

NAME:

SS#:

Warehouse Employees Union Local No. 730 Health & Welfare Trust Fund

EMPLOYER: Giant Food Warehouse
PLAN: E

LOCAL: 730
STATUS: Full Time

ISSUE: Medical – Emergency Room Services

#M14/109-1235

FUND RULE:

"COMPREHENSIVE MEDICAL BENEFITS

Class E

Covered Expenses

Treatment, services, and supplies recommended by a physician or surgeon may be covered for you and your eligible dependent provided they are medically necessary and the amounts charged do not exceed the UCR charges...

Outpatient Emergency Accident or Illness - Hospital expenses incurred at a hospital emergency room or ambulatory care center within 72 hours of an accident or emergency illness are covered up to the day maximum for all hospital confinement benefits in a calendar year.

Outpatient Illness - Hospital expenses incurred at a hospital emergency room or ambulatory care center are NOT payable for a non-emergency illness. See section on Doctors' Visits and Outpatient Diagnostic X-ray & Lab Benefits for further details."
(Warehouse Employees Union Local No. 730 Health & Welfare Trust Fund SPD, Pages 52-54)

"EXCLUSIONS UNDER COMPREHENSIVE MEDICAL BENEFIT

Class E

The following procedures and/or expenses are not covered under the Comprehensive Medical Benefit:

9. Treatments, services, or supplies deemed unreasonable or unnecessary."

(Warehouse Employees Union Local No. 730 Health & Welfare Trust Fund SPD, Page 60, #9)

SUMMARY:

Date(s) of Service:	January 14, 2014
Claim Received:	February 4, 2014
Claim Denied:	February 7, 2014
Appeal Received:	February 21, 2014

The **participant** is appealing for payment of claims for emergency room services that were denied. The participant states, "I visited St. Mary's Hospital because I was not feeling well, I had aches and pain all throughout my body, so I left my job early. My hours are 3pm to 11pm and I left at 7pm, which would be a half days work. At that time of day, my doctor's office is closed and I did not know what else to do but to go to the emergency room."

Fund records indicate St. Mary's Hospital submitted a claim for emergency room services with the diagnoses "flu, unspecified fever, headache, backache, cough, and history of allergy to penicillin". Medical Emergency Professionals also submitted a claim for emergency room (physician) services with the diagnoses "unspecified fever and flu". The claims were denied because the services were not considered emergency treatment within the extent of the Plan.

After the appeal was received, a letter was mailed to the participant on February 24, 2014, requesting complete medical records for this date of service in order to verify the nature of the treatment. The participant responded on March 4, 2014 with a copy of discharge instructions, indicating he was diagnosed with the flu and given a prescription for Tamiflu. The participant was recommended to follow up with his primary care physician within one to three days. After review, the claims remained denied.

ACTION:

Approved

☐

Denied

☐

Tabled

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COMMENTS: