## Octorion Yes No Does the provider service the area when the perior thee? In the provider service the area when the perior thee? In the provider secredated? In the provider secredated?

Are the provider's normal hours of operation sufficient to fulfill all requirements and needs?

Can the provider accept patients who do not speak English? (if applicable)
Can the provider accept electronic prescriptions?
Has the patient been a patient with this provider in the past?

Does the provider provide 24-7 coverage for nursing?

Does the provider provide 24-7 coverage for pharmacy?

Does the provider have a nutrition support team? (if applicable)

Does the provider have podurice operation? (if applicable)

Does the provider have any other areas of expertise needed?

Does the provider have clinical inition? (if applicable)

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Con the provider have clinical inition? (if applicable)

Can the provider accept the patient's insurance?

Can the provider accept the patient's insurance?

Does the provider have evidence of positive uconner?

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Does the provider provide timely foodback?

With her revolder accept after business from the provider provider insurance after hours enformed?

Appendix—Checklist for Evaluating a Home Infusion Service Provider