

As you may have read in newspapers over the past year, many insurance companies have changed their policies in regard to covered services. They have either cut the amount that they will reimburse Ambulance and ALS providers or deny the claim outright. The Medicare program specifically, has denied or reduced coverage that, in the past, they covered.

WHAT DOES THIS MEAN TO YOU:

1. **For medical necessity services**, we will accept what Medicare and Insurance Companies pay, as payment in full. You will not be responsible for any co-payments.
2. **Non Subscribers will be responsible for all charges, co-payments, deductibles and denials.**

LET'S EXAMINE THE POSSIBILITIES:

An ambulance call with ALS (Paramedics)

BLS Base Fee	\$ 700.00
Mileage Fee (Avg)	\$ 60.00
Oxygen and Supplies	\$ 50.00
ALS Fees	<u>\$ 1,300.00</u>
	\$ 2,110.00

Payment from Insurance - \$ 450.00

AMOUNT YOU OWE: \$ 1,660.00

(As a Nonsubscriber)

Amount you WOULD OWE \$ 0.00

(As a Subscriber)

The bottom line speaks for itself.

Subscribers are also subscribers of Holy Spirit EMS.

Do the right thing . . .

SUBSCRIBE TODAY!

*Approximate Cost
Of One Fully Equipped
Hampden Township Ambulance
To Help Serve Our Community . . .*
TOTAL COST \$250,000

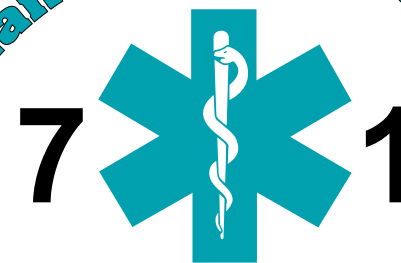


Effective July 27, Hampden Township approved an EMS 'Non-Transport Medical Assist Fee' of \$200.00 per response for any calls which do not include transport of the patient to a medical facility regardless if medical care is rendered. This is necessitated due to the activation of the EMS crews which incurs significant cost even before services are rendered. In addition, providing non-transport medical assists makes our EMS crews unable to respond to urgent medical emergencies, thereby creating a public safety concern for the community as a whole.

Examples of 'Non-Transport Medical Assist' services include, but are not limited to: lift assists, patient refusals, wellness checks, and all other non-transport EMS services. The 'Non-Transport Medical Assist Fee' will be invoiced to the patient's insurance company. However, if not covered by insurance or subject to deductible, it will be the patient's responsibility to pay the amount, in full. Individuals who subscribe to Hampden Township EMS WILL NOT receive a waiver of this fee and will be personally responsible for payment of the full fee if not covered by insurance.

Hampden Township
**Emergency
Medical
Services**

Hampden Township



**EMS
2018**

Valid Sept. 1, 2017 to Aug. 31, 2018

Subscription Drive



IN SERVICE TO THE COMMUNITY SINCE 1975

General Information

Ambulance service or Emergency Medical Services (EMS) is a vital public service. Hampden Township EMS provides emergency medical coverage to the residents and visitors of Hampden Township, Shiremanstown Borough, and neighboring communities 24 hours a day, 7 days a week, 365 days a year. Last year we answered over 3,500 calls for help.

The staff includes a variety of specially trained EMS professionals who engage in many hours of continuing education. This gives them the skills to properly manage all types of medical and trauma related situations. Hampden Township EMS is licensed by the Pennsylvania Department of Health and therefore has met the strict guidelines necessary for operation within the Commonwealth.

Hampden Township EMS operational expenses are partially funded by Hampden Township. However, the EMS service receives additional funding from donations and annual family/individual subscriptions.

Hampden Township EMS depends on your annual subscription to provide a consistently high standard of around the clock emergency medical services. With your support, we can continue to improve service to all of the residents and visitors of our Communities.

Thank you for your support!

Subscription forms will be available online at:

www.hampdentownship.us

Individuals must have health insurance to be eligible for Hampden Township EMS membership. The subscription program is not applicable for Medical Assistance recipients.

Note: Hampden Township EMS is not affiliated with Holy Spirit EMS.

Q. WHAT SHOULD I DO IF MY INSURANCE COMPANY SENDS A CHECK TO ME FOR PAYMENT OF SERVICES PROVIDED BY HAMPDEN TOWNSHIP EMS?

A. *Reimbursement checks, or payment in the same amount, must be sent immediately to Hampden Township EMS for payment of services rendered. If this is not done, your subscription will be terminated immediately, and you will be held responsible for payment of all outstanding balances which will be pursued by an outside billing service.*

Q. WHAT IS NOT COVERED BY A SUBSCRIPTION?

A. *The following services **ARE NOT** covered by your subscription.*

- *Transports which do not meet medical necessity criteria;**
- *Any charges related to excessive mileage or other non-covered charges for transports, which are based solely on patient and/or physician preference.*
- *Non-transport medical assistance.*

Q. WHY SHOULD I BE A SUBSCRIBER TO EMS IF I HAVE MEDICARE OR OTHER INSURANCE?

A. ***First**, your subscription assures that you **will not** be held responsible for any additional invoices for **emergency** medical service regardless of your insurance coverage for medical necessity services. (Most insurance plans will not cover 100% of your EMS claim. Medicare does not cover ALS if you are not a subscriber.)*

***Secondly**, if no one subscribed to Hampden EMS, there would be limited funds to purchase ambulances, or maintain them. In addition, we would not have equipment to help our E.M.T.'s provide care to our communities.*

SUBSCRIBERS CAN SAVE MONEY!

* UNLIMITED NUMBER OF EMERGENCY CALLS THAT MEET MEDICAL NECESSITY.

Medical Necessity

Medicare, Medicaid, as well as many commercial insurance companies require that the transport provided to the recipient meet specific criteria for medical necessity and must be a covered service. The criteria specifically requires that the patient could not have been safely transported by other means. Each ambulance transport is evaluated to establish whether it meets this criteria. If the transport or service does not meet medical necessity criteria or is considered non-covered, the claim, if submitted, must be submitted to the respective insurance carriers as non-covered. The patient has the right to appeal this determination by contacting their insurance carrier directly.

This covers anyone residing in your home through August 31, 2018.

■ ADVANCED LIFE SUPPORT (ALS)

Forty dollars (\$40) of your membership fee is allocated for Advanced Life Support (ALS) provided by Holy Spirit EMS. Your membership covers the basic fees for this service, which averages \$1,300 per response.

■ ROUTINE TRANSPORTS

*This service is provided by outside agencies when there is no immediate need to have the patient transported to a medical facility. **Be advised, this service is not covered under your subscription.***

Subscriptions are valid from September 1, 2017, or subsequent to payment of subscription, through August 31, 2018.

For Emergencies Dial:
911