

IMPORTANT INFORMATION ABOUT BILLING

It is very important that all members/subscribers respond promptly to any request from our billing department for primary or secondary insurance information. Failure to provide our billing department with any insurance or medical information necessary to submit a claim to your insurance company may void your ambulance membership.

If insurance carrier(s) reimburse you directly, you are responsible for the immediate remittance of the reimbursement to White Rose Ambulance. However, we reserve the right to refer any member account to collections if such a directly received payment is, for any reason, not forwarded as noted. If the insurance carrier denies the claim, except as indicated in the above paragraph, the member/subscriber is not responsible.

Important notice for Medicare beneficiaries who are members of a reciprocating ambulance organization: Medicare obligates us to balance bill for co-pays, co-insurance, or deductibles. Your membership with reciprocating ambulance organization will not automatically cover Medicare co-pays, co-insurance, or deductibles.



Membership Plans

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| Individual Membership (Any individual under 65 years old) | \$40.00 |
| Family Membership (Husband/Wife and all children under the age of 18 years or children attending higher education living under the same household) | \$60.00 |
| Senior Citizen (65 and over) (Any single individual of 65 years of age or older) | \$35.00 |
| Senior Citizen Couple (Any couple (married or significant other) with both individuals 65 years of age or older) | \$55.00 |
| Business 1-25 Employees | \$150.00 |
| Business 26-100 Employees | \$200.00 |
| Business 101-300 Employees | \$325.00 |
| Business 300-Up Employees | \$500.00 |



White Rose Ambulance

Primary Business Address
54 North Harrison Street
York, Pennsylvania 17403-1224
Phone: 717-848-4740
Toll-Free: 800-960-7944
Fax: 717-848-4748
E-mail: mail@whiteroseambulance.com
Website: www.whiteroseambulance.com

Eastern York County Ambulance Annual Membership Program

Includes: Hallam Borough, Hellam Township
& Wrightsville Borough



**“Incredible Service
24-Hours A Day”**



Serving Eastern York County Through Your Support

Your support helps us to maintain a quality level of care through community & employee education, training and proper equipment purchases.

We only offer this subscription program to individuals, families and businesses in Hallam Borough, Hellam Township and Wrightsville Borough. If you received this brochure in error, please disregard.

Membership Terms & Conditions

The 2013 Membership starts May 1, 2013 and ends April 30, 2014. Please complete all information on the reverse side of the enclosed Membership Subscription Request form. The names of all persons covered must be listed on the back of the form. Remove the Membership Card and retain for your records. Send the completed form along with your check or money order in the return envelope.

Your subscription will become effective on the date which we received it and it will expire on April 30th, 2014.

What you can expect from your subscription.

In cases where your medical condition requires a higher level of care, Memorial Hospital's Medic 102 or other Medic unit will provide paramedic or Advanced Life Support (ALS) services. White Rose Ambulance can submit these services along with our ambulance Basic Life Support (BLS) services as a "joint bill" to Medicare or your insurance carrier, provided there is an agreement in place. Your subscription will then cover any portion that Medicare or your insurance does not pay.

Subscribers who have insurance other than Medicare, or have no insurance and receive treatment from other paramedic services will be responsible for a separate paramedic bill. Your subscription does not cover services rendered by any other ambulance service.

What your subscription will not cover.

Non-Emergency Routine Transports: This is a non-emergency transport to a Doctor's office or other scheduled non-emergency trips from or to the hospital or other medical facility. Please contact the White Rose Ambulance 24-hour dispatch center at 717-848-4740 to arrange transport service for a lower cost effective way.

Response/treatment with no transport: All patients will be responsible for a minimum charge of \$95.00 for refusal of transport, when evaluation and/or treatment is provided. This includes lift-assist. Non-transport services are not covered by the membership.

Disclaimer: Although we strive to provide service 24-hours a day, 7 days a week, there are times when this is impossible, such as multiple requests at the same time. If we cannot provide service, the closest available ambulance will be sent to render emergency medical care to you. You will be billed by that service. White Rose Ambulance will not be responsible for costs associated with care provided by any other services, unless a mutual agreement is in place.

Limitations

Memberships are void for individuals who go into, or reside in an extended or skilled care facility.

All emergency ambulance calls MUST originate in our service area.

All emergency ambulance calls MUST be taken to a local hospital.

Due to Medicare guidelines, we must limit membership to three (3) ambulance trips per subscription period.

Non-Membership Subscribers

While you will still receive emergency ambulance service if you do not subscribe to this program, we strongly encourage all residents and businesses to participate in order to avoid costs above and beyond what typical insurance will cover.

Third Party Billing Program

Q. What is third Party Billing?

A. Third Party Billing basically means that we will bill Medicare/Medicaid or your commercial insurance first, and your subscription will cover any difference that is not paid.

Q. Who Is The "THIRD PARTY?"

A. You are considered the first party. The Ambulance Service is the second party. Your Insurance Company or Medicare/Medicaid is the third party.

Q. How Does Third Party Billing Work?

A. Every time you use the ambulance, a bill will be submitted to your insurance company. If your insurance company reimburses the ambulance any portion of that bill, we accept it as payment in full.

Q. Why Should I Be A Subscriber If I Have Medicare Or Other Insurance?

A. Ambulance companies have subscriptions because the amount of money they receive from billing may not cover all of their expenses. Subscription receipts help the ambulance company cover its expenses while waiting to receive payments from insurance companies and patients. If the ambulance company did not have subscriptions then every patient would be responsible for the full balance of the bill, regardless of what their insurance company paid.



717-848-4740

Toll-free 1-800-960-7944

Non-Emergency and Wheelchair Van Service