



MERCY FLIGHTS

Non-Profit Air and Ground Ambulance Services

2017 - MEMBERSHIP APPLICATION

- New Member
Renewal (#)

ROGUE SNOWMOBILERS

Applicant Information

Please Print

Name, Date of Birth, Street Address, City, State, Zip, Mailing Address, E-Mail Address

Additional Household Members (living at above address)

Table with columns: Last Name, First, MI, Date of Birth, Social Security #, Relationship. Rows 1-5.

Did you know?

- Mercy Flights is a non-profit organization...
Mercy Flights was the first Air Ambulance Service in the Nation.
Mercy Flights is the only organization in the U.S besides the American Red Cross Association that has permission to display the "Red Cross".

AIR & GROUND COMBINED - Annual Membership Rates (per household)

Combined Air & Ground

Single \$74.00
Family \$84.00

Senior* Rates - 62 years and older

Senior* Single \$69.00
Senior* Family \$74.00

Lifetime

\$1500



Special Membership rate is: \$59.00

I have enclosed payment of \$ (Please do not send cash)

- Money Order, Check, Credit card (Visa or MasterCard Only)

Exp. Date V-Code

** Please Read Agreement on Reverse, Sign and Return **

FOR EMERGENCIES CALL 9-1-1



MERCY FLIGHTS

Non-Profit Air and Ground Ambulance Services

MEMBERSHIP AGREEMENT

Mercy Flights services include Ground Ambulance within the Mercy Flights Jackson County assigned service area, Fixed Wing Air Ambulance within 1000 air miles and Helicopter Ambulance within 150 air miles of Medford, OR, in the continental United States.

1. I understand that Mercy Flights is not an insurance plan and will bill whatever insurance or medical benefits I may have and/or be entitled to for services rendered by Mercy Flights.
2. I understand that Mercy Flights membership fees are non-refundable and there is a 30 day waiting period for member benefits to take effect.
3. I understand that my membership covers my insurance co-pay portion, in full, for Mercy Flights services. I will be responsible for 50% of the bill if the entire charge for Mercy Flights services is applied to my deductible, denied, disallowed, or deemed a non-medically necessary service by my insurance company or other third party payer.
4. I understand that I will be responsible for 50% of the Mercy Flights bill, if I do not have any insurance. The Mercy Flights membership is not solicited from persons who receive Medicaid medical benefits and such membership constitutes a voluntary contribution only.
5. Should I or a covered family member receive payment from insurance or other medical benefits for ambulance services rendered by Mercy Flights, I will immediately forward such payment to Mercy Flights.
6. I understand that violation of such terms of this agreement or substantiated abuse of ambulance services may result in cancellation.

ELIGIBILITY:

Eligible household members consist of the head of household, spouse, and immediate family members who live at the same physical location, are legal dependents and are under 19 years of age. These legal dependents can include unmarried dependent fulltime students, under the age of 22, who reside at the same or a different physical location or a spouse who resides in a care facility. Qualifying household members also include: disabled children, minor children of non-custodial parents, domestic partners, and dependent parents residing at the same physical location. Spouses, disabled children, or dependent parents will continue their membership, if they move from the household into a care facility.

NOTICE:

This Mercy Flights, Inc. Ambulance Plan is not an insurance program. Membership benefits are for services provided by Mercy Flights Inc. only. It will not compensate or reimburse another ambulance company that provides emergency transportation to you or your family. Other ambulance company transports may occur if Mercy Flights is unable to perform within a medically appropriate timeframe. This may occur, but is not limited to a mechanical or maintenance problem or being on another call. This may also occur if the emergency location is outside of Mercy Flights' assigned service area. If the other transporting ambulance company has a signed reciprocity agreement with Mercy Flights, that agency's membership benefits will be applicable to the transport.

SIGN _____ **PRINT NAME** _____ **DATE** _____



Non-Profit Air and Ground Ambulance Services

MEMBERSHIP PROGRAM GROUP DETAILS

Mercy Flights is a local non-profit company providing air and ground ambulance service to our community.

- Ground ambulance services to over 2000 square miles
- Helicopter emergency on-scene response within 150 air miles of Medford
- Airplanes provide air ambulance transport as far as 1000 air miles from Medford (West of the Rockies)
- Provides ground and air ambulance service to anyone needing medical transportation in our 911 service area
- Emergency medical staff of specially trained Critical Care RNs, Paramedics, EMT's & experienced Pilots

HOW MEMBERSHIP WORKS... (If you have a transport AIR or GROUND)

- After your 30-day waiting period, if you have a transport...
- Mercy Flights will bill your insurance and will accept what your insurance pays as **payment in full**
(If the charge is \$3000 and your insurance pays \$2000, we write off the balance)
- If no insurance or no insurance payment is received, you will only be responsible for 50% of the bill

RESPONSE & ASSESSMENT (NON-TRANSPORT)...

- **Medical Insurance, Medicare and/or supplement does NOT pay. Total bill is patient responsibility.**
- As a Mercy Flights Member, everyone has **one** FREE non-transport.
- After that, non-transport will be billed at 50% off for members

EMERGENCY TRANSPORTS ARE EXPENSIVE!!

- Ground Ambulance \$ 1,094.00 plus \$15.60 per mile (avg. \$1,200-\$1,500)
- Fixed Wing Airplane \$ 10,508.00 plus \$57.00 per mile (avg. \$22,000+)
- Helicopter \$ 18,831.00 plus \$89.00 per mile (avg. \$21,000+)
- Response & Assessment \$ 331-\$ 404+ one-FREE per member (after that-50% off)

YOUR MEMBERSHIP COVERS...

- You and Your spouse/significant other/life partner
- Your dependent children under 19 years old and full-time students under 22 years old
- Disabled children over 22 years and elderly parents living at the same physical location
- Disabled child or spouse living in a care facility

ANNUAL MEMBERSHIP FEE:

Regular Annual Family Cost: \$ 84.00

MEMBERSHIP CAN BE TAX DEDUCTIBLE

- Mercy Flights, Inc. is 501(c)(3) nonprofit corporation
- If you do not receive services for any year, the cost of your membership is a tax deductible donation!

RECIPROCITY

- **Ashland Fire & Rescue - Rogue River FireMed - Glendale Ambulance – Am. Medical Response in Josephine Co (AMR)**

If transported by any of these agencies, your Mercy Flights membership is honored in accordance with their membership benefits. Your Mercy Flights membership for ground ambulance service is limited to Jackson Co. & our reciprocal agencies.

QUESTIONS CONTACT: Membership Office (541) 858.2646 or debh@mercyflights.com

ALL ENROLLMENT FORMS & PAYMENTS MUST BE SUBMITTED TO GROUP CONTACT

FOR EMERGENCIES CALL 9-1-1