

With the addition of Life Flight of Oregon in Central Oregon we have been receiving numerous questions regarding Firemed and air ambulance memberships. The addition of Life Flight is a welcome service in Central Oregon; firefighters, paramedics, and other first responders will always appreciate their ability to transport a severely sick or injured patient to definitive care as quickly as possible.

Frequently asked questions:

Q: “Are Airlink and Life Flight the same company?”

A: No, Airlink and Life Flight are two completely separate, independently owned, and operated companies. Due to a recent rule change, the memberships for these two companies are no longer reciprocal.

Q: “If I join Firemed through Lifeflight does that cover an air transport as well?”

A: No, Firemed only covers ground ambulance. Life Flight is simply managing our Firemed program and we are not affiliated in any way. If you want to be covered by Life Flight and Firemed you should buy the combination air/ground membership.

Q: “If I have an emergency, who will decide if a helicopter is necessary?”

A: The paramedics on the ground will make the decision to fly a patient based on numerous factors. These could include distance/time to definitive care and the severity of illness or injury.

Q: “Can I specify which air ambulance will transport me?”

A: No. The paramedics on the ground will only call for an air ambulance. We don't specify Airlink or Life Flight. It is then up to the 9-1-1 operator to contact the closest air ambulance. Also, if you are in good enough shape to worry about which air ambulance will be transporting you then, as a general rule, you probably don't need to go to the hospital by air ambulance.

Q: "If I live in Sunriver, which air ambulance is the closest?"

A: The State of Oregon does not set boundaries or service response areas for air ambulances like it does ground ambulances.

Central Oregon has decided to regulate the service areas for the two helicopter services. However, if one helicopter is busy, then the other will respond where needed regardless of the above-mentioned service areas. The air matrix in Central Oregon designates that Airlink has first right for all areas in Bend and southern Deschutes County, including Sunriver and La Pine. Life Flight has first right in Redmond, Sisters, northern Deschutes, and Jefferson Counties.

Also, in the event that both Airlink and Lifeflight are busy, paramedics can call on other air ambulance companies in the state of Oregon if we deem it medically necessary. These other services may or may not be covered by reciprocal agreements with either Airlink or Life Flight.

Other FAQ's

From Airlink: <http://www.airlinkcct.org/faq/> Reprinted with permission

Q: What does it mean in the Terms of Agreement that, "Persons who receive Medicaid, Department of Medical Assistance Programs, Oregon Health Plan or other government assistance medical benefits need not be members in order to have full coverage for services covered under these programs. Any such membership constitutes a voluntary contribution only."

A: Under federal and state regulations for these programs, a medical provider cannot bill the patient for any balances owed after Medicaid, the Oregon Health Plan or other such programs have reimbursed the provider any amounts on behalf of patients who receive these services. Therefore a FireMed membership does not provide any extra benefit to these patients.

However, it may be beneficial for persons who are covered under these plans to still join FireMed. FireMed will cover these individuals if the assistance program rejects the medical claim or if the patient becomes ineligible for these services during the membership year. In these cases, unless they are a FireMed member, the patient will be responsible to pay the entire amount for ambulance services.

Q: Is it true I need two air ambulance memberships to be covered throughout the area?

A: Yes. At this time, AirLink cannot offer reciprocity with Life Flight of Oregon or other air medical programs (other than those in the AirMedCare Network). When Medicare is accepted as payment, there are strict rules that must be followed. AirLink is strongly committed to complying with all applicable healthcare rules and regulations governing its participation in both Medicare and state Medicaid programs. Therefore, AirLink cannot honor other unaffiliated air medical provider memberships due to Medicare's current regulations. If Medicare/Medicaid program guidelines change, AirLink will adjust accordingly.

Q: How do you choose where a patient gets transported?

A: Patients are transported to the closest appropriate medical facility. An onboard medical professional determines the closest appropriate facility to handle medical conditions that are considered to be threatening to life or limb or that could lead to permanent disability. During an inter-hospital transport, the sending physician is the one to determine which medical facility is appropriate.

Q: If I am a member and end up being transported by a ground ambulance or another air ambulance service, am I responsible for the bill?

A: If you are transported by a ground ambulance in Oregon that is part of the FireMed reciprocal network and are not a FireMed member, you will be responsible for the bill. If, however, you purchased a FireMed ground ambulance membership, your membership will be honored by more than 80 participating FireMed ground agencies in the state. If you are transported by an air ambulance other than those in the AirMedCare Network, you will be responsible for payment of the bill. Our membership program only covers flights by air ambulance in this network.

Q: Does my primary insurance cover the cost of a flight? If so, how much?

A: This answer varies, with each insurance company offering different plans and coverage. It is up to your individual insurance company as to whether they will cover the cost of a flight, as well as to the amount of economic burden placed on the patient via a co-pay or deductible. We recommend that you contact your insurance company directly to obtain detailed coverage information.

Q: My insurance company says they will cover 100%, so why do I need this membership?

A: Most insurance companies will pay 100% of what they deem an allowable amount for air ambulance, which does not necessarily mean the total cost of the flight, will be covered. Additionally, people frequently change insurance companies and plan designs. You will want to check with your individual insurance company to find out exactly how much they will cover in the case of an air ambulance transport.

Q: If I have Medicaid, do I need a membership?

A: No. Some state laws prohibit Medicaid beneficiaries from being offered membership or accepted into membership programs. As part of our application process, members certify to us that they are not Medicaid beneficiaries.

Q: If I have Medicare B and a supplemental policy, do I need a membership?

A: This answer varies, depending upon the nature of your transport and your supplemental insurance provider. In many cases, Medicare and the supplemental insurance coverage should pay for the cost of air ambulance transport if it is medically necessary and if Medicare believes you were taken to the closest appropriate hospital. We have seen cases where the supplemental insurance provider does not cover a remaining balance after Medicare has paid its portion. Many seniors have said they want a membership even if they have complete coverage, in the event that their insurance coverage changes in the future or if the claim is denied.