

Platinum

Plan benefits	Explanation
<p>Emergency Ground Ambulance Coverage²</p>	<p>MASA shall cover Out-of-Pocket Expenses resulting from Emergency Ground Ambulance Transportation, necessitated by a Serious Emergency, to the nearest and most appropriate Medical Facility, as determined by the First Responder(s) and/or Physician(s), readily capable of receiving the Member and providing the necessary level of Medical Care, as may be required due to a Serious Emergency, or to a Suitable Airport for the purposes of Emergency Air Ambulance Transportation, as may be required due to a Serious Emergency.</p>
<p>Hospital to Hospital Ground Ambulance Coverage²</p>	<p>MASA shall cover Out-of-Pocket Expenses resulting from a Medically Necessary Hospital-to-Hospital Transportation transfer by a Medically Equipped ground ambulance to the nearest most appropriate Medical Facility readily capable of receiving the Member and providing the specialized level of Medical Care required that is not available at the initial Medical Facility, as determined by the treating Physician(s) at the Medical Facility.</p>
<p>Emergency Air Ambulance Coverage²</p>	<p>MASA shall cover Out-of-Pocket Expenses resulting from Emergency Air Ambulance Transportation, necessitated by a Serious Emergency, to the nearest and most appropriate Medical Facility, as determined by the First Responder(s) and/or Physician(s), readily capable of receiving the Member and providing the necessary level of Medical Care, as may be required due to a Serious Emergency. Coverage for Emergency Air Ambulance Transportation by Medically Equipped fixed-wing aircraft shall be due, exclusively, to: (a) the unavailability and/or inefficiency of transport by rotary aircraft or ground transport, and (b) necessity of specialized treatment for a Serious Emergency not immediately available locally. Transport must result from the request or recommendation by a First Responder or treating Physician who deems Emergency Air Ambulance Transportation Medically Necessary. This service must be provided by a medically equipped rotary ambulance (e.g. helicopter) or Medically Equipped fixed-wing aircraft that is provided by a common air ambulance carrier</p>

Plan benefits	Explanation
Hospital to Hospital Air Ambulance Coverage²	<p>MASA shall cover Out-of-Pocket Expenses resulting from a Medically Necessary Hospital-to-Hospital Transportation transfer by a Medically Equipped rotary ambulance (e.g. helicopter) or medically equipped fixed-wing aircraft to the nearest most appropriate Medical Facility readily capable of receiving the Member and providing the specialized level of Medical Care required that is not available at the initial Medical Facility, as determined by the treating Physician(s) at the Medical Facility.</p>
Repatriation to Hospital Near Home Coverage⁴	<p>MASA shall coordinate and cover Out-of-Pocket Expenses related to a Member's Non-Emergency transport by a Medically Equipped ground ambulance, Medically Equipped rotary ambulance (e.g. helicopter), Medically Equipped fixed-wing aircraft, or by a common carrier airplane with a Paramedic, if appropriate, in the event the Member is hospitalized more than one hundred (100) statute miles from the Member's Residence. Although every effort will be made to transport the Member to Medical Facility of the Member's choice, some factors outside of MASA's control may limit ability to fulfill the Member's request. Such factors include, without limitation, no availability of a bed at requested Medical Facility and/or unavailability of required Medical Care for the Member's condition at requested Medical Facility. Such services shall be provided contingent upon (i) the Member being Inpatient at the time of the request, (ii) Member's ability to fly on a Medically Equipped fixed-wing aircraft or a common carrier airplane without causing further injury, (iii) continued Inpatient Medical Care is required at the Medical Facility nearest to the Member's home, (iv) written or recorded certification by Member's treating Physician and MASA's Medical Director that transfer is medically appropriate (e.g. fit to fly) and continued Inpatient Medical Care is needed for a period of five (5) days or greater, and (v) Member's compliance with the Access of Services provision of this Agreement</p>
Patient Return Transportation Coverage⁴	<p>MASA shall coordinate and cover the additional commercial airline carrier airfare expense associated with the coordination of one one-way, regularly scheduled, commercial airline carrier airfare for the Member to return to the commercial airport nearest to Member's Residence following Member's minimum twenty-four (24) hour Inpatient admittance and discharge from a Medical Facility located more than one hundred (100) statute miles from Member's Residence and the original return air transportation has been missed. Fare and class for such transport will be considered based on the class purchased with the original return ticket or the class to accommodate needs, as determined by the Member's treating Physician. MASA will provide reasonable efforts to match the original class, but ultimately it is at the sole discretion of MASA. Such services shall be provided contingent upon Member's compliance with the Access of Services provision of this Agreement.</p>

Plan benefits	Explanation
<p>Companion Emergency Transportation Coverage³</p>	<p>MASA shall cover Out-of-Pocket Expenses associated with coordination of transportation for the Member's spouse, other family member, or a Companion to accompany the Member's Emergency transport by a Medically Equipped ground ambulance, Medically Equipped rotary ambulance (e.g. helicopter), or Medically Equipped fixed-wing aircraft, giving due priority to the medical personnel and/or equipment and the welfare and safety of the patient. In the event services are required to be provided by a Medically Equipped fixed-wing aircraft, such coverage shall be provided contingent upon the Member's compliance with the Access of Services provision of this Agreement.</p>
<p>Hospital Visitor Air Transportation Coverage³</p>	<p>MASA shall coordinate and provide payment for the commercial airline carrier airfare expense associated with the coordination of a round-trip, regularly scheduled, commercial airline carrier airfare for Member's spouse, other family Member or Companion to join Member in the event that Member is admitted to the hospital as an Inpatient more than one hundred (100) statute miles from Member's Residence. Fare and class for such transport is at the sole discretion of MASA. Such coverage shall be provided contingent upon Member's compliance with the Access of Services provision of this Agreement and the Member or visitor providing verbal consent that MASA is permitted to attain personal information to coordinate the air transportation.</p>
<p>Minor Return Transportation Coverage³</p>	<p>MASA shall assist the Member through the process of how to return a minor and reimburse the Member up to \$2,500.00 in transport expenses (e.g. airfare, rental car, taxi, ride sharing) incurred by the Member associated with a Minor's return transportation to a parent, legal guardian, or a person that can be responsible for a Minor in the event that a Minor is left unattended as a result of Member's utilizations of Emergency Ground Ambulance Coverage, Hospital to Hospital Ground Ambulance Coverage, Emergency Air Ambulance Coverage, Hospital to Hospital Air Ambulance Coverage, Repatriation to Hospital Near Home Coverage, Patient Return Transportation, or Mortal Remains Return Transportation Coverage Benefits. Such reimbursement shall be provided contingent upon Member providing MASA proof of invoice and Member's proof of Member's payment. This Benefit is limited to an amount equal to the amount the Member paid but shall not exceed \$2,500.00 per claim.</p>

Plan benefits	Explanation
Pet Return Transportation Coverage³	<p>MASA shall assist the Member through the process of how to return a pet and reimburse the Member up to \$2,500.00 in transport expenses (e.g. airfare, rental car, taxi, ride sharing) incurred by the Member associated with a pet's return transportation of a Member's pet to the Member's Residence or a person that can be responsible for the pet, as a result of Member's utilization of Emergency Ground Ambulance Coverage, Hospital to Hospital Ground Ambulance Coverage, Emergency Air Ambulance Coverage, Hospital to Hospital Air Ambulance Coverage, Repatriation to Hospital Near Home Coverage, Patient Return Transportation, or Mortal Remains Return Transportation Coverage. Benefits. Such reimbursement shall be provided contingent upon Member providing MASA proof of invoice and Member's proof of Member's payment. This Benefit is limited to an amount equal to the amount the Member paid but shall not exceed \$2,500.00 per claim</p>
Vehicle & RV Return³	<p>MASA shall provide services and cover Out-of-Pocket Expenses associated with ground vehicle return transportation for a Member's ground vehicle to Member's Residence or rental vehicles returned to the nearest rental company office or agent while in the United States as a result of Member's utilization of Emergency Ground Ambulance Coverage, Hospital to Hospital Ground Ambulance Coverage, Emergency Air Ambulance Coverage, Hospital to Hospital Air Ambulance Coverage, Repatriation to Hospital Near Home Coverage, Patient Return Transportation, or Mortal Remains Return Transportation Coverage Benefits. Vehicle return services shall only apply to traditional ground vehicles, including, but not limited to, car/truck, van, motorcycle, travel trailers or motor homes, owned or rented by the Member. MASA shall bear the cost of fuel, oil and driver – contracted directly by MASA. MASA shall not be responsible for the cost of any vehicle repair due to mechanical breakdown en route. Member must have applicable insurance coverage for the vehicle at the time of return and must be in a condition suitable for safe operation on the highway. This Benefit is limited to only one (1) vehicle, including any vehicle in tow, per claim. Such services shall be provided contingent upon Member's compliance with the Access of Services provision of this Agreement.</p>

Plan benefits	Explanation
Organ Retrieval Transportation Coverage¹	MASA shall cover Out-of-Pocket Expenses associated with the transportation of an organ to be used in an organ transplant procedure required by the Member. This service shall apply to the following organs only: the retrieval of a heart, lung, liver, kidney, or pancreas
Organ Recipient Transportation Coverage¹	MASA shall coordinate and cover the commercial airline carrier airfare expense associated with the round-trip, regularly scheduled, commercial airline carrier airfare for the Member, Member's spouse, other family Member, or Companion in the event that Member is in need of an organ transplant procedure. Such transportation shall be by a Medically Equipped fixed-wing aircraft, if Medically Necessary, or commercial airline carrier to the Suitable Airport nearest the site of the transplant procedure. Transportation of Member's spouse, other family Member, or Companion may be limited due to availability, giving due priority to the medical personnel and equipment aboard the Medically Equipped fixed-wing aircraft for the welfare and safety of the transported Member. Fare and class for such transport is at the sole discretion of MASA. MASA may elect to cover transportation by ground, if appropriate. This service shall only apply to the transplant of a heart, lung, liver, kidney, or pancreas. Such services shall be provided contingent upon Member's compliance with the Access of Services provision of this Agreement.
Mortal Remains Return Transportation Coverage⁴	MASA shall assist the Member, next of kin, or the Member's estate through the process of returning mortal remains on a commercial airline carrier. MASA shall also reimburse the Out-of-Pocket Expenses incurred by the Member, next of kin, or the Member's estate associated with the commercial airline carrier airway bill transportation expense, only for the transport of mortal remains from the commercial airport nearest to the location of where the death occurred to the commercial airport nearest to Member's Residence. This benefit is only available if the Member's death occurs more than one hundred (100) statute miles from Member's Residence. MASA may elect to cover transportation by ground (e.g. car) or water (e.g. ferry), if appropriate, or when a commercial airline is not available. Such reimbursement shall be provided contingent upon Member, next of kin, or the Member's estate providing MASA proof of invoice and Member's, next of kin's, or the Member's estate's proof of Member's, next of kin's, or Member's estate's payment.

Coverage territories

- 1 United States only
- 2 United States and Canada
- 3 United States, Canada, Mexico, and the Caribbean
- 4 Worldwide coverage to include any region with the exclusion of Antarctica and not prohibited by U.S. law or U.S. travel advisories. Contingent upon prior notice of travel.

Qualifications for coverage:

- Must hold active primary health insurance at time of serious emergency. MASA applies after primary health insurance decision on claim and after any payment is made by primary health insurance. MASA will only cover 20% of total bill if member does not carry primary health insurance at time of claim.
- Must be 18 years or older to purchase a plan
- Must be primarily living at a US 50 states residence
- Claims must be submitted within 180 days of incident or transport

Limitations for coverage:

- If member has a pre-existing condition all non-emergency benefits will not apply during the first 90 days of enrollment if as a result of the pre-existing condition
- Treatment for mental illness or disease or any self-inflicted injury shall be limited to one (1) claim per membership for each consecutive twelve (12) month period beginning from the effective date
- If Member is diagnosed by a physician with a terminal illness that can reasonably be expected to result in death in one (1) month or less after the date of the certification following an inpatient admission, MASA will not provide coverage for Emergency Air Ambulance Coverage, Hospital to Hospital Air Ambulance Coverage, and Repatriation to Hospital Near Home Coverage

Exclusions:

- Transport for elective and/or cosmetic surgery
- Occurrences related to military personnel during active-duty hours
- Air travel, other than as a passenger in an aircraft operated by a common carrier airline, maintaining regular published schedules
- Under the influence of intoxicants and/or narcotics unless administered on the advice of a physician;
- Inherently dangerous activities such as participation in professional athletic events, motor sport or motor racing, bull-riding, skydiving, parachuting, hang gliding, bungee cord jumping, heli-skiing, spelunking, etc.
- A serious emergency or out-of-pocket expense arising from employment where coverage is provided and approved under and Workers' Compensation Law, occupational disease/hazard law or similar legislation
- Participation in a Riot, insurrection, rebellion, civil disobedience or unlawful assembly;
- Participation in declared or undeclared war or acts thereof
- A membership cannot be purchased while Member is Inpatient at a Medical Facility requesting benefits
- State laws may prevent a Medicaid participant participating in a medical transport membership and/or association, MASA does not cover those participating in a Medicaid health insurance plan.

Special state required disclaimer:

WY residents: MASA, Medical Air Services Association, Inc. provides a membership plan and not insurance coverage and the range of discounts for air ambulance services provided under such membership will vary depending on the provider and the services offered. For more information visit www.masaaccess.com, or call 800-643-9023.