

WEST END AMBULANCE SERVICE



Why should I purchase a membership?

Most insurance companies do not cover the full charge of an ambulance transport, leaving you with the balance of the bill, including co-insurance fees. Your membership will cover 50% of the unpaid portion of your emergency services except those required by law or regulation.

When transported by West End Ambulance Service, we submit a claim to your insurance company on your behalf. You will only be responsible for 50% of the amount not covered. We request you provide proper insurance information within seven days of the date of service so we may accurately bill.

Due to the ever rising costs we have changed our policy of 100% write-off to 50%. Reimbursements have greatly reduced with the changes in healthcare. To keep operating and providing you with the highest quality pre-hospital healthcare this was a difficult decision we had to make.

FAQ's

What number do I call for an Emergency? 911 - -only call the office number to schedule non-emergency transports and any other questions you may have.

Will my membership cover someone living with me? Yes, your membership covers everyone in the household even someone who may be visiting you.

When is my membership due for renewal? Renewal dates are determined by the month in which you sign up for service. You will be sent a renewal yearly about a month before expiration.

What are my payment options? You can renew by mail or credit card, please call our office at 814-539-8045 Monday to Friday between 8 and 4. Or stop in and see us we like to meet our members.

Does this cover both Emergency and Non-Emergency trips? If we transfer you from one hospital to another the same rules apply, we will cover 50% of what is not covered by insurance.

If I have a membership is the ambulance free for me? We will still bill your insurance and accept the rate assignment. You are responsible for any and all deductibles your insurance company may have for your policy however you will only be responsible for 50% of your co-pay.

If I do not have a membership how much of the bill will I be responsible for? You will be responsible for the entire remaining balance after the insurance company remits.

I have a high deductible, will my membership cover that? No, by law you are responsible for your deductible. This is not a secondary insurance policy.

How much could I be responsible for if my insurance does not cover my emergency trip? Depending on the care needed it could be between \$850 - \$1200.00 per trip.

If I do not have a membership can ambulance deny me transportation? No, an ambulance will always be there for you when you dial 911.

My check for ambulance service came in my mail, what do I do with it? You can deposit it your account and send us a personal check or sign the back of it and send it to the ambulance service.

What happens if I keep my check and not pay the ambulance? We check through the insurance company to see if it was issued and cashed. If that happened we will send you a notice. Failure to pay can be considered Theft of Services and the proper paperwork will be filed.

We offer many different options to pay the balance of the bill or your complete bill if you have no insurance. We offer reasonable monthly payment plans. In times of hardship you can file a hardship letter that will be considered for forgiveness or reduction of your bill.

Should you have any questions or comments please feel free to contact West End Ambulance. We will be happy to speak with you.

Thank you for using West End Ambulance:

“ A Professional Ambulance Service”

Head of Household _____

Date of Birth: _____ / _____ / _____

Telephone # _____

Please list the name of each person living with you:

1. _____ 3. _____

2. _____ 4. _____

Payment Method: ☐ Cash ☐ Money Order ☐ Check # _____

- ☐ \$35.00 Senior Discount 65 Years & Older
☐ \$40.00 Residential Membership
☐ \$100.00 Business Membership
☐ _____ Donation

TOTAL ENCLOSED

West End Ambulance will provide unlimited emergency service 24 hours a day. This membership authorized WEAS to bill and receive payment from your insurance company. If payment is sent directly to you it is your responsibility to forward the check to WEAS. The amount paid by your insurance company will be accepted as full payment with no expense to you. This membership is non-transferable and takes effect immediately upon payment of the membership fee.

**IN AN
EMERGENCY
DIAL 911**

**West End Ambulance
Business Calls and
Johnstown Medical
Transcare
(wheelchair van service)**

539-8045

**West End Ambulance
Service, Inc.**

RECEIPT

NAME:

**Your new membership
will expire:**

Keep this card in your records as proof of payment. It is not necessary to show this card to West End Ambulance personnel prior to using ambulance.

RETAIN THIS PORTION



West End Ambulance Service, Inc.

175 Garfield Street • Johnstown, PA 15906 • 814-539-8045

**Your Membership will be expiring soon! Please complete
the reverse side of this card and mail with your payment.**

Thanks for your support.