

Ambulance transport (companion to Part 20)

Lifetime Care will pay for the reasonable and necessary ambulance transport you need because of an injury you sustained from a motor vehicle accident.

This companion explains what ambulance transport we'll pay for, what we won't pay for, what we mean by certain terms, and how we make our decisions.

When we use the word 'you', we mean the person covered by the Lifetime Care and Support Scheme (also known as 'the participant') or someone representing them, such as a parent, guardian or legal representative.

What we fund

Ambulance transport

We'll pay for ambulance transport if:

- we don't fund it under an existing arrangement with you, but you need it because of the motor accident injury
- you need more help getting into a vehicle and being positioned in it than a taxi driver, attendant care worker or family member would be able to provide
- it's for receiving medical or hospital services related to the motor accident injury, or for receiving other services to meet your needs
- there are no other alternatives and an ambulance is the only suitable transport for you.

What we don't fund

We don't pay for ambulance transport or expenses:

- provided under an existing fee agreement with an ambulance transport provider
- that are attendance-only charges
- when the hospital or facility has asked for an outpatient driver service to wait for you (unless you need to be actively managed or supervised and there's no attendant

care worker or family member present. In this case, we'll only pay active waiting time for the time the outpatient driver provided active supervision and assistance).

How we decide

We follow Lifetime Care funding principles to decide what, if any, ambulance transport you need and what we'll fund. We may also refer to other guidelines to help us in this process.

We'll consider:

- your needs for ambulance transport in relation to other treatment and services, such as medical treatment and surgery
- the circumstances where you need the ambulance, for example, whether it is between hospitals, from a hospital to your residence after a stay in hospital as an inpatient, or for other medical treatment or therapy services
- if other services, such as vehicle modifications, have been provided
- how long you'll need the ambulance transport.

Information we may need to make our decision

We may ask you for information to help us assess your needs, including:

To help us decide about paying for your ambulance transport, we'll need information:

- from a medical practitioner or health professional about why you need ambulance transport rather than an alternative
- about any pre- or co-existing medical conditions that may impact your needs for or relating to ambulance transport
- about whether you need behavioural management supervision
- about whether a family member or attendant care worker is available to help.

We'll assess your need for ambulance transport on request and before service delivery. When you make a request, you must give us an itemised quote.

Our funding principles

When we're making decisions about funding ambulance transport we follow these guidelines.

- Everyone involved in your care collaborates on planning, decision-making and risk assessment activities, and there is evidence of this collaboration in any plans and requests for services.
- Our aim is to help you be as independent as possible and to participate in the community.
- The treatment or service must relate to the motor accident injury.
- Services should be flexible and tailored to meet your needs.
- The treatment, item or service benefits you, is appropriate, represents value for money, and is cost effective.
- The provider is appropriate to your needs.
- Decisions are made within 10 working days.

We'll document our decisions and communicate them via a 'certificate' (a certificate is a letter we'll send you about the decisions we've made).

Your rights

- You have the right to refuse services.
- You have the right to dispute any decision we make about your needs.

Our process for making decisions

- We'll need to get some information about the ambulance transport you want us to pay for.
- After we get this information, we'll make a decision within 10 working days.
- We'll let you know our decision by letter.
 This is known as a 'certificate'.
- You don't have to agree with our decisions.
 You have the right to dispute any decision we make. That's OK and we can help you do this.

For more information contact Lifetime Care

9am to 5pm, Monday to Friday

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