Patient’s Rights and Responsibilities

Ochsner Specialty Pharmacy greatly values each and every patient and would like to ensure the best possible pharmacy experience. Your healthcare team will work together to take care of your treatment and medication needs. You are an important member of your healthcare team and to receive the most benefit from your medications, it is important that you are aware of your rights and responsibilities as a patient and are aware of your disease and medical conditions.

A Patient Has a Right To:

- Be treated with respect and dignity at all times, and to exercise their rights to be treated fairly according to federal and local law.
- Make informed decisions regarding his/her care.
- Receive information about Ochsner Specialty Pharmacy services including 24/7 access, refill process, patient satisfaction.
- Participate in the decision-making regarding their medication treatment and receive a clear explanation from clinical pharmacist about their medications.
- Launch complaints regarding the level of care, their treatment or anything related to their services provided by Ochsner Specialty Pharmacy.
- Have covered benefits and prior-authorization reviews within specified timeframes by certified technicians and pharmacists staff who can effectively communicate financial and clinical medication treatment plans.
- Have personal health information shared with the patient management program only in accordance with state and federal law.
- Have records kept confidential to the degree protected by federal and state laws including HIPAA regulations.
- Receive translation services in the case of any language barriers.
- Know about philosophy and characteristics of the patient management program.
- Have personal health information shared with the patient management program only in accordance with state and federal law.
- Identify the staff member of the program and their job title, and to speak with a supervisor of the staff member if requested.
- Speak to a health professional.
- Receive information about the patient management program;
- Receive administrative information regarding changes in or termination of the patient management program.
- Decline participation, revoke consent or disenroll at any point in time.
• Refuse treatment to the extent provided by law and to be informed of the consequences of that refusal.

**A Patient Has Responsibility To:**

• Follow instructions from their prescribing physician as to the correct use of prescribed medications and to take their medications as recommended by the treating physician.

• Ensure that they are not paying cash for drugs that have coverage under their benefit plan.

• Pay any applicable insurance copayments at the time of service.

• Submit necessary paper work or responses in order to participate in the patient management program to the extent required by law.

• Give accurate clinical and contact information and to notify the Ochsner Specialty Pharmacy and the patient management program of any changes in clinical status, address or phone number medications, and/or financial situation including insurance changes.

• Notify their treating provider of their participation in the patient management program, if applicable.

• Safely store and safely use medications and supplies according to instructions provided, for the purpose they were prescribed and only for/on the individual for whom they were prescribed.

• Follow the plan of treatment or service established by your physician or healthcare provider.

• Consumers have the responsibility to provide, to the best of your knowledge, accurate and complete medical and personal information necessary to plan and provide care/services.

• Ask questions about your care, treatment and/or services, or to have clarified any instructions provided by a representative of Ochsner Specialty Pharmacy.

• Inform Ochsner Specialty Pharmacy if they are going to be unavailable for scheduled delivery times.

• Be respectful and treat Ochsner Specialty Pharmacy employees with dignity and without discrimination as to color, religion, sex, creed, or national or ethnic origin.

If you have additional questions regarding this communication, please contact Ochsner Specialty Pharmacy Manager at 855-312-4193 for further clarification.

If you believe that your rights have been violated, you may express your concerns in writing to:

<table>
<thead>
<tr>
<th>Ochsner Specialty Pharmacy</th>
<th><a href="mailto:Specialtypharmacy@ochsner.org">Specialtypharmacy@ochsner.org</a></th>
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</thead>
<tbody>
<tr>
<td>Attention: Christi Parsons</td>
<td></td>
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<tr>
<td>1514 Jefferson Highway</td>
<td></td>
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<tr>
<td>New Orleans, LA 70121</td>
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