

Sonshine Medical Inc

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Hours: 8:00am to 5:00pm, Monday -Friday

Sonshine Medical is a privately held company seeking to become the highest quality provider of a full line of medical equipment and rehabilitative products and services, serving those living in the State of Ohio. The management of Sonshine Medical understands that long-term success is built on performance that consistently meets or exceeds customer expectations. This private, for-profit corporation has over 20 years of healthcare industry related experience among management and staff. Patient rights, responsibilities, dignity and confidentiality are the highest priority in service, delivery and follow-up. We routinely update our staff regarding home healthcare technology and service delivery through attendance at national seminars, participation in factory training programs, in-house inservice education programs, and other appropriate methods. Our internal Quality Assurance Coordinator regularly monitors the quality of our service. Patients and referral sources retain the right to clearly voice their opinion about the services rendered. Sonshine Medical does not discriminate against any person because of age, ancestry, creed, color, disability, marital status, medical condition, national origin, race, religion, sex, or sexual orientation, and complies with all applicable federal, state, county and local laws and regulations.

STATEMENT OF VALUES

We honor God first, family second, and everything else is third. We honor and uphold the authority of our leaders. We concentrate and focus on our mission. We speak positively and encourage others. We devote time to recreation and reflection. We revere those with wisdom. We dignify the gift of life. We support traditional family values. We utilize only what is rightfully ours. We value honesty and tell the truth. We respect the property and right of others.

CUSTOMER INFORMATION

A voice message system will answer the company's telephones after normal business hours. Should a life-threatening situation arise, it is suggested that the customer or caregiver dial 911 for professional emergency services.

CUSTOMER COMPLAINTS

Any customer who feels his/her rights have been denied, who desires further clarification of rights, or who desires to lodge a complaint or express contentment with any aspect of service or equipment, should contact us through our main telephone number between the hours of 8 AM - 5 PM, without fear of reprisal by the company or any of its employees. If the issue cannot be resolved via a telephone call with a patient representative, it will automatically be forwarded to the appropriate corporate manager. If the customer feels that their grievance/complaint is not being handled adequately they may call either the Accreditation Commission for HealthCare (ACHC) at (919) 785-1214 or Medicare 24 hour Hotline (800) 633-4227.

CUSTOMER RIGHTS

- You have the right to be treated fairly with courtesy and respect and to have one's property and person treated with respect, consideration, and recognition of client/patient dignity and individuality.
- You have the right to quality homecare equipment services regardless of race, creed, religion, sex or source of payment.
- You have the right to be fully informed in advance about services to be provided and any modifications to the service plan.
- You have the right to request and receive a detailed explanation of your bill for products and services.
- You have the right to be allowed reasonable participation in decisions regarding your homecare services.
- You have the right to be communicated with in a way that you can reasonably understand.
- You have the right to refuse equipment and services; accepting full responsibility for that refusal.
- You have the right to choose your provider of homecare services.
- You have the right to be informed of provider service limitations or to be informed of any financial benefits when referred to our organization.
- You have the right to receive our assistance in transferring your homecare services to another provider.
- You have the right to receive homecare services in a timely manner, appropriate for your needs.
- You have the right to be assured of confidentiality, to review your records, and to approve or refuse the release of records.
- You have the right to have competent and qualified and identifiable people carry out the services for which they are responsible.
- You have the right to voice your grievances and recommend changes in policies and services.
- You have the right to be given reasonable notice of discontinuation of services.
- You have the right to be free from mistreatment, neglect, or verbal, mental, sexual, and physical abuse, including injuries of unknown source, and Misappropriation of client/patient property

CUSTOMER RESPONSIBILITIES

- To provide to the best of your knowledge, accurate and complete information.
- To follow the plan of care or service recommended by your physician.
- To care for, use as instructed, and return rental equipment in good condition, normal wear and tear expected.
- To pay for the replacement cost of any equipment damaged, destroyed or lost due to misuse, abuse or neglect.
- To notify Sonshine Medical of any equipment malfunction or defect, and allow company technicians to enter the premises to repair, relocate, or provide substitute equipment.
- To be responsible for any payment not paid by your insurance company, except where not allowed by law.
- To make it known that you clearly understand the equipment and services being provided.
- To advise Sonshine Medical of any changes in your status, including address, medical condition or Health Insurance.
- To understand that the TERM OF ALL RENTALS shall repeat on the monthly anniversary date of the original rental and that no rental of less than a full month shall be charged.

MEDICARE SUPPLIER STANDARDS

Sonshine Medical, Inc. adheres to the following standards as required by the Health Care Financing Administration:

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 National Supplier Clearinghouse 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 may not 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 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 is prohibited from direct solicitation to Medicare beneficiaries. For complete details on this prohibition see 42 CFR § 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, 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 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 for 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. A supplier must meet the surety bond requirements specified in 42 CFR § 424.57 (d).
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 CFR § 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) or physical and occupational therapists or a DMEPOS supplier working with custom made orthotics and prosthetics.

OUR MISSION STATEMENT

To share the love of Jesus Christ while providing the highest quality products