LIFECARE 2027 NEW Membership Application

OFFICE USE ONLY	
DATE RECEIVED	
CHECK NUMBER	AMOUNT

PLEASE PRINT Complete all information and sign below.

Primary Member

First Name, Middle Initial, Last Name		☐ Male ☐ Female
Address	City/State/Zip	
Date of Birth	Phone No.	Email

Spouse Information

First Name, Middle Initial, Last Name	Email	Date of Birth

Dependent Information

Dependents are single children living with you under the age of 26. Any/all dependents must be living with you or be claimed as a dependent on your Federal Income Tax. Attach separate sheet for additional dependents.

First Name, Middle Initial, Last Name	Relationship	Date of Birth
First Name, Middle Initial, Last Name	Relationship	Date of Birth
First Name, Middle Initial, Last Name	Relationship	Date of Birth

Method of Payment

☐ Credit Card ☐ Personal Check (Payable to LifeCare 2027)	Card Number	Date Card Expires	CVC

PAYMENT AMOUNT **$100** **Mail no later than December 7, 2026**

Membership contract must be signed by the Insurance Policy Holder or Authorized person if uninsured. I authorize the release of any medical information, held by anyone necessary to process a claim, and further assign and authorize such payment to be made directly to TRAA.

As additional consideration for my Life Care membership, I have agreed to assign my ambulance benefits of my insurance contract rights to TRAA or my participating Allen County township ambulance service for any date of transport.

Please read 2027 Coverages and Membership Contract carefully for full contract terms. Memberships are non-transferable and non-refundable.

By signing below, I acknowledge that I have read and reviewed the LifeCare 2027 Coverages and Membership Contract in its entirety. I understand its terms and conditions and agree to be bound by them.

SIGNATURE REQUIRED
Please sign here: X _____ Date _____

IMPORTANT INSTRUCTIONS: Read and sign the application. Return with your enclosed payment of $100 by December 7, 2026. Questions? Call 260-422-9172. Mail to: LifeCare, P.O. Box 12050, Fort Wayne, IN 46862.

LifeCare 2027 Coverages and Membership Contract

(IMPORTANT INFORMATION – PLEASE READ CAREFULLY BEFORE SIGNING APPLICATION, AND KEEP FOR YOUR RECORDS)

1. **Who is eligible for membership in LifeCare?** Residents of Fort Wayne are eligible to purchase LifeCare. **Medicaid recipients <u>are not eligible.</u>**
2. **What is LifeCare?** LifeCare **<u>IS NOT INSURANCE</u>**. LifeCare is a membership program that limits the amount you have to pay that your insurance does not pay of your ambulance charges.
3. **Does LifeCare cover ambulance service provided by Allen County ambulance services?** The Allen County Fire and EMS Districts are currently NOT participating providers. LifeCare membership covers eligible services by Three Rivers Ambulance Authority (TRAA) only.
4. **What is "Medically Necessary"?** LifeCare's definition of medical necessity follows the federal government's definition for federal health insurance programs such as Medicare. The specific definition of medically necessary used by federal government programs is: "Medical necessity is established when the patient's condition is such that the use of any other method of transportation would be hazardous to the patient's health. This implies that alternative, less expensive forms of transportation should be used unless the health of the beneficiary would be at risk by so doing. If transportation other than an ambulance could be utilized without endangering the individual's health, whether or not other transportation is actually available, no payment may be made for the ambulance service. Additionally, Medicare will not reimburse for ambulance transportation if the service planned for the patient at the destination could be provided as effectively and more economically at the patient's location (e.g. nursing home, residence.)" In other words, if the patient did not actually need the medical services of the ambulance personnel, and could have been transported by wheelchair van, taxi, private car, or some other means without it being reasonably expected to endanger the patient's life, the LifeCare membership and most insurance companies will not cover this service.
5. **Who decides if my transport is medically necessary?** It is fraud for ambulance services to bill Medicare for services that the ambulance service believes do not meet medical necessity criteria without notifying Medicare that we question the medical necessity of the service. Therefore, the first determination will be made by TRAA before billing Medicare or your private insurance using Medicare and standard insurance guidelines. The second determination is made by your insurance. If your insurance decides the transport is medically necessary, and pays part of the bill, your LifeCare membership will cover any amount of the ambulance bill not paid by your insurance following the guidelines outlined in section "What coverages does LifeCare provide?" TRAA reserves the full right to ultimately determine whether or not the ambulance transportation was medically necessary for LifeCare coverage, or to determine if abuse of the program exists (see section "What is abuse and how does it affect my LifeCare coverage?").
6. **What coverages does LifeCare provide?** LifeCare covers all medically necessary ambulance service, both emergency and non-emergency as outlined below. You (the member) are responsible only for the amount actually paid by your insurance company, under the following conditions: If your insurance pays a portion of the charges (more than just the amount of your LifeCare membership fee), you are not responsible for payment of any balance not paid by your insurance. If your insurance company pays nothing toward your bill, pays only your membership fee cost, applies entire amount to your deductible, you have no insurance, or your ambulance service is determined as not medically necessary, you will be financially responsible for 60% of the ambulance bill, which means a credit of 40% of the bill for your membership status. Continual or frequent use of ambulance service for non-medically necessary reasons may be considered an abuse of the LifeCare membership (see section "What is abuse and how does it affect my LifeCare coverage?").
7. **What is NOT COVERED?** Certain items are specifically excluded from coverage and are not covered by LifeCare. You understand that if you use ambulance service for any of these excluded services, your LifeCare membership WILL NOT cover these charges and you will be financially responsible for the entire amount of the ambulance bill. The items specifically excluded are:
    - Transportation to or from a facility not within Allen County, Indiana;
    - Transportation from one facility to another that is solely at the patient's (member's) request, unless the second facility is capable of providing medically necessary care not available at the first facility;
    - Services considered by Medicare as "Non-Covered Services"
    - Transportation by a non-participating ambulance service or any air ambulance provider;
    - Transportation to or from: Physician's Offices - Pharmacies - Dentist's Offices - Physical Therapy Centers;
    - Transports provided by Lutheran Hospital's MICU or Parkview Hospital's ambulance or MICU
8. **What if my ambulance service is not medically necessary?** If you have Medicare and your ambulance service is unable to demonstrate sufficient medical necessity to bill Medicare, you will be asked to provide documentation from your physician or hospital to demonstrate medical necessity for billing purposes. If you fail to provide proper documentation, or Medicare determines your transport was not medically necessary, you will be given a credit of 40% of the bill for your LifeCare membership status. If you have private insurance and your insurance company determines your transport to be not medically necessary, you will be given a credit of 40% of the bill for your LifeCare membership status. If you have no insurance, you will be given a credit of 40% of the bill for your LifeCare membership status. For all cases, continual or frequent use of ambulance service for non-medically necessary reasons may be considered abuse of the LifeCare membership and your membership may be canceled by TRAA (see section "What is abuse and how does it affect my LifeCare coverage?").
9. **What is "abuse" and how does it affect my LifeCare coverage?** Abuse is the continual use of ambulance service for reasons that are not medically necessary, when the member either knows, or should know that the ambulance service would not be considered medically necessary, or after the member has been informed by TRAA that their pattern of use of ambulance service for non-medically necessary service is an abuse of their membership. If abuses of ambulance service for non-medically necessary reasons continue after the member has been notified by TRAA, the member's LifeCare membership may be revoked and canceled at the sole discretion of TRAA. TRAA reserves the sole right in determining when an abusive pattern of use of ambulance service and the LifeCare membership exists. Membership fees WILL NOT be refunded if your membership is canceled by TRAA.
10. **Does LifeCare coverage extend outside of Allen County?** No. LifeCare only covers services provided within Allen County, Indiana, and only when you are transported by TRAA.
11. **Which family members are covered under a single membership?** A single membership covers you, your spouse, and single, dependent children living with you under the age of 26. Any/all dependents must be living with you or be claimed as a dependent on your Federal Income Tax.
12. **Who receives the money my insurance pays?** As a LifeCare member, TRAA will bill your insurance for you (excluding auto insurance). You agree to authorize Medicare or your insurance company to send payment directly to TRAA. Further, you agree to immediately send any payment you may receive from your insurance company to TRAA as a condition of your membership. By abiding by these terms, TRAA agrees to accept payments by your insurance company as payment in full, and you will not owe the balance not paid by your insurance. Failure to abide by these terms will nullify this membership contract and you will owe all charges.
13. **What are the effective dates of my membership?** Your membership will be effective from **January 1, 2027 through December 31, 2027** unless revoked or canceled by LifeCare.

View this document online at www.LifeCareSaves.com, LifeCare Business Office 260-422-9172