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FOR IMMEDIATE RELEASE

Contact Information

[INSERT ORGANIZATION NAME. INCLUDE SENIOR MEDICARE PATROL.]
[INSERT CONTACT NAME]
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**Beneficiaries Baffled by Surprise Ambulance Bills**

A ride in an ambulance can be a serious situation for a Medicare beneficiary. The last thing anyone wants to think about in an emergency situation is the bill. Unfortunately, the bill for an ambulance ride can add additional stress – especially if the charges are incorrect and the provider won’t cooperate.

The Senior Medicare Patrol (SMP) receives calls from individuals asking what to do in challenging situations like this. The SMP program educates Medicare beneficiaries on how to protect themselves from fraud and abuse and is the go-to when people suspect they’ve been billed incorrectly.

“Sometimes a provider will bill beneficiaries directly instead of billing Medicare, even though the provider participates in Medicare and the trip met coverage criteria,” said [INSERT SMP CONTACT NAME AND TITLE HERE. Be sure to also include “Senior Medicare Patrol (SMP)”]. “Sometimes the provider does submit the bill but Medicare denies coverage and the beneficiary doesn’t understand why.”

Medicare covers ground and air ambulance transportation when: the transportation is medically necessary; a wheelchair van or car could endanger the patient; it is the only means of transporting the patient safely; the ambulance and its crew meet certain standards; and the destination is the nearest appropriate facility that can treat the beneficiary’s condition.

“Sometimes providers falsify documentation to provide the appearance of an ambulance’s medical necessity when medical necessity did not exist. Other fraud schemes involve providers billing for more miles than the beneficiary was transported; billing nonemergency trips as emergency trips, or billing a ride in a taxi and/or a wheelchair van as an emergency transport,” said [INSERT CONTACT INFORMATION].

To stop ambulance fraud, [INSERT CONTACT INFORMATION] recommends that beneficiaries:

* Review their Medicare Summary Notices (MSNs) and/or Explanations of Benefits (EOBs) and ensure the following:
	+ The services listed match what they actually received.
	+ The mileage billed isn’t more than the distance traveled.
	+ They weren’t billed for emergency transport if there wasn’t an emergency.
* Be on the lookout for upcoding (billing for more expensive care than was performed) on transport claims from basic life support (BLS) to advanced life support (ALS).
	+ ALS vehicles must be staffed by at least two people, each of whom must be certified as an EMT-Intermediate or an EMT-Paramedic by the state or local authority where the services are being furnished to perform one or more ALS services.

The Senior Medicare Patrol (SMP) provides the public with the information they need to PROTECT themselves from Medicare fraud, errors, and abuse; DETECT potential fraud, errors, and abuse; and REPORT concerns. SMPs help educate and empower Medicare beneficiaries in the fight against health care fraud. Local SMPs can help with questions, concerns, or complaints about potential fraud and abuse issues. They also provide information and educational presentations. To locate the local Senior Medicare Patrol, contact [INSERT CONTACT INFORMATION].