NAME: **SS#:**
REGARDING:

Industry and Local 338 Welfare Fund

LOCAL: 338
STATUS: Full Time

ISSUE: Hospital/Medical – Out-of-Network Deductible #M14/101-3079

FUND RULE:
"**Summary of Benefits and Coverage:**

Deductible

In-Network: $500 Individual / $1,250 Family
Out-of-Network: $2,000 Individual / $5,000 Family

Common Medical Event
Emergency medical transportation
Your cost if you use an in-network provider……No charge
Your cost if you use an out-of-network provider…….40% coinsurance"
(Industry and Local 338 Welfare Fund Actives, Summary of Benefits and Coverage)

SUMMARY:

Date(s) of Service:	August 13, 2013
Claim Received:	March 19, 2014
Claim Processed:	March 24, 2014

The **billing agent for the provider,** Nanuet Community Ambulance, is appealing for reconsideration of charges related to ambulance services rendered to the particpant's spouse on August 13, 2013. The provider states, "An emergency ambulance service is not an elective service for the patient and they have no choice as to what ambulance is dispatched, regarding whether it is in or out of network with their insurance coverage."

Fund records indicate Nanuet Community Ambulance (an out-of-network provider) submitted a claim in the amount of $1,119.00 for a ground ambulance transport. The billed amount was allowed in full and applied to the participant's spouse's out-of-network $2,000 individual annual deductible. Therefore the participant's spouse was responsible for the full amount of the bill.

If the participant's spouse had satisfied the out-of-network deductible, the Fund would pay $671.40 (60% of the billed amount). The spouse's responsibility would be $447.60.

If the charge was considered in-network, the Fund would pay the full billed amount of $1,119.00.

After the appeal was received, Anthem verified with the Fund office that Nanuet Community Ambulance does not participate.

ACTION: **Approved** ☐ **Denied** ☐ **Tabled** ☐
COMMENTS: