



EMERGENCY MEDICAL SERVICES FACT SHEET

- ***The Cranford First Aid Squad (CFAS) and Cranford Fire EMS are two separate organizations.***
The Cranford First Aid Squad is a private volunteer organization with no affiliation to the Township of Cranford. Cranford Fire EMS is the township emergency medical services provider, staffed by Cranford Fire Department EMTs.
- Hours of Operation
 - ***Cranford Fire EMS:*** Monday – Friday, 5:30AM to 6:30PM
 - ***Cranford First Aid Squad (CFAS):*** Monday – Friday, 6:30PM to 5:30AM and weekends
 - In the event that CFAS is unable to staff an ambulance, the Cranford Fire Department EMTs will respond with a Cranford Fire EMS ambulance.
- The Cranford First Aid Squad and Cranford Fire EMS organizations are Basic Life Support (BLS) medical services. In the event that your condition warrants Advanced Life Support (ALS), paramedics will be dispatched along with a CFAS or Cranford Fire EMS ambulance. The paramedic organization will send you a separate bill for the treatment they provide you. Cranford Fire EMS can only provide information to you regarding billing from our organization. We cannot provide assistance or information regarding billing for paramedic services.
- To obtain a copy of your EMS chart for a transport, you must:
 - Submit an Authorization to Release Healthcare Information Form to Cranford Fire EMS. This form must be notarized. Form is available on Cranford Fire Department's website: www.cranford.com/fire. A link to download the form is located at the bottom of the Fire Department's home page.
 - Provide proper photo identification.
- When ambulance services ***are*** covered by Medicare:
 - Medicare Part B (Medical Insurance) covers emergency ambulance transportation when it is medically necessary, and transportation in any other vehicle could endanger your health.
 - Medically Necessary: "Services or supplies that are needed for the diagnosis or treatment of your medical condition and meet accepted standards of medical practice."
 - "Medicare will only cover ambulance services...to the nearest appropriate medical facility that's able to give you the care you need."
- When ambulance services ***are not*** covered by Medicare:
 - You are allowed to file an appeal and plead your case as to why you should be covered.
 - If you decide to file an appeal:
 - As your doctor, health care provider, or supplier for any information that may help your case.
 - The appeals process has 5 levels. If you disagree with the decision made at any level of the process, you can generally go to the next level.



- When filing an appeal:
 - Get the Medicare Summary Notice (MSN) that shows the item or service you're appealing. MSNs come in the mail every three months, and you must file your appeal within 120 days of the date you get the MSN in the mail.
 - Fill out a Redetermination Request Form and send it to the Medicare contractor at the address listed on the Medicare Summary Notice (MSN).
 - OR:
 - Follow the instructions on the back of the Medicare Summary Notice. You must send your request for redetermination to the company that handles bills for Medicare (their address is listed in the Appeals Information section of the MSN).
 - Circle the items you disagree with on the MSN.
 - Write an explanation of why you disagree with the decision on the MSN or write it on a separate piece of paper and attach it to the MSN.
 - Include your name, address, phone number, and Medicare number on the MSN and sign the notice.
 - Include any other information you have about your appeal with the MSN. Ask your doctor, health care provider, or supplier for any information that may help your case. (Example: your EMS chart from your transport to the hospital, available at Cranford Fire EMS.
 - NOTE: Write your Medicare number on ALL documents you submit with your appeal request. Also, keep a copy of everything you send to Medicare as part of your appeal.
- Once a claim has been submitted to your insurance company (in this case, Medicare), the claims process (approval or denial of your claim) is entirely up to the discretion of your insurance company. While Cranford Fire EMS can provide you with limited information regarding your right to file an appeal for a denial of coverage, we cannot assist you in the appeals process. We can, however, provide you with your EMS chart from your transport to submit with your appeal request, and answer any questions you may have to the best of our ability. If we do not have the answer to a question you may have, we will direct you to the appropriate resources to obtain any information you may need regarding billing and the Medicare appeals process.

Important Contact Information

Cranford Fire EMS (NON-EMERGENCY): (908)709-7360 –Ask for Melissa

Ambulance Reimbursement Systems (billing company for Cranford EMS transports): 1-800-473-2278

Medicare website: www.medicare.gov

Medicare phone number: 1-800-MEDICARE

Dept. of Health & Human Services, Departmental Appeals Board phone number: (202)565-0200

Dept. of Health & Human Services, Departmental Appeals Board fax number: (202)565-0224