

MEMBERSHIP APPLICATION



Starts at just \$55/year!

**MUTUAL AID
=EMS=**

300
COMMUNITY EVENTS
ATTENDED PER YEAR

15
STATIONS
SERVING YOU

38k
EMERGENCY CALLS
TO ACTION



**DID YOU
KNOW?**

Mutual Aid Ambulance Service is a non-profit 501(C)(3) organization with a mission of providing pre-hospital emergency medical services to the communities we serve. We are the designated EMS provider to 34 municipalities in both Westmoreland and Fayette Counties. In 2024, we responded to nearly 70,000 requests for service from 14 stations in these communities. However, only a handful of these communities provide any assistance to support the services we provide.

Your Support is Vital to Ensuring That Mutual Aid Ambulance Service Will Continue to be Available for You

The primary source of our funding is payment from Medicare and other insurances. However, these payments do not fully cover the costs of our personnel, vehicles, training, medical supplies, and personal protective equipment. This Membership Program provides vital income needed to maintain the high quality of care that we provide to your community.

Our sincere thanks to all of our current and former members who have generously supported our mission of caring for the community!



APPLY ONLINE

Scan the above QR code or visit
www.mutual-aid.com/memberships



APPLY BY MAIL

Make check payable to MAAS, 561 West
Otterman Street, Greensburg, PA 15601



APPLY BY PHONE

724-837-6134,
Monday through Friday 7:30 am to 4 pm

= MUTUAL AID EMS =

Membership Application

INDIVIDUAL
\$55.00/YEAR

Covers only one individual whom is subscribing.

FAMILY
\$75.00/YEAR

Covers all permanent residents of your home.

BUSINESS
Call for a Quote

Covers employees of a business as members while they are at work.

Name: _____

Address: _____

Would you like to make a tax-deductible donation?

Please complete the back of this form

**MUTUAL AID
=EMS=**

Name: _____

Valid: _____

Memberships are valid 1 year following date of purchase.

Business Office: (724) 837-6134
Emergencies: Call 9-1-1
RETAIN THIS CARD



AMBULANCE MEMBERSHIP OVERVIEW

QUESTIONS?
724-837-6134

- Members will receive a 50% discount off copays/coinsurance over \$200 related to emergency and non-emergency ambulance service provided by Mutual Aid Ambulance.
- Members receive a reduced rate of \$325, plus \$6 per mile for all non-emergency/non-covered transports; \$440, plus \$6 per mile for all emergency/non-covered transports, which will coincide with the current Medicare/Medicaid fee schedule.
- Members receive a 50% discount for on-scene treatment without transport.
- Memberships are valid for one year from the purchase date and can be extended from the current expiration date.

Extra Benefits

Please contact directly for details



Members Get Deals & Discounts at These Businesses!



Q. WHY AM I RESPONSIBLE FOR MY INSURANCE DEDUCTIBLE IF I HAVE A MEMBERSHIP?

A. A deductible is the amount a patient must pay out of his or her own pocket before full healthcare insurance kicks in to cover medical claims. Mutual Aid cannot give you a discount on your deductible because we are contractually obligated by your insurance carrier to collect the full amount.

Q. I HAVE MEDICAID – DO I NEED A MEMBERSHIP?

A. No. Healthcare providers may be prohibited by law from offering Membership to or accepting Medicaid recipients. By submitting an application for Membership, the applicant certifies that they are not a Medicaid beneficiary.

Q. CAN I TAKE OUT A MEMBERSHIP IF I DO NOT HAVE INSURANCE?

A. Yes. You will receive a discounted rate on your emergent and non-emergent transportation, which will coincide with the current Medicare fee schedule.

Q. AM I CHARGED ANY FEES IF AN AMBULANCE DOES NOT TRANSPORT ME TO THE HOSPITAL?

A. Yes. Mutual Aid does charge a fee when on-scene treatment is provided but the patient is not transported. Since most insurance companies do not provide coverage for on-scene treatment without transport, members receive a 50% discount for any related fees that are not covered by insurance.

For additional terms and conditions, please visit www.mutual-aid.com/memberships. Terms and conditions are subject to change at any time.

This membership entitles holder to unlimited Emergency Medical Service and additional ancillary services, when available, subject to terms and conditions which are available on our website.
www.Mutual-Aid.com/Memberships
Mutual Aid Ambulance Service reserves the right to bill all available third party claims.



For additional information,
call 724-837-6134
7:30 am - 4 pm Mon - Fri

Account Holder

First*: _____ Last*: _____ DOB: _____
Phone*: _____ Email*: _____

Member(s) Names

First: _____	Last: _____	DOB: _____
First: _____	Last: _____	DOB: _____
First: _____	Last: _____	DOB: _____
First: _____	Last: _____	DOB: _____
First: _____	Last: _____	DOB: _____

If paying by credit card:

Card #: _____ CVV: _____
Exp: _____ Signature: _____ Date: _____