

Priority Care

AMBULANCE MEMBERSHIPS

WHEN IT MATTERS THE MOST



"We never expected to need EMS, but when we did, they were there for us. That's why we put our trust in them and are proud members."



\$39
INDIVIDUAL

LOW
ANNUAL
FEES

\$59
FAMILY

Now Available

Enrollment period ends November 30th

F.A.Q.'s

Q Who can join Priority Care?

A All Union County residents may join Priority Care. Memberships are available for both individuals and families. Membership is good with both ProMed Ambulance and El Dorado Fire Department EMS.

Q Who is covered under my membership?

A Single memberships cover only one person while family plans cover married couples and/or children under age 22 who still live at the member's address, or under age 24 if full time students.

Q How will my ambulance provider work with my insurance company?

A The ambulance provider will file with any available insurance each time an ambulance is needed. For covered services, the amount paid will be accepted as payment in full. If no benefits are available, members will receive a **40%** discount off the normal fees. Non-members are billed for 100% of the charges each time the ambulance is used.

Q Why should I join before November 30th?

A The once a year enrollment period helps us keep the cost of your membership low and affordable. We are able to maximize our efforts at improving our services and enhancing the care we provide to the community.

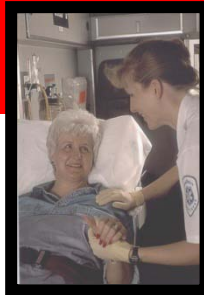
Q What if I decide not to join?

A You will still get the same great service you've come to expect, but you will be responsible for **100%** of the bill.

Priority Care Offers Tremendous Cost Savings



The fact is, even with insurance you may only be partially covered for ambulance transportation. With a Priority Care membership, you can save hundreds each time an ambulance is needed.



The confusing debate over health care coverage coupled with rising costs have left many – particularly seniors and those on limited incomes – looking for ways to ensure that the *right care is always there*. With a Priority Care Ambulance membership, you have a security blanket from unexpected medical expenses when ambulance transportation is needed.

You pay

Compare the savings:

Members ... \$0 with insurance benefits for covered services

Members ... 60% .. Get a 40% discount off normal charges without insurance coverage

Non-members... 100% of billed charges due each time an ambulance is used

Why Take Chances?

Join Priority Care today!

What is a Priority Care "Membership"?



The Advanced Life Support Advantage

Highly Trained Staff

Each paramedic Advanced Life Support (ALS) ambulance serving our community is staffed with a team of highly trained professionals who have completed a rigorous training program. The EMTs and paramedics are state certified by the Arkansas Department of Health, and many are also members of the National Registry of EMTs.

Vital Sign Monitors

Special electronic monitors help provide rapid assessment of blood pressure, heart rate, and oxygen content for ill or injured patients.

Heart Monitor Defibrillator/Pacemaker

Paramedics are able to assess life threatening heart arrhythmias and may use a defibrillator to "jump start" the heart in cases of sudden death. Pacemakers may also be used to support critical cardiac patients.

Advanced Airways

Paramedics use a wide variety of advanced airway devices and techniques to deliver life saving oxygen. Even the latest technology – CPAP – is provided for the early treatment of congestive heart failure and severe asthma.

IV Fluids & Medications

Fluids are rapidly available to help those who are dehydrated or who have lost blood due to trauma. A vast array of emergency medications for diabetic, heart, and breathing emergencies is also available.

"A Priority Care Ambulance membership is your best protection from unexpected medical expenses when ambulance transportation is needed."

Few people ever plan to need an ambulance, but the fact is that thousands of times each year El Dorado Fire Department EMS and ProMed Ambulance respond when a life is on the line. Many others rely on the compassionate care that the highly trained professionals bring each time an ambulance is called.

While people recognize that the cost of an ambulance is no longer free, support for this special cost saving program is a solid community investment. Priority Care members recognize that the ambulance membership program makes it possible for their EMS system to provide the highest quality care possible – paramedic advanced life support. Even in remote rural areas, paramedics are readily available and bring a virtual 'rolling emergency room' to the patient's side.

More importantly, members realize the financial savings that the program provides to them and to the community. With the cost of a single emergency response exceeding \$500, a Priority Care membership helps offset these often unexpected medical expenses.

Even with a significant segment of the population covered by some form of insurance, most plans – including Medicare and Medicaid -- do not fully cover the costs for ambulance service. Many times, the patient is responsible for non-covered services and non-allowed charges. The fact is, you are probably only partially insured for the actual cost of ambulance and emergency medical services.

As a Priority Care member, you're costs may be fully covered and, in cases where no insurance is available or when insurance denies the claim, you are given a 40% discount off of the normal fees. **Those without a membership must pay 100% of the ambulance bill each time the ambulance is used.** That adds up to hundreds of dollars in savings if the ambulance is only used one time.



Partners In Caring
Rapid Response Saves Lives



Emergency Medical Services
The right care, always there.

Membership with ProMed is for me and/or my qualified family members listed herein.

I understand that this is NOT an insurance policy or supplement.

TERMS

PROVIDERS - The providers acting as agents under this program include ProMed Ambulance and the City of El Dorado Fire Department EMS. Priority Care is a special health care alliance which has merged two separate ambulance membership programs into one comprehensive package.

ENROLLMENT & ASSIGNMENT - I acknowledge that I am legally responsible to pay for any services provided to me by the providers acting as agents under this agreement. In consideration of the membership services provided, I agree to pay a non-refundable/non-transferable membership fee and assign to the provider on behalf of myself and those family members covered under this membership, all rights and benefits under any and all medical or health insurance policies (or plans) and all other medical benefits programs or plans which provide coverage for ambulance service. Family memberships may include head of household, spouse, and unmarried children under age 22 (under 24 if full-time students).

MEMBERSHIP SERVICES - Emergency services are provided to and from HOSPITALS within the provider's service area. (ProMed Ambulance serves multiple counties in Arkansas and additional coverage includes emergency transports to and from HOSPITALS within each county served by ProMed.) I understand that if my condition so indicates, the provider or the medical control physician may select the hospital to which I will be taken. The provider agrees to provide medically necessary non-emergency services according to the terms of this contract. (In addition to local non-emergency service, ProMed Ambulance has established a sixty [60] mile extended coverage radius around each base county in which it operates. Services to and from hospitals within the extended coverage radius are provided subject to the terms of this contract. In most cases, the extended coverage areas overlap allowing for greater coverage over longer distances) I understand that emergencies have first priority and that all dispatching decisions are the sole right of each provider.

NON-EMERGENCY TRANSPORTS & REIMBURSEMENT - Non-emergency transports to and from medical facilities other than hospitals (i.e. doctors' offices, clinics, dentist, freestanding dialysis, physical therapy, rehab, etc.) are provided within the county where the member resides (or within the county in which service is rendered, in a county serviced by ProMed.) I understand that in the event that I require non-emergency transport, and if no medical or health insurance or benefit plan provides payment for same, I shall be responsible for payment of those services to the provider. As a member, I understand that I shall receive a discounted rate [40% off] for such transports and that in the event that insurance or other benefits are not available for payment of this discounted rate, I shall be responsible for payment even if the transport was physician authorized.

MEDICAL NECESSITY - Services covered under this agreement must be MEDICALLY NECESSARY. I understand that membership services with respect to emergency transports is restricted to situations where I and/or my family members listed on this application have sustained injury, sudden illness or trauma and the need for the immediate medical attention of a doctor at a hospital emergency room exists. I understand that in the event non-emergency transport is requested (i.e. no sudden injury, illness or trauma requiring the immediate medical attention of a doctor at the hospital emergency room) physician authorization shall be required as a condition of transport. In most cases, medical necessity is determined by the patient's physician, however, the provider reserves the right to determine medical necessity for non-emergency service or to request prior authorization by a physician prior to service.

THIRD PARTY REIMBURSEMENT - As a member, I agree and consent to the Priority Care provider filing for and collecting payment for services provided under any and all medical or health insurance policies, plans or benefit programs, up to the amount of the provider's charges for ambulance services provided to me or the family members listed on this application. The provider agrees to accept the amount paid by the plan as payment in full. Any payments made to a member for services must be turned over to the provider in full, immediately. I authorize any holder of any information about me to release it to CMS, its Carriers or agents, to El Dorado Fire Dept. EMS, and to ProMed Ambulance now or in the future. Failure to provide necessary information concerning available insurance or medical benefits, or failure to forward any amount paid to the member for services shall result in revocation of membership. This agreement is exclusive to the members listed on this application and the providers named herein. Membership does not exclude facilities and providers subject to the terms and conditions of Medicare's Consolidate Billing and Prospective Payment System (CB/PPS) for skilled nursing facilities from paying for such services. Membership is not transferable to contracts with facilities subject to CB/PPS guidelines without prior authorization by the providers named herein. Providers under this program shall comply with HIPAA Privacy Standards and have published Privacy Policies related to the use and distribution of Protected Health Information (PHI). For specific information related to the provider's privacy standards, contact the agencies Privacy Officer.

Members with Medicaid coverage only should understand that joining this program is strictly voluntary and that you already have all benefits for covered services.

It's Easy To Join ...

Yes! Sign me up. \$39 Single \$59 Family

Take advantage of our open enrollment period during OCT and NOV. During this time, call or come by today and begin receiving the benefits of membership immediately. **After the drive ends, new memberships subject to a 10 day waiting period before benefits are available.**



Name _____ Birthdate _____

Social Sec. No. _____

Spouse _____ Birthdate _____

Social Sec. No. _____

Address _____

City/State/Zip _____

Daytime Phone (____) _____

Children (list ages): _____

Insurance Coverage (list ID No.'s) _____

I have read and understand the terms of the ambulance membership. I understand that this is not an insurance policy or supplement.

Signature _____ Date _____

Enrollment ends Nov 30th

Now accepting credit card payments for fast, secure processing.



Call for fast, secure credit card payment

**(870) 875-2273
1-800-634-0436**

or mail to:

**PO Box 11330
El Dorado, AR
71753**

**New residents just moving into the area may join outside the open enrollment period, but fees are not prorated. All memberships expire November 30 each membership year.*