

## **MEDIC Regional Blood Center Membership Program Blood Coverage Benefits**

For a MEDIC member, one donation a year provides cost coverage for 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 member's year-end tax return) during the effective term of coverage. Coverage is earned by donating blood. 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 herein.

MEDIC REGIONAL BLOOD CENTER  
1601 AILOR AVENUE  
KNOXVILLE, TN 37921

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## Glossary of Definitions

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

**Pre-Existing Conditions** – A sickness or disease known to be present or symptoms which were present that would cause a prudent person to seek medical attention 12 months prior to the initial membership coverage date.

Common Pre-Existing Conditions – Some of the more common medical conditions that may be considered pre-existing conditions include but are 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
6. 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.

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

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.

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.

**Replacement Donation** – A member who 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.

**Substitute Donation** – A donor who transfers the membership credit(s) they earned for donating blood to a non-member to provide them coverage or to add to another member's coverage period. A substitute donation is not for a patient who is using blood.

## **I. Individual Coverage**

Each donation exempts the member and his/her IRS dependents from paying blood suppliers' collection and processing fees anywhere in the United States for 12 months. The member 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. Pre-existing conditions are excluded.

- A. Benefits will be provided for medical conditions developing during the effective term of coverage requiring blood usage.
- B. MEDIC provides members' benefits regardless of private insurance coverage and/or Medicare coverage.
- C. MEDIC pays the blood supplier's processing fees not covered by Medicare blood deductibles.
- D. A request for payment of blood usage must be reported to MEDIC within one year from the date of usage. Minor children may be covered by either parent no matter which parent claims them as an IRS Dependent.
- E. Members who donate through an automated donation earn two credits.
- F. In instances of divorce, membership coverage stays with the member who earned or was given the individual coverage.
- G. Credits for a deceased member may be given to the surviving spouse or IRS dependent children.
- H. Members may give away credits within thirty days of donation (see substitute donations).
- I. IRS dependents who donate will earn coverage for the person who claims them on an IRS tax form and any other dependents listed on the same form for the same tax year. For example, if a minor child donates blood, the child's donation provides coverage for the child and his/her parents and siblings who are still IRS dependents.

## **II. Group Coverage: Company/Organization Program**

A company/organization may sponsor blood drives to obtain Group Coverage for all active employees/members if thirty percent (30%) of their group donate blood in a twelve month period.

- A. All employees/members and IRS dependents are covered during the group coverage period.
- B. If 30% quota is not met, each employee donating will be covered under MEDIC's Individual Coverage.
- C. Companies/organizations may request through their drive coordinator (recruiter) approval to grant a partial coverage period until their next blood drive. This request must be approved by a MEDIC Director.
- D. Proof of employment or membership may be required.

### **III. Replacement Donor Program –**

MEDIC's Replacement Program allows donors to give blood to someone who is not a MEDIC member and who is using, has used, or will use blood products. When making a replacement donation, the donor gives away his/her donation credit(s) to the patient.

- A. If the patient is using blood in a hospital serviced by MEDIC, fifteen dollars for each credit will be applied toward the hospital patient account. Only one credit can be applied to each unit of transfused blood. Unused credits will remain active for up to twelve months.
- B. For any additional credits to be distributed to the patient, the patient or patient's designated family member must contact MEDIC and complete necessary documents. Any remaining credits will be converted to fifteen dollars per credit and distributed to the patient by check up to the total amount of blood supplier processing cost on the patient's account. To maximize the number of credits, MEDIC encourages family members or friends to host a replacement drive to specifically benefit the patient.
- C. If the patient is using blood in a hospital outside MEDIC's service area, a check for fifteen dollars for each donation will be sent to the patient up to the total amount of blood supplier processing cost on the patient's account. The patient or patient's family must provide to MEDIC an itemized copy of the patient's hospital bill showing the blood products used.
- D. Two credits of fifteen dollars each will be given to the patient for donors that donate by automated donation.

### **IV. Substitute Donations**

Many members give more than once a year in order to obtain blood coverage for parents, other non-dependent family members, 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, and date of birth within 30 days of the donation.
- B. The substitute recipient will receive Individual coverage for twelve months. Pre-existing conditions are excluded.

### **VIII. Other Members**

MEDIC members that have donated blood in the past who can no longer donate, due to temporary or permanent deferral, 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 who attempts to donate but is deferred from giving blood does not earn a membership credit. A donor who gives the following donation types will not earn a membership credit.

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