



RESCUE CARE

No one should hesitate to call an ambulance during an emergency. When seconds count, the care you receive may save your life. If you are worried about the potential cost of ambulance service, give yourself and your family peace of mind with the Whitefish Fire Department's Rescue Care program.

Rescue Care protects your entire household* against unexpected bills for emergency and medically necessary ambulance transport provided by the Whitefish Fire Department in and around the City of Whitefish. If you do need to call an ambulance, Rescue Care bills your insurance and covers the balance. There are no complicated claim forms to complete.

The Rescue Care program runs annually from July through June. You can become a member of Rescue Care anytime during the year and the fee is the same regardless of when you enroll. All memberships will start July 1 and expire the following June 30.

The benefits of Rescue Care also extend to the community. When you invest in Rescue Care, your dollars stay in Whitefish and support the Whitefish Fire Department's comprehensive emergency fire and medical response system. Your participation in the Rescue Care program helps save lives by providing advanced medical training and lifesaving equipment for our first responders.



RESCUE CARE

Rescue Care household membership* is only **\$59 per year for Whitefish residents** (within City limits) or **\$185 per year for Flathead County residents** living outside of Whitefish city limits, but still within the Whitefish Ambulance service area.



HOW RESCUE CARE WORKS:

If a Rescue Care member needs ambulance transport by the Whitefish Fire Dept., Rescue Care will bill the individual's insurance carrier and consider whatever insurance covers as **payment in full**. The annual membership fee covers everything else.

** Household membership in Rescue Care includes all persons who are permanent residents of the same single-family (non-commercial) dwelling within the City of Whitefish's Ambulance service area, living together as part of a family unit, but excluding roommates or boarders. Membership also includes household members living in substitute care.*

For more information about Rescue Care, call the Whitefish Fire Department at (406) 863-2490, email RescueCare@CityofWhitefish.org or visit CityofWhitefish.org/247/Rescue-Care.

The following agreement terms apply to all members of Rescue Care:

- Rescue Care is sponsored by the City of Whitefish and is a voluntary program that provides ambulance service to its members for a membership fee of only \$59.00 per year for city residents and property owners, or \$185.00 per year for residents outside of city limits but still within the Whitefish ambulance service area. People residing within the Whitefish ambulance service area are eligible to join Rescue Care by properly completing the attached application form and upon payment of the annual membership fee. Coverage begins upon acceptance of the application by the City, and upon receipt of the appropriate membership fee. Rescue Care runs July through June. You can purchase Rescue Care anytime during the year for the full amount, with the membership expiring June 30th. All memberships expire June 30th, regardless of enrollment date and the fee is the same regardless of when you enroll. There will be no refunds of enrollment fee if you cancel Rescue Care coverage prior to expiration date. A renewal notice will be sent in June for the following year.
- A membership in Rescue Care covers applicable patient out-of-pocket expenses for medically necessary emergency and certain non-emergency ambulance care, and for ambulance transportation within the Whitefish ambulance service area. The City's ambulance service area includes the City of Whitefish and an area slightly larger than the Whitefish Fire Service Area. Non-emergency ambulance services must be pre-approved and must be medically necessary.
- In addition to payment of an annual fee, members are required to assign to the City all of their rights and benefits for ambulance service from all insurance policies, plans or other programs that they may have, including all rights in any claim or third-party recovery, up to but not exceeding the total dollar amount of ambulance services incurred, where ambulance services were provided by the City. **Members agree to provide all insurance information at the time of submitting the application.** If any person covered under this Rescue Care membership receives any payment for ambulance services provided by the City, that person must immediately send such payment to the City. In addition, Rescue Care members authorize the release of medical and other information by or to the City as necessary for appropriate ambulance billing.
- In dealing with a member's insurance company, members authorize a copy of this agreement to be used instead of the original agreement. Members also assign and authorize payment of benefits for ambulance services directly to the city, according to the terms of the Rescue Care agreement and as itemized on appropriate claim forms. A member's annual membership fee covers any applicable deductible, co-insurance, or other co-payment amounts and a member directs that the usual and customary ambulance reimbursement from the member's insurance company be sent directly to the City.
- Since a member is only charged \$59.00 (in city limits) or \$185.00 (outside city limits) annual membership fee, the City is entitled to bill a member's insurance or other coverage for ambulance service that the City provides, and the City is entitled to recover from such insurance company or coverage all benefits paid for ambulance services, up to the total amount of services provided. Rescue Care members agree to cooperate and assist the City as necessary in any effort to bill and collect ambulance reimbursement from their insurance company, including the completion of appropriate claim forms. Members are also required to provide the City with all information requested concerning their insurance policies, plans or other benefit programs they have, and any third-party recovery. In the event of a change in insurance information, the member agrees to notify the City immediately of such change.
- A member's Rescue Care coverage extends to all household members who are permanent residents of the same single family (non-commercial) dwelling, within the City's ambulance service area, living together as a family unit, but excluding mere roomers or boarders. Membership benefits also extend to include household members living in nursing homes or other substitute care facilities in the City's ambulance service area. Those not included in the household membership are required to obtain their own membership. Coverage does not entitle a member to be picked up or transported outside of the City's ambulance service area.
- The first individual listed on an application form is termed the "Primary Member." Someone joining a household after the membership takes effect can be included under the membership from the date that the "Primary Member" notifies Rescue Care of the new household member. To be eligible for Rescue Care benefits, a person must meet the membership eligibility requirements and be listed in the membership records at the time that ambulance services are provided.
- With reasonable notice to the Rescue Care members, the City reserves the right to modify, delete, add to, or otherwise alter the program terms and conditions. The City shall, in its sole discretion, be entitled to interpret membership terms and conditions. A violation of the terms of this agreement may result in a membership revocation, forfeiture of benefits of membership, and an obligation to pay all balances in full. Persons receiving welfare or Medicaid need not be members of Rescue Care to have full coverage for services covered by Rescue Care. A membership is nontransferable and once paid, is non-refundable.

What is **not included** in Membership:

- Payment for ambulance services that originate outside of the City of Whitefish's Ambulance service area
- Ambulance transport for friends, family, or contractors visiting your home
- Non-medically necessary ambulance transports



RESCUE CARE APPLICATION

\$59 Inside City Limits

\$185 Outside City Limits (*within Whitefish Ambulance service area*)

Annual Membership period of July 1, 2023 through June 30, 2024

If a member needs ambulance treatment or transport by the Whitefish Fire Department, Rescue Care will bill the insurance carrier and consider whatever insurance covers as payment in full.

Your Household Information (please print or type):

Street Address _____ Telephone _____

Mailing Address (if different) _____

City _____ State _____ Zip _____

Email Address _____

Household Members:

	Last	First	Date of Birth (mm/dd/yyyy)
1.	_____	_____	_____
2.	_____	_____	_____
3.	_____	_____	_____
4.	_____	_____	_____

A household membership in Rescue Care includes all persons who are permanent residents of the same single-family (non-commercial) dwelling within the City of Whitefish's Ambulance service area, living together as part of a family unit, but excluding roommates or boarders. Membership also includes household members living in substitute care. For details, please check the agreement terms for a further definition.

A signature on this application constitutes your acceptance of all the Rescue Care Agreement Terms.

Signature _____ Date: _____

Your payment (\$59.00 inside city limits / \$185.00 outside city limits) must accompany this application.

If paying by check, please make payable to City of Whitefish.

Mail or bring completed form and payment to: Whitefish Fire Dept. Rescue Care
Mailing Address: P.O. Box 158
Physical Address: 275 Flathead Avenue, Second Floor
Whitefish, MT 59937

Applications and credit card payments will also be accepted at City Hall, located at 418 E 2nd St in downtown Whitefish.