

Medic Regional Blood Center Membership Program Blood Coverage Benefits

One donation a year covers MEDIC's or any other blood supplier's processing costs for blood received at any U.S. medical facility by MEDIC members and their IRS dependents (dependents claimed on the donor's yearend tax return) during the effective term of coverage. Each additional donation extends your blood coverage by another twelve months. Coverage does not apply to the medical facilities charges associated with administering transfusions or MEDIC's special procedure charges, **or blood given for any pre-existing conditions as defined here in.**

MEDIC REGIONAL BLOOD CENTER
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Effective Date – July 1, 2011

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Glossary of Definitions

Church Attendance/Membership List - List provided by the church **prior** to hosting a blood drive that includes names of individuals or families that attend the church on a regular basis and that the church wants to be covered under MEDIC's Group Coverage if it is obtained.

Credits - A donor gets one credit (twelve months of coverage) for a whole blood donation and two credits for an automated donation. Each credit can be used for **one** of the following; Individual Coverage, Group Coverage, Substitute Donation or a Replacement Donation.

Family Coverage - Someone who is not a donor but is an IRS dependent of a donor who has coverage.

Group Coverage – Any company or group that hosts a blood drive and thirty percent (30%) of their employees or members donate blood.

Individual Coverage – Coverage for the donor and his/her IRS Dependents.

IRS Dependents – Anyone that qualifies and is claimed on the member's Internal Revenue Service (IRS) tax return.

Membership – A first time donor becomes a member after their first donation unless credit is specified for another use.

Pre-Existing Conditions – A sickness or disease process for which, within a twelve month period before the effective date of the specified coverage, was known to be present, or related symptoms were present that would cause a prudent person to seek medical attention.

Common Pre-Existing Conditions – Some of the more common medical conditions that may be considered pre-existing conditions include but not limited to:

1. Chronic Renal (Kidney) disease
2. Malignancies/cancer
3. Gastrointestinal diseases that are subject to episodes of hemorrhaging
4. Certain orthopedic conditions requiring surgery
5. Certain reconstructive surgeries

Coverage - Usage of blood and/or blood products related to such pre-existing conditions will not be covered.

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Pre-Existing Conditions – (Continued)

Pre-existing Condition Exceptions -

1. Full benefits apply for pregnancy which is not considered to be a pre-existing condition.
2. If a person is diagnosed with a blood disease over thirty days after the effective date of coverage, this does not constitute a pre-existing condition.
3. An asymptomatic aortic aneurysm which becomes a source of hemorrhage after the effective date of coverage will not be considered to be a pre-existing condition.

General Consideration –

1. Use of blood and/or blood products related to a self-inflicted injury will not be covered.
2. In certain situations your physician may be asked to verify whether the use of blood and/or blood products is related to a pre-existing condition.

New members unaffected by pre-existing conditions –

1. Someone who donates to MEDIC within thirty days after leaving a MEDIC company or group program that has Group Coverage.
2. A divorced person who donates to MEDIC within thirty days after the divorce. The member will carry over to the Individual Coverage with the same status they had under the Family Coverage.
3. Someone who donates within thirty days after becoming ineligible for Family Coverage, i.e., no longer an IRS dependent. The member will carry over to the Individual coverage with the same status they had under the Family Coverage.

Replacement Donation – A donor that gives blood in the name of a patient that is not a member to provide them a monetary credit to be used toward their hospital bill for blood usage.

Replenishment Donation – A donor that gives blood in honor of a patient that is deceased or is already covered by MEDIC's Membership.

Student Donor – Any Student 16 years or older and is a high school or college/university student.

Substitute Donation – A donation by a member who wishes to give their credit for a non-member to become a member or to add to another member's coverage period.

Term of Coverage – One donation per year covers any blood supplier's collection and processing fees at any U.S. medical facility for a period of twelve months. Each additional donation extends your blood coverage by another twelve months.

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I. Individual Coverage

One donation per year exempts the donor and his/her IRS dependents from paying blood suppliers collection and processing fees anywhere in the United States. The donor and his/her IRS dependents are covered for twelve months from the date of the donation. The new member will be covered under MEDIC's Individual Coverage and pre-existing conditions apply.

- A. All members are covered immediately for accidents/injuries requiring blood usage.
- B. Benefits will be provided for medical conditions developing during the effective term of coverage.
- C. MEDIC provides members' benefits regardless of private insurance coverage and/or Medicare coverage.
- D. MEDIC pays the blood supplier's processing fees not covered by Medicare blood deductibles.
- E. New members unaffected by pre-existing conditions:
 - 1. Someone who donates to MEDIC within thirty days after leaving a MEDIC company or group program that has Group Coverage.
 - 2. Someone who donates within thirty days after becoming ineligible for Family Coverage, i.e., no longer an IRS dependent. The member will carry over to the Individual Coverage with the same status they had under the Family Coverage.
- F. A request for payment of blood usage must be reported to MEDIC within one year from the date of usage. This request can be made by phone or in writing to MEDIC's Credit Department.
- G. Minor children may be covered by either parent no matter which parent claims them as an IRS Dependent.
- H. Coverage applies to the divorced member whose name is listed in MEDIC's records, unless otherwise directed by the member.
- I. If both parties in a divorce action are MEDIC donors, both members receive the same coverage date as the primary member.
- J. When a MEDIC member marries, his/her spouse plus any dependent children will have the same benefits as the member.
- K. When a MEDIC member marries another MEDIC member; coverage date will be the greater of the two member's coverage dates.
- L. Membership is canceled after coverage has expired and the second notice has been sent.
- M. Credits for a deceased member will be given to the spouse or a qualifying IRS Dependent.
- N. Members that have built up credits on their MEDIC account may give away credits at the time of donation or within thirty days of donation (see substitute donations).

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II. Group Coverage: Company/Organization Program

A company/organization may obtain Group Coverage for all active employees/members by sponsoring blood drives and thirty percent (30%) of their group donate blood.

- A. All employees/members and IRS dependents are covered regardless of pre-existing conditions for the group coverage period.
- B. A non-donor employee/member usage is covered only during the group coverage period.
- C. If an employee/member is unable to donate on the date of the company blood drive, they may donate up to sixty days prior to the drive or up to sixty days after the drive and their donation will count toward the drive.
- D. A substitute donation is not counted toward Group Coverage if donation is made for someone outside the company/organization. The new member will be covered under MEDIC's Individual Coverage Plan.
- E. If 30% quota is not met, each employee donating will be covered under MEDIC's Individual Coverage.
- F. Previous donors with no lapse in coverage will be unaffected by pre-existing conditions.
- G. Companies/organizations may request through their drive coordinator (recruiter) approval to grant a ninety day or six month coverage period until their next blood drive. This request must be approved by MEDIC's CEO or Associate Director.

III. Group Coverage: Churches

A church may obtain Group Coverage for twelve months by sponsoring blood drives and thirty percent (30%) of the attendance/membership list donates blood.

- A. If 30% quota is met, only those donors and IRS dependents on the attendance/membership list, given to MEDIC **prior** to the blood drive, will be covered during the Group Coverage period.
- B. If a donor on the church list is unable to donate on the date of the church blood drive, they may donate up to sixty days prior to the drive or up to sixty days after the drive. Their donation will count toward the church's Group Coverage.
- C. A substitute donation is not counted toward Group Coverage if donation is made for someone outside the church. The new member will be covered under MEDIC's Individual Coverage Plan.
- D. New church members joining the church after the blood drive are ineligible for the churches group coverage until the next blood drive. New members donating blood will be covered under MEDIC's Individual Coverage.
- E. If 30% quota is not met, each member donating will be covered under Individual Coverage.

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- F. Non-donor church member usage is covered only during the group coverage period.
- G. Previous donors with no lapse in coverage will be unaffected by pre-existing conditions.
- H. Churches may request through their drive coordinator (recruiter) approval to grant a ninety day or six month coverage period until their next blood drive. This request must be approved by MEDIC's CEO or Associate Director.

IV. Group Coverage: Schools

A. Student Coverage:

- 1. The student donor, the student's parents and any of the student's parents' IRS dependents are covered for twelve months from the date of donation.
- 2. If the student is self-supporting (not an IRS dependent of their parents), then Individual Coverage applies.

B. Faculty and Staff Coverage:

- 1. A school may obtain Group Coverage by sponsoring a blood drive and thirty percent (30%) of the faculty and staff donates blood, then all employees of the school are covered under the Group Coverage plan.
- 2. All employees and their IRS dependents are covered regardless of pre-existing conditions for the group coverage period.
- 3. If an employee is unable to donate on the date of the school blood drive, the employee may donate up to sixty days prior to the drive or up to sixty days after the drive and their donation will count.
- 4. A substitute donation is not counted toward Group Coverage if donation is made for someone outside the school. The new member will be covered under MEDIC's Individual Coverage Plan.
- 5. If Group Coverage is not met then each employee donating will be covered under MEDIC's Individual Coverage.
- 6. A non-donor employee usage is covered only during the group coverage period.
- 7. Previous donors with no lapse in coverage will be unaffected by pre-existing conditions.
- 8. Schools may request through their drive coordinator (recruiter) approval to grant a ninety day or six month coverage period until their next blood drive. This request must be approved by MEDIC's CEO or Associate Director.

V. Replacement Donor Program – Blood Drive

A replacement blood drive is usually requested by a family member, a friend or a co-worker of someone using blood products. When making a replacement donation, the donor gives away his/her donation credit to the patient.

- A. At the time of the request for a replacement blood drive, the recruiter or the operations assistant will complete a “Blood Drive Information Form”. The form will be given to the Associate Director for approval and a copy will be made available to the following departments/individuals: Financial Assistant, Appropriate Recruiter and Operations Assistant for file.
- B. If the patient is using blood in a hospital serviced by MEDIC, a fifteen dollar credit will be applied toward the hospital patient account.
- C. After credit is applied to the patient account, if ten or more credits remain, a check will be sent to the patient up to the total amount of blood supplier processing cost on the patient’s account. If less than ten credits remain, the credits will be held for one year for the benefit of the patient.
- D. If the patient is using blood in a hospital outside our service area and there are ten or more donations, a credit for fifteen dollars (\$15.00) for each donor will be given and a check will be sent to the patient up to the total amount of blood supplier processing cost on the patient’s account. The patient or family must provide to MEDIC an itemized copy of the patient’s hospital bill showing the blood products used.
- E. Two credits of fifteen dollars each will be given to the patient for donors that donate by automated donation.
- F. After the organization has completed the replacement drives, the organization can schedule a drive to receive Group Coverage.
- G. Individual replacements for patients that are not a part of an organized Replacement Blood Drive can receive credits from donors that give for them **if** they used blood in a hospital in our service area only. A fifteen dollar credit is issued to the hospital against each unit used by the patient. Additional credits may be obtained through a replacement blood drive.
- H. Unused credits will remain active for up to twelve months.

VI. Replenishment Donation

A Replenishment Blood Drive or donation is available to allow donors to give blood in honor/memory of a patient. The donor receives individual coverage and no benefits are provided to the patient or the patient’s family.

VII. Substitute Donations

Many donors give more than once a year in order to obtain blood coverage for parents, other non-dependent family members, and friends or even for the general public. Any donor may donate blood to cover someone who cannot donate for himself/herself.

- A. A donor may give a substitute donation by providing the MEDIC staff with the person's name, address, date of birth, and last four digits of their social security account number prior to the donation.
- B. The donor must be informed that they are giving up their donation credit to the person for whom a substitute donation is given. The new member will receive Individual coverage for twelve months and pre-existing conditions apply.

VIII. Paying Members

MEDIC members that have donated blood in the past who can no longer donate, either temporarily or permanently, may retain MEDIC coverage by having someone make a Substitute Donation for them. If they are unable to find someone to donate for them, they may call MEDIC to see if they are eligible for paying status.

IX. Exceptions to Membership

A donor that attempts to donate and is deferred from giving blood does not get a credit towards membership. Donors that give one of the following donation types will not receive credit toward membership.

- A. Therapeutic Donation
- B. Autologous Donation
- C. Directed Donation