



**CPAP Packet**

Winmar Diagnostics, Inc.

**Sleep Wellness Center**

*get your zzzzzzzzz*

# Sleep Wellness Center

get your ZZZZZZZZ

## **We can help you get your zzzzz.**

Sleep Wellness Center is a regional, privately owned sleep diagnostic center. We were pioneers in the sleep diagnostic services industry and offer extensive clinical expertise to individuals, hospitals, clinics and other healthcare facilities. Our sleep specialists, who are registered or certified in sleep technologies, will work side-by-side with you from diagnosing your specific sleep issues to finding innovative therapies and solutions.

## **You'll appreciate our follow-up care.**

We'll keep in touch with you to make sure your personal sleep therapy continues to work for you and, you'll be happy to know, there are no charges for follow-up office visits or equipment checks at Sleep Wellness Center. We just want to make sure you're doing well.



## Don't suffer through another sleepless night.

Insurance requires you to have a physician's referral to receive sleep diagnostic care and equipment, just like you would for any other type of testing. However, you do not need to see a special sleep doctor to get your referral. If you'd like to consult a sleep specialist, all you need to do is ask your primary care physician, general practitioner or physician's assistant to phone our office regarding a referral. We accept all insurances, including Medicare and when you're referred to Sleep Wellness Center, we'll do all the insurance paperwork for you.

### For patients in need of PAP therapy we offer the following services:

- CPAP/BIPAP machines and supplies (pricing available upon request and at time of service)
- Verification of insurance benefits and claims processing
- CPAP/BIPAP therapy follow-up program
- HIPAA-compliant secure transfer and storage of patient data
- Quality assurance data program
- In-service and educational programs for medical staff presentations
- 24-hour emergency patient on-call service
- Patient and family education

All PAP services are provided upon an order from a physician. Referrals are accepted by phone, fax or mail. Services are available in all locations that Sleep Wellness Center has team members available.



## **Sleep Wellness Center Patients have the right:**

- To be treated with respect and dignity, regardless of race, religion, cultural variables, gender, sexual orientation, marital status, age, disability or source of payment.
- To identify visiting staff members through proper identification.
- To confidentiality of all information in the patient record and of Protected Health information.
- To receive accurate information about their health-related concerns.
- To be informed both orally and in writing, in advance of any care/service, of payments that will be the responsibility of the patient.
- To participate in the development or revision of any plan of service or care and be informed of any care/service limitations.
- To consent to, or refuse (along with consequences if treatment is refused), any care or treatment.
- To select and/or change their healthcare provider.
- To receive appropriate care/service without discrimination in accordance with physician orders.
- To know the effectiveness, possible side effects and problems of all forms of treatment.
- To voice grievances/complaints regarding treatment or care, lack of respect to property or recommend changes in policy or staff, without restraint, interference, coercion, discrimination or reprisal.
- To have one's property treated with respect and report a complaint if property is damaged.
- To receive and have reviewed a copy of the Medicare Supplier Standards.

## **Sleep Wellness Center Patients have the responsibility:**

- To inform the supplier or physician of any complications or side effects from the treatment prescribed.
- To be honest about their medical history.
- To ask about anything they do not understand.
- To follow health advice and medical instructions.
- To report any significant changes in symptoms or failure to improve.
- To provide useful feedback about services and policies.
- To communicate with the company about a complaint or grievance.
- To assume responsibility of any co-pays or deductibles that will not be covered by the insurance company.
- To respect the suppliers medical equipment and protect it from – fire, theft or damage.
- To notify the supplier immediately of any of the following:
  - Any failure, damage or theft of the supplier's equipment.
  - Any supplies needed to use the equipment.
  - Changes in prescription from physician.
  - Change in insurance or physician.
  - Change of address or phone number.

## **This notice describes how medical information about you may be used and disclosed for treatment, payment, or healthcare operations, and how you can get access to this information.**

According to the Health Insurance Portability Accountability Act of 1996 ("HIPAA"), Sleep Wellness Center is required to notify all patients of how Sleep Wellness Center will use the personal health information we obtain. Sleep Wellness Center is permitted to use and disclose personal health information as follows:

1. To provide Treatment as ordered by your physician. Treatment is defined, in relation to Sleep Wellness Center, as providing durable medical equipment or services as ordered by your physician. Sleep Wellness Center may communicate with your ordering physician regarding your medical condition, payment, and healthcare operations for the services provided. (e.g., relaying that your condition has changed, indicating improvement, or worsened).
2. For Payment activities undertaken to obtain reimbursement from your insurance carrier for the provision of health care services to include, but not limited to, eligibility determination; pre-certification; billing and collection activities; utilization review to obtain physician orders; medical chart notes; medical tests that pertain to your services (e.g., ABG, saturation, sleep study); documentation regarding a change in your condition; and disclosure of limited information to consumer reporting agencies, when applicable.
3. To perform standard Healthcare Operations to include, but not limited to, quality assessment and improvement and related functions; qualifications and performance of health care professionals; conducting or arranging medical review, legal services, and auditing functions; compliance programs and auditing functions; business planning and development; business management; and general administrative activities. (e.g., medical review to ensure compliance with the order, billing criteria, federal and state regulations, data entry, claims processing, follow-up visits).
4. To notify local agencies (e.g., power, gas, and phone companies, and emergency medical services) in the event of an Emergency (e.g., natural disaster) of your limited health information and need for life sustaining equipment or assistance in evacuating due to medical condition, if applicable.
5. Consent is not required for personal health information: 1) When obtained during the course of treating inmates; 2) When required by law to treat an individual and victims of abuse; 3) When unable to obtain consent due to substantial barriers to communication and the consent to receive the treatment is clearly inferred from the circumstances (e.g., accepting the treatment); or 4) If the treatment relationship is "indirect." An indirect relationship is one in which Sleep Wellness Center provides the services based on an order from another provider and the results of the service are transferred back to that provider to communicate with the patient; 5) Uses and disclosures for health oversight activities; 6) Public health activities; 7) Efforts to prevent serious threat to health safety; 8) PHI of decedents and disclosure to personal representatives; and 9) De-identified information.
6. Consent only gives permission to the provider receiving the consent. The consent cannot be shared with any other provider. A provider may require a signed consent as part of the provision of treatment.
7. You have the right to revoke the consent, if the request is provided in writing to the Sleep Wellness Center servicing location, except for treatment/payment/operations for dates of service prior to the date revoked.
8. You may request restrictions on use or disclosure of personal health information; however, Sleep Wellness Center is not required to agree to the request for restrictions.
9. If you suspect misuse of your personal health information, you may report the suspected violations to the Customer Service Department at **800-962-8145** or in writing to: Sleep Wellness Center, 2700 12th Avenue South, Suite B, Fargo, ND 58103-8723.
10. By signing the acknowledgement provided, you are acknowledging you have received, read, and understand the information outlined on this "Notice of Privacy Practices." The attached acknowledgement form is required by Health Insurance Portability and Accountability Act of 1996.

Thank you for your attention to this notice.

## **Medicare's Revised Guidelines for CPAP Therapy in the home.**

Effective 11/01/2008, Medicare has imposed new guidelines for CPAP therapy. Medicare requires that you, the patient, be seen (in a face to face clinical exam) by your treating physician between the 31<sup>st</sup> day and the 91<sup>st</sup> day after initiating your CPAP therapy to document if there is improvement of your symptoms and check compliance of your therapy.

**Your face to face clinical exam with your treating physician should be scheduled between \_\_\_\_\_ and \_\_\_\_\_.**

This is strictly a Medicare requirement. We will work closely with you and your physician, to attain these necessary requirements. If for any reason, these requirements are not attained, Medicare will deny coverage.

## **Notice of Medicare Rent to Purchase of Rental Equipment**

Medicare requires Sleep Wellness Center, as your supplier, to notify you that your rental equipment will be purchased after the 13<sup>th</sup> month's rental payment. Medicare has limited the rental payments to a total of 13 months of continuous use. This means that you will own the medical equipment at the end of the 13-month period.

Once you assume ownership, if your equipment is currently under warranty, Sleep Wellness Center will continue to provide warranty-covered service or repair for the remaining warranty period.

If your equipment is no longer under warranty, let us know, we can perform service and/or repair to the equipment. We will bill Medicare for the parts and labor. You may be responsible for any coinsurance or deductible amounts that apply.

**If you have any questions, please contact us toll-free at: 800-962-8145.**

Thank you for your attention to this important notice.

Sleep Wellness Center

## Medicare DMEPOS Supplier Standards

Note: 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 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, with visible signage. 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.
  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).
- Implementation Date - October 1, 2009*
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). Implementation date- May 4, 2009
  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 suppliers must remain open to the public for a minimum of 30 hours per week with certain exceptions.

## Safety in the Home

Sleep Wellness Center strives to help prevent patients from having accidents in the home. Listed below are some guidelines that can be used to make your home a safe environment.

### Stairways

- 1) Clear objects from stairs
- 2) Cover stairs with rubber tread or skid-resistant paint
- 3) Handrails should follow the stairs all the way to the end
- 4) Lights should be at top and the bottom of the stairs

### Bathroom

- 1) Install slip-resistant shower and bath mats
- 2) Dispose of out-of-date medicines
- 3) Use a bath bench or tub rail to help transfer into the tub

### Living Area

- 1) Keep traffic areas free from cords and potential tripping hazards
- 2) Keep medical equipment away from stoves and fireplaces

### Kitchen

- 1) Keep curtains and towels away from stove
- 2) Keep stove burners and oven grease-free
- 3) Install locks on cabinets with cleaners or other chemicals
- 4) Keep throw rugs to a minimum to prevent falls

### Bedroom

- 1) Never leave medication in the reach of children
- 2) Provide an escape ladder if room is upstairs
- 3) Install smoke detectors and change batteries at least two times per year

## Emergency Preparedness

Be prepared and ready before a disaster/emergency strikes. Everyone should have some basic plans in place and supplies on hand to survive for at least 3 days if an emergency occurs.

1. Evacuation plan if it becomes necessary to leave your home due to an emergency-where to go, how to get there, who to notify
2. Important family documents- copies of insurance policies, identification, bank account records, medication prescriptions, cash or traveler's checks
3. Water-one gallon per person per day, for drinking and sanitation
4. Non-perishable food-at least a three day supply
5. Medications-enough on hand to last an extended time
6. Battery operated radio and extra batteries
7. Battery operated flashlight and extra batteries
8. First aid kit
9. Whistle to signal for help
10. Moist towelettes, garbage bags and plastic ties for personal sanitation
11. Wrench or pliers to turn off utilities
12. Manual can opener
13. Care for pets-if applicable
14. Warm clothing, extra blankets

As you prepare, tailor your plans and supplies to your specific daily living needs and responsibilities. For more detailed information please visit FEMA's Ready Campaign website at [www.ready.gov](http://www.ready.gov)

## **Sleep Wellness Center Mission Statement**

Sleep Wellness Center strives to be the market leader in the treatment of sleep disorders. We will be partners to our customers, meeting their needs with high quality products and services. Our highly trained and committed employees, who are responsive to our customers needs, will be the cornerstones of our success.

- 1) Patient-Focused Service
- 2) Positive Patient Outcomes
- 3) Patient Education
- 4) Dedicated, Highly Skilled, Professional Staff

## **Patient Communication and Complaints Protocol**

We at Sleep Wellness Center want to provide the greatest level of care and service to help make your life easier, with better quality and independence. We are here for you 24 hours a day, 365 days a year if a problem or situation arises that may require you to contact us. We value your thoughts and opinions; always feel free to pass them along to us so we can continually improve our services.

We believe your concerns are our concerns. Every patient has the right to freely voice complaints or grievances and recommend changes in care or services without fear of reprisal or unreasonable interruption of services. To ensure that our services meet your total satisfaction, we ask you to describe any complaint, problem, concern, or compliment that you may have.

As our patient, you are very important to us. So that we can resolve any problems that arise in a rapid and effective manner, we want to make you aware of our Patient Communication and Complaints Protocol. Patient complaints are investigated within two days from notification and within 14 days, you will have written notification of the results of the investigation.

1. You may call our office at 800-962-8145 and speak with a customer service representative.
2. If your issue cannot be resolved satisfactorily, you may request to speak with a supervisor.
3. If you wish to contact us in writing, send a letter to Sleep Wellness Center, 2700 12th Ave. South, Suite B, Fargo, ND 58103, to the attention of: Patient Communications

All concerns are taken very seriously. Our complaint resolution protocol ensures that each concern is researched in order to resolve all complaints and/or problems.

## Community Resources - Fargo

RESOURCE	PHONE NUMBER
<b>ABUSE</b>	
Child Protective Services	701-241-5765
Adult Protective Services	701-241-5747
<b>CONSUMER PROTECTION</b>	
Consumer Protection	800-721-7233
Better Business Bureau	800-456-3907
Department of Consumer Affairs	800-721-7233
<b>COUNSELING</b>	
Mental Health Services	800-472-2911
Division of Aging & Adult Services & People with Disabilities	701-298-4500
<b>DISABILITY SERVICES</b>	
Disable Elder Adult Protective Services	701-298-4500
MN Elder Abuse Helpline	800-333-2433
<b>FOOD</b>	
Care & Shelter/Food Pantry	218-236-0372
Meals-on-Wheels	701-293-1440
<b>HEALTH CARE</b>	
Medicaid	800-755-2604
Accreditation Commission for Healthcare	919-785-1214
Medicare	800-Medicare
<b>SENIOR SERVICES</b>	
Social Security and Medicare Eligibility Information	800-772-1213
Senior Citizens Center	701-293-1440
<b>LANGUAGE ASSISTANCE</b>	
School/College Language Department	218-477-2912
Translator Services	701-365-0022

## Community Resources - Grand Forks

RESOURCE	PHONE NUMBER
<b>ABUSE</b>	
Child Protective Services	701-787-8540
Adult Protective Services	701-787-8540
<b>CONSUMER PROTECTION</b>	
Consumer Protection	800-721-7233
Better Business Bureau	800-456-3907
Department of Consumer Affairs	800-721-7233
<b>COUNSELING</b>	
Mental Health Services	800-472-2911
Division of Aging & Adult Services & People with Disabilities	701-298-4500
<b>DISABILITY SERVICES</b>	
Disable Elder Adult Protective Services (NE Human Service Center)	701-795-3000
MN Elder Abuse Helpline	800-333-2433
ND Elder Abuse Helpline	800-451-8693
<b>FOOD</b>	
Care & Shelter/Food Pantry	701-722-6609
Meals-on-Wheels	701-780-5169
<b>HEALTH CARE</b>	
Medicaid	800-755-2604
<b>SENIOR SERVICES</b>	
Social Security and Medicare Eligibility Information	800-772-1213
Senior Citizens Center	701-772-7245
<b>LANGUAGE ASSISTANCE</b>	
Translator Services	218-727-2572
<b>OTHER</b>	
Accreditation Commission for Healthcare (ACHC)	919-785-1214

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**Winmar Diagnostics, Inc. [www.winmarsleep.com](http://www.winmarsleep.com)**

2700 12th Ave. S. Suite B | Fargo, ND 58103 | 701-235-7424 **Toll Free** 800-962-8145 **Fax** 701-239-4792  
1191 South Columbia Road | Grand Forks, ND 58201 | 701-746-7378 **Toll Free** 800-962-8145 **Fax** 701-746-7388