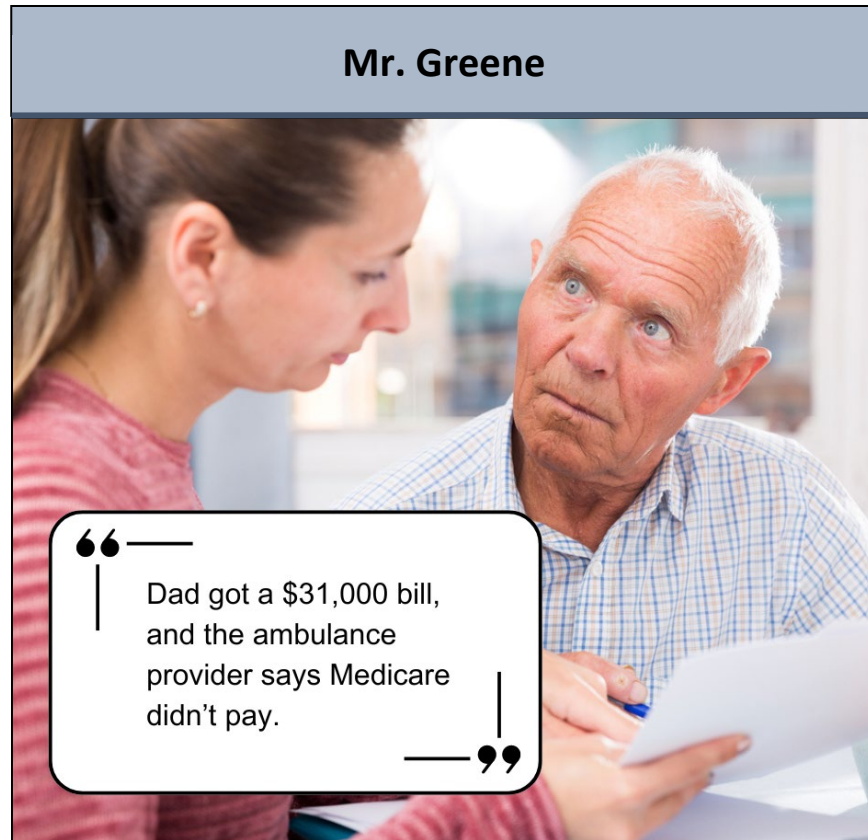


Scenario Worksheet

Medicare Coverage for Ambulance Transportation



Scenario

Mr. Greene's 80 and enrolled in Medicare Part A (Hospital Insurance) and Part B (Medical Insurance). He lives with his daughter Lisa, who has power of attorney to act on his behalf. Mr. Greene just got a bill from an ambulance provider for \$31,000. Lisa called the ambulance provider to ask about the bill. They said Medicare didn't pay because the trip by air ambulance wasn't medically necessary. Lisa explained that she called 911 because her father wasn't able to feed himself during dinner and couldn't move his right arm. Mr. Greene was transported to the emergency room (ER) at a local hospital, where they did a CT scan. He was diagnosed with an acute cerebrovascular accident (CVA), the medical term for a stroke. The treating doctor asked for a transfer to a facility with a higher level of care (neurological specialty) for neurointerventional radiology, which wasn't available at the first hospital, and arranged the transfer by air ambulance because Mr. Greene's condition was too critical for ground transportation. Lisa is concerned about the bill and wants to know what their options are.

4. Is the ambulance provider able to bill Mr. Greene if he didn't request the ambulance?

5. What's the next step for Mr. Greene's daughter?