



GIFT OF LIFE AIR TRANSPORTATION

A 501(c) 3 Non-Profit Corporation

Terms and Conditions

For

Private Patient Transport

Gift of Life Air Transportation Incorporated is a 501(c)3 charity and a registered non-profit corporation of the State of Texas. The Gift of Life Air Transportation Corporation is a Full Service Air Ambulance Service that provides a different type of air transportation to those with medical conditions and diseases. The Gift of Life Air Transportation Corporation provides Low and No Cost Air Transport and Air Ambulance Service to Anyone with medically related need, Provided they Meet, Follow and Adhere to the Terms and Conditions stated below.

Part 1 Establishing Need

1. The person requiring air transport suffers for a catastrophic, life threatening or life altering illness and/or medical condition or problem such as but not limited to:
 - a. Cancer
 - b. Aides
 - c. Burn Victim
 - d. Heart Condition
2. The person requiring air transport suffer from a condition the could result in partial or total paralysis, has a medical condition that requires specialized treatment or suffers from any diseases or condition that have debilitating effects on the patient and/or require long-term treatment.
3. The person requiring air transport requires medical treatment of any kind not available in local area.
4. The person requiring air transport requires has medical condition that a qualified Physician sees the necessity to move the patient to a treatment facility outside the local area (physician must supply a letter authorizing this type of transport).
5. The person requiring air transport has any medical condition that requires specialized treatment only available at certain medical facilities in the United States (excluding Hawaii).
6. The person requiring air transport is a Hospice Patient returning home to spend their last days with family.

Part 2 Make a Request

1. Person making a air transport request must be one of the following:
 - a. The Patient who needs transport.
 - b. A Family member of the patient (if the patient is unable to make the request themselves.
 - c. The Parent or Legal Guardian of the patient if the patient is under 18 years of age at the time of the request.
 - d. Attending Physician of the patient.
 - e. The Social Worker of the patient.
 - f. Legal caregiver of the patient.

If a request is made by other than those listed above the request will be rejected, no exceptions will be made, this is due to legal considerations.

2. Complete either the on-line request form or the mail in form and return to Gift of Life Air Transportation Inc.
***NOTE: incomplete request will be rejected**
3. Make request 3 to 4 weeks prior to scheduled appointment.
***NOTE: Does not apply to emergencies.**
4. Include any information on medical insurance carried by patient.

Part 3 Required Documents

1. Letter from attending physician stating:
 - a. Medical Condition or Disease
 - b. Condition of patient
 - c. Special needs of patient if any
 - d. Name of receiving medical facility or physician
2. Total combined income of all working members in household, and number in family:
Acceptable documents are:
 - Most resent Income Tax Return
 - Employers W-2 or W-4 or 1099 forms from the previous year.

Family Size is limited to those residing in household (i.e., husband and wife, children, grandparents if applicable).

3. Medical Insurance Information (if any).
4. Letter from receiving facility or physician showing appointment date(s), if this is not available please include facility/physician Name, Phone Number and Contact Person.

Part 4 Determination of Paid or No Cost Transport

Because we do not limit our service to just those who otherwise could not afford to travel to receive medical treatment and the cost involved in our operation. Gift of Life Air Transportation has adopted a policy of paid and unpaid transports.

To determine what program a patient qualifies for Gift of Life Air Transportation takes the number of people in the family unit and multiplies it by \$12,500.00. Those falling at or below this number qualify for no cost transport, for those over this number Gift of Life Air Transportation charges 1% of our cost for the transport for every \$5,000.00 over the maximum allow income for no cost transport up to 50% of our cost.

Currently Transport Cost is determined by our cost to and from Houston Texas.

This cost to the patient is waived if the patient is covered by medical insurance and the insurance company is will to cover the expense.

Gift of Life Air Transportation never charges a patient more than 50% of our cost nor do we ever charge an insurance company more than the actual cost of each transport. We are not looking to make a profit just to be able to provide service to as many people as we can.

Part 5 Disclaimer

1. **Ground Transportation:** Transportation to and from airports are your responsibility.
2. **Same Day Returns:** Because of scheduling we guarantee that we will be able to make a return trip the same day although we will make every effort to do so

we recommend that you have made arrangements for an overnight stay just in case.

3. **For Your Safety:** Seat belts must be worn at all times during the flight and shoulder straps must be worn during all ground operations and during Take-off, Climb-out and Approach and Landing phases of the flight.
4. **Weather:** On patient appointment and other non-emergency flights we keep the passengers comfort in mind. Most people are not accustomed to flying in smaller aircraft. Rough air, in cloud flying and other weather related conditions can make passengers apprehensive and are taken in to consideration for comfort and safety. The Pilot assigned to fly will make a fly, no fly decision based on weather reports received from flight service, if the flight is to be cancelled due to weather you will be notified at least 2 hours prior to you assigned arrival at your home airport.
5. **Schedule Changes or Cancellations:** Gift of Life Air Transportation Reserves the right to change or cancel patient appointment or other non-emergency flights as it deems necessary.
6. **Flight determinations are based on the following:**
 - 1) Medical Emergency/Disaster Relief (highest priority)
These happen without notice and require timely response. We will make every effort to contact you in the event your flight is cancelled in this situation
 - 2) Blood/Organ Transport
We generally (but not always) receive a 2 to 4 hour notice you will be contacted if your flight is cancelled in most of these situations
 - 4) Distance needing to be Traveled
If you are within 1 to 4 hours drive time to your appointment/treatment you can be bumped from your flight to accommodate a patient that has to travel 8 or more hours for an appointment or to receive treatment. You will be notified 3 or more days in advance if this happens.
 - 5) Treatment
Treatment takes priority over an appointment; It is all the harder to reschedule a treatment session than it is to reschedule an appointment. Again you will be notified 3 or more days in advance if this happens.
7. **Patient and Family Release**
By using our service you agree to allow Gift of Life Air Transportation to use your story and to take and use pictures of you and any family and/or friends accompanying you on the flight. Pictures and stories about patients using our service are placed on our web site, in press releases, in our news letter and for another reason Gift of Life Air may see fit. We do this in order to gain support, grants and other funding to make this service available at low and no cost.
8. **Gift of Life Air Transportation Inc.** assumes no liability for injury, or death that be caused because of weather, rough air, crashes, force landings,

malfunction of aircraft equipment, pilot error or any air travel. Any patient, family member or other support personal that may travel with the patient has requested transportation from Gift of Life Air Transportation Inc. and accepts all responsibility and liability holding Gift of Life Air Transportation Inc harmless and thereby releasing them from any and all liability and legal action of any kind.

What You Can Do to Help

Below is something thing you can do to help us provide you and your family during air transport when needed. This is not required to use our service. But we do ask you to consider it.

Ask friends, family, local churches, church groups and area businesses to become a flight sponsor. Have them place the patients name in the memo section of their check when making a donation. We will then place that money in an account for the person listed on the check and only use that money when the named person needs to travel.

***Note: Money left in account upon the completion of treatment will revert to our normal account to be used as we see fit.**

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