



**[Date]**

Dear **[Valued Provider]**,

During these challenging times, **[organization name]** is here to help you meet the needs of your patients. It is imperative that patients continue their course of disease treatment to avoid the risk of disease flares or relapse, which often necessitate additional healthcare services to control breakthrough symptoms. In seeking this acute care, patients are forced into settings which increase their risk of exposure to SARS-CoV-2. It is our goal to treat patients safely in our clinic**[s]** to keep their disease well-controlled, knowing our hospitals are overburdened treating patients with COVID-19.

Patient care and safety remains our top priority. Our dedicated staff follows the most stringent safety standards, and we have ramped up our already rigorous cleaning and safety measures in light of COVID-19. Our clean, spacious **[facility/facilities]** provide patients the highest level of care for their infusion treatments.

How can [organization name] assist you and your patients?

*\*please edit the list below as appropriate to best represent your facility.*

- We operate under the highest safety standards in infusion therapy, adhering to the National Infusion Center Association's Standards of Care as well as COVID-19-specific recommendations from NICA and the CDC.
- All patients, visitors, and staff are screened for symptoms and potential exposure in advance of their appointments and prior to entering our facility.
- We have private rooms available.
- Our facilities allow for social distancing **[or “we have reduced seating capacity in our treatment area”]**.



- Our care setting allows patients to continue receiving their treatments while preserving hospital space and resources for the public health emergency.
- Our clinics are operating under normal hours [**or “we have extended hours to limit the number of individuals in the treatment area”**].
- Saturday clinics are offered at most locations.
- Seamless transfer of care: we conduct benefit verifications, pre-authorizations, and send treatment notes to allow you to follow-up on patient progress.

To refer/transfer a patient: [***please edit the list below to best represent your facilities***]

1. Go to [company’s website]
2. Click on Physicians
3. Click on Plans of Treatment
4. Complete appropriate Plan of Treatment and have Provider sign
5. Fax to XXX-XXX-XXXX

*or*

[Refer to [NICA’s Referral Best Practices resource](#) for guidance if your organization does not have a referral process.]

The [**organization name**] family is here to support your patients during this difficult time. If you have any questions, please contact us by calling [**phone number**].

Sincerely,

[**Name**  
**Title, Organization Name**]