectively communicate information to you.
8. You may designate a person to act on your behalf and protect your rights as a patient.
9. You have the right to create an advance directive. This is a set of legal papers that allow you to decide what you want to happen with your treatment if you are no longer healthy enough to make decisions for yourself.
10. To ask about the ethics of your care, including resolving any conflicts that might arise about stopping or withholding life-sustaining treatment.

## **Responsibilities of the Patient/Client**

You and Lehigh Valley Medical Supplies are partners in your health care plan. It insure the finest care possible, you must understand your role in your health care program. As a patient/client, you are responsible for the following:

1. To read and understand all patient rights and responsibilities.
2. To fulfill financial obligations as outlined in the Service Agreement.
3. To notify the company when encountering any problems with equipment or service.
4. To notify the company prior to changing your place of residence, your telephone number, or health insurance coverage.
5. To inform the company of your health history, including past hospitalizations, illnesses, injuries, etc.
6. We ask that you treat all patients, families and staff with respect. Threats, violence or harassment of any of these will not be tolerated.
7. You will be responsible for paying your health care bills that you receive as promptly as possible.
8. We encourage you and your family to ask questions about your care.
9. Remember to ask staff members to wash their hands before examining you.

## **MEDICARE DMEPOS SUPPLIER STANDARDS**

1. A supplier must be in compliance with all applicable Federal and State licensure and regulatory requirements and cannot contract with an individual or entity to provide licensed services.
2. A supplier must provide complete and accurate information on the DMEPOS supplier application. Any changes to this information must be reported to the National Supplier Clearinghouse within 30 days.
3. An authorized individual (one whose signature is binding) must sign the application for billing privileges.
4. A supplier must fill orders from its own inventory, or must contract with other companies for the purchase of items necessary to fill the order. A supplier may not contract with any entity that is currently excluded from the Medicare program, any State health care programs, or from 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. This standard requires that the location is 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 CMS, or its agents to conduct on-site inspections to ascertain the supplier's compliance with these standards. The supplier location must be accessible to beneficiaries during reasonable business hours, and must maintain a visible sign and posted hours of operation.
9. A supplier must maintain a primary business telephone 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 must agree not to initiate telephone contact with beneficiaries, with a few exceptions allowed. This standard prohibits suppliers from contacting a Medicare beneficiary based on a physician's oral order unless an exception applies.
12. A supplier is responsible for delivery and must instruct beneficiaries on use of Medicare covered items, and maintain proof of delivery.
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 directly, or through a service contract with another company, 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 supplier standards to each beneficiary to whom it supplies a Medicare-covered item.

17. A supplier must disclose to the government 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, telephone number and health insurance claim number 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 implementing regulations.
22. All suppliers 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 of those specific products and services (except for certain exempt pharmaceuticals).
23. All suppliers 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. All suppliers must disclose upon enrollment all products and services, including the addition of new product lines for which they are seeking accreditation.
26. Must meet the surety bond requirements specified in 42 C.F.R. 424.57(c).
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. 424.516(f).
29. DMEPOS suppliers are prohibited from sharing a practice location with certain other Medicare providers and suppliers.
30. DMEPOS supplies must remain open to the public for a minimum of 30 hours per week with certain exceptions.

Patients have the right to file a complaint with the state survey and certification agency if they have a concern about the safety or quality of care received in the hospital. You may write to:

PA Department of Health  
Acute and Ambulatory Care Services  
Health and Welfare Building, Room 532,  
625 Forster Street  
Harrisburg, PA 17120

You may also call the department at 1-800-254-5164.

Or you can contact the hospital's accrediting organization, The Joint Commission Office of Quality Monitoring, by visiting <https://www.jointcommission.org/resources/patient-safety-topics/report-a-patient-safety-event/>, where you can submit an online form or see the office's fax number and mailing address.

## General Safety Guidelines

### Call your physician or other healthcare provider

**When:** You have a question or concern regarding your medical condition

### Call 911

**When:** You have a medical emergency

### Emergency Preparedness

- Always keep important and emergency phone numbers near the phone
- During bad weather, listen for local alerts or special instructions

### Make a 3 Day Disaster Kit

#### Special Medical Needs:

Charged batteries for equipment

Medical Supplies

Nutritional Supplies

Medications

Important Phone Numbers / Papers

Prescription information / copies

#### DHS Recommended Items:

Wrench or pliers

Moist Towelettes; garbage bags

Local Maps

Flashlight and extra batteries

Water (1 gallon/person/day)

Dust mask, plastic sheeting, duct tape

Non-perishable food; can opener

First Aid Kit

Whistle to signal for help

Portable and NOAA weather radio

### Fall Prevention

- Assure adequate lighting, and use night lights when it is dark
- Keep traffic areas free of clutter
- Clean up spills promptly and be especially cautious during wet weather
- Wear non-skid shoes or socks
- Remove all area rugs, or if they are necessary secure them
- Use hand railing on stairs
- Stand or sit up slowly to avoid dizziness
- Keep necessary items within reach, such as : phone, eye glasses, tissues, drink, walking aide, whistle/bell or emergency call device, etc.
- Consider installing safety equipment in the bathroom such as: shower chairs, transfer bench, grab bars, raised toilet seats, etc.
- Consider a bedside commode for those who have difficulty getting to the bathroom safely, especially at night
- Contact your doctor if you experience dizziness or unsteadiness

**General Fire Safety**

- Never smoke or permit smoking in the presence of oxygen
- Never smoke in bed

**The Department of Homeland Security's US Fire Administration Recommends**

- Install smoke detectors on every floor, especially near the sleeping areas and kitchen
- Test smoke detectors every month, and replacing the batteries in the spring and fall when the time changes
- Keep working fire extinguishers handy
- Make sure everyone knows how to use extinguisher
- Inspect and check the contents of fire extinguishers twice a year
- Practice a fire escape plan

**Infection Control**

- Always remember to wash your hands  
Hand Washing is the single most important aspect for preventing the spread of infection  
    Scrub with soapy lather for 15 seconds  
    Take care to cover all surfaces or  
    Use an alcohol based hand rub  
Wash your hands before and after eating