

FRESNO UNIFIED SCHOOL DISTRICT EMPLOYEE HEALTH CARE PLAN

TO:	PARTICIPANTS OF THE FRESNO UNIFIED SCHOOL DISTRICT EMPLOYEE HEALTH CARE PLAN
FROM:	JOINT HEALTH MANAGEMENT BOARD
SUBJECT:	EMPLOYEE HEALTH CARE PLAN AMENDMENT 2020-5 AMBULANCE SERVICES
DATE:	MARCH 18, 2021

This notice defines important changes to the Fresno Unified School District Employee Health Care Plan EFFECTIVE OCTOBER 15, 2020. The Joint Health Management Board of the Fresno Unified School District has modified the Covered Medical Benefits for Plan Options 'A' and 'B' in regards to ambulance services, adding coverage for medically necessary non-emergency ambulance services.

AMBULANCE

Effective October 15, 2020, the Plan will pay for ambulance services as follows:

- Emergency Ground Ambulance Services Emergency ground ambulance services for transportation to the nearest Hospital providing Emergency care, only if a reasonable person in the same circumstances would have believed that the medical condition was an Emergency medical condition which required ambulance services.
- Emergency Air Ambulance Services Emergency air ambulance for transportation of Participants whose medical condition requires immediate and rapid transport due to the nature and/or severity of the illness or injury. Emergency air ambulance transportation must meet all of the following criteria:
 - The Participant's destination is an acute or critical care Hospital.
 - The Participant's condition is such that a ground ambulance (basic or advanced life support) would endanger the Participant's life or health.
 - The Participant does not have access to ground ambulance transport or the extended length of time required to transport the Participant via ground ambulance would endanger the Participant's life or health.
- Non-Emergency Ground Ambulance Services Medically Necessary non-emergency ground ambulance services to transport the Participant to or from a hospital, skilled nursing facility, or critical care provider, as well as transport to and from certain medical appointments, in order to obtain medically necessary covered care, <u>and</u> transportation by any other means would endanger the Participant's health based on their physical limitations or impairments. Example: Participant is bed-bound and requires stretcher transportation; or patient is using complex or large medical equipment, such as a ventilator. Non-Emergency ground ambulance transportation must meet all of the following criteria:
 - The participant's treating physician must provide a written order verifying the ambulance transport is medically necessary because of a health condition.
 - The Participant's condition is such that transport by any other means would endanger the Participant's life or health.
 - The transport is authorized by Anthem Blue Cross as medically necessary.
 - Is not being used primarily for Participant convenience.