

[illegible]

PROVINCE: NF

PROGRAM OF CHOICE: 02 - AMBULANCE SERVICES

| BENEFIT DESCRIPTION | BENEFIT CODE | EFF. DATE TERM. DATE | PRESCRIBER REQUIRED | RECOMMENDER REQUIRED | PRE-AUTHORIZATION GROUP A GROUP B | FREQUENCY | MAXIMUM AMOUNT\ VAC FEE | SUBSEQUENT PREAUTH. | COMMENT |
|--|--------------|-------------------------|------------------------|-------------------------|--------------------------------------|-----------|-------------------------|------------------------|--------------|
| AMBULANCE SERVICES - OUT OF PROVINCE - AIR - EMERGENCY | 700183 | 01-04-2011 | | | | | | | |
| AMBULANCE SERVICES - OUT OF PROVINCE - AIR - NON-EMERGENCY | 700186 | 01-04-2011 | MD | | YES | | | Y | |
| AMBULANCE SERVICES - OUT OF PROVINCE - GROUND - EMERGENCY | 700189 | 01-04-2011 | | | | | | | |
| AMBULANCE SERVICES - RELATED TO OHC | 700195 | 01-04-2011 | MD | | YES | | | Y | SEE NOTE 3 |
| AMBULANCE SERVICES - WITHIN PROVINCE - AIR - EMERGENCY | 700171 | 01-04-2011 | | | | | | | |
| AMBULANCE SERVICES - WITHIN PROVINCE - AIR - NON-EMERGENCY | 700174 | 01-04-2011 | MD | | YES | | | Y | |
| AMBULANCE SERVICES - WITHIN PROVINCE - GROUND - EMERGENCY | 700177 | 01-04-2011 | | | | | | | SEE NOTE 001 |
| AMBULANCE/MEDICAL TRANSFER SERVICES - OUT OF PROVINCE - GROUND - NON-EMERGENCY | 700192 | 01-04-2011 | MD | | YES | | | Y | |
| AMBULANCE/MEDICAL TRANSFER SERVICES - WITHIN PROVINCE - GROUND - NON-EMERGENCY | 700180 | 01-04-2011 | MD | | YES | | | Y | |

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|--|-----------------|-------------------------|------------------------|-------------------------|--------------------------------------|-----------|--------------------------|------------------------|------------|
| SEA/BOAT AMBULANCE TO HOSPITAL | 700153 | 13-12-1999 | MD | | | | | | SEE NOTE 1 |
| SPECIAL ENTITLEMENTS AUTHORIZED BY THE DG OF OHSB - OHC | 700168 | 01-02-2015 | MD | | YES | | | Y | SEE NOTE 2 |
| SPECIAL ENTITLEMENTS AUTHORIZED BY THE DG OF OHSB - SHC | 700169 | 01-02-2015 | MD | | YES | | | Y | SEE NOTE 2 |
| TAXES - GST/HST (GST/HST REGISTRATION NUMBER REQUIRED) | 0GST | 01-06-2010 | | | | | | | |
| TAXES - GST/HST (GST/HST REGISTRATION NUMBER REQUIRED) | 0TPS | 13-12-1999 | | | | | | | |

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- GENERAL NOTES

- - COMMAS APPEARING IN THE "PRESCRIBER REQUIRED" COLUMNS INDICATE OR, (EG. "MD", "RN", MEANS "MD" OR "RN").

- - IF THE BENEFIT GRID SPECIFIES A SPECIALIST, ONLY THAT SPECIALIST IS ACCEPTED. SHOULD "MD" BE INDICATED, THE SERVICE MAY BE PRESCRIBED BY A GENERAL PRACTITIONER OR ANY MEDICAL SPECIALIST.

- - AN ACCIDENT WHERE THERE IS A THIRD PARTY OBLIGATION TO PAY, IS NOT COVERED BY RCMP. IN ALL CASES, THERE MUST BE A MEDICAL NEED FOR THE AMBULANCE SERVICE.

- SPECIAL NOTES: - NOTE 001 - EMERGENCY AMBULANCE SERVICES DO NOT REQUIRE A PRESCRIBER OR PRE-AUTHORIZATION IN ADVANCE OF SERVICE; HOWEVER, PRESCRIPTION AND/OR AUTHORIZATION REQUIREMENTS AS NOTED ON THE BENEFIT GRID MUST BE MET PRIOR TO PAYMENT OF INVOICE.

- SPECIAL NOTES: - NOTE 002 - FOR INTERNAL RCMP USE ONLY. -MANDATORY DESCRIPTION TO BE ENTERED BY THE OHSS OFFICE IN THE 'CLAIM MANAGEMENT-AUTHORIZATION COMMENTS' BOX WITHIN NPS. -PRE-AUTH AS PER CURRENT POLICY.

- SPECIAL NOTES: - NOTE 003 - FOR INTERNAL RCMP USE ONLY. -MANDATORY DESCRIPTION TO BE ENTERED BY THE OHSS OFFICE IN THE 'CLAIM MANAGEMENT-AUTHORIZATION COMMENTS' BOX WITHIN NPS. -PRE-AUTH AS PER CURRENT POLICY. - OCCUPATIONAL HEALTH CARE (OHC).