



# Emergency Transportation Subscription ENROLLMENT FORM

Dear Downey Resident,

The City of Downey is once again offering residents an opportunity to join the optional **Emergency Transportation Subscription Program** that has been servicing Downey citizens since 1986. Annually about 5,600 people are transported by ambulance. Another 2,000 are assessed and treated by paramedics with no transport. For an annual fee of only **\$65.00**, your household is provided with a supplemental insurance program that will cover unlimited emergency transportation services within Downey's city limits.

If you would like to join this optional Program, complete the bottom portion of this form and return it with a check or money order for \$65.00 and you will be immediately enrolled in the **Emergency Transportation Subscription Program**. If you prefer not to join, your household would be responsible for the following emergency transportation fees:

- Advanced Life Support transport: Fees start at **\$3,252.00**
- Basic Life Support transport: Fees start at **\$2,171.00**
- Assessment At Scene/ No Transport: Flat fee of **\$300.00**

The **Emergency Transportation Subscription Program** is a supplemental insurance that will cover any "out of pocket" expenses for emergency transportation. If you have medical insurance, the City of Downey will bill that insurance carrier for the full cost of the service. **Any unpaid balance will be covered by the Emergency Transportation Subscription Program**. Billing your insurance company helps maintain the minimal annual fee charged to subscribers. As a subscriber, **all** members of your household will be covered by the **Emergency Transportation Subscription Program**. In some cases, they may be required to provide proof of residency that was valid on the date of service, such as California ID card, California Driver's License, or other identification.

On the reverse side of this form, you will find answers to frequently asked questions about the program.

**The subscription period of the Emergency Transportation Subscription Program is:  
March 1, 2024 through February 28, 2025.**

Please remit payment to:

**CITY OF DOWNEY ~ EMERGENCY TRANSPORTATION SUBSCRIPTION PROGRAM**  
**11111 Brookshire Ave., Downey, CA 90241**  
Make checks payable to The City of Downey

**PLEASE PRINT LEGIBLY;** List the First and Last Name of **EACH** Permanent Resident:  
**IF an additional sheet of paper is attached, please check here**

- |          |           |
|----------|-----------|
| 1. _____ | 6. _____  |
| 2. _____ | 7. _____  |
| 3. _____ | 8. _____  |
| 4. _____ | 9. _____  |
| 5. _____ | 10. _____ |

Address: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Signature: \_\_\_\_\_ Print Name: \_\_\_\_\_ Date: \_\_\_\_\_

E-MAIL ADDRESS: \_\_\_\_\_

Phone Number for verification of information if necessary: ( ) \_\_\_\_\_

**DO NOT SEND CASH. YOUR CANCELED CHECK IS YOUR RECEIPT.**

\$65.00 Policy Period 2024 ~ 2025

<b>Office Use Only:</b>

## **ANSWERS TO FREQUENTLY ASKED QUESTIONS**

### **What the Subscription Program Covers**

- ❖ The City of Downey Fire Department and Paramedics will medically evaluate a patient when responding to a 9-1-1 call and determine if transportation is needed. When transported by the City of Downey Paramedics or Ambulance there is a charge for those services.
- ❖ In the event a Private Ambulance is used for a 9-1-1 Emergency Transportation, submit your Medical Insurance to the Ambulance Company who transported you. Your Subscription will cover any unpaid balance; a copy of your invoice from that Ambulance Company must be received in our billing office in a timely manner.
- ❖ After your Emergency Transport; a copy of your Medical Insurance card MUST be provided when requested.
- ❖ Subscribers without Medical Insurance, upon receipt of their first Transport Billing Invoice, must request a “No Medical Insurance Certification Form” from the City of Downey billing office. It must be signed and returned to the billing office in order to use their subscription for their entire billed amount.
- ❖ This Program only covers 9-1-1 Emergency Calls with a PICK-UP location within the city limits of Downey. This Program WILL NOT cover ambulance transportation from the Hospital back to the patient’s residence or another facility.

### **Who the Subscription Program Covers**

- ❖ Only residents of the subscribed address are eligible for this Program. You MUST notify the billing office of ANY changes to the list of residents so the Subscription can be updated.
- ❖ Residents may transfer their subscription to another Downey residence by notifying the billing office as soon as possible.
- ❖ Visitors to a subscriber’s residence requiring Emergency Transport ARE NOT covered by this program.

### **When the Subscription Program Covers**

- ❖ You may enroll at any time during the policy period, but AFTER March 1<sup>st</sup> your subscription will begin the date of your postmarked envelope or payment receipt when paying in person at the City of Downey Cashier Counter.
- ❖ Payments received AFTER March 1<sup>st</sup> will ONLY cover transports from your payment date forward.
- ❖ The Subscription Fee will NOT be pro-rated if payment is made after March 1<sup>st</sup> and the Subscription fee is NOT refundable.

**FOR ADDITIONAL INFORMATION PLEASE CONTACT THE CITY OF DOWNEY**  
**Payment Information - Finance Department (562) 904-7246**  
**Program Information - Fire Department (562) 904-7345**