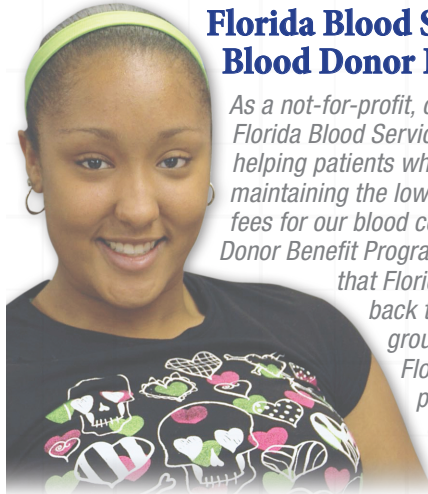


Blood Donor Benefit Program



Florida Blood Services & the Blood Donor Benefit Program

As a not-for-profit, charitable organization, Florida Blood Services is dedicated to helping patients who need blood by maintaining the lowest possible processing fees for our blood components. The Blood Donor Benefit Program is one of the ways that Florida Blood Services gives back to our donors and donor groups. Under this program, Florida Blood Services can pay some or all of the costs of processing blood components for patients.

How the Program Works & About Reimbursement of Processing Fees

Typically, hospitals pay processing fees for each unit of blood and those fees are passed on to the patient. Most insurance companies pay a portion of those processing fees, which includes recruiting costs, drawing, testing, storing, and distributing blood. Hospitals may add other charges to patient's bills such as administration, cross-matching, replacement and other transfusion related fees.

Under our program, the processing fees insurance companies don't reimburse, Florida Blood Services will. We reimburse all processing fees, up to \$5,000 per patient/per rolling calendar year, even if a patient does not have insurance. Our program does not pay hospitalization costs, but covers processing fees for transfusions received at any hospital in the United States.



Each unit of blood is subjected to more than 18 hours of processing and testing in our lab.

Who is covered after the first donation?

After one donation, the donor is covered for non-insured portions of the processing fee for blood received during the following 12 months. This donation also helps the donor group reach the pre-established goal for the year.

Who is covered after the second donation?

The second donation in a 12-month period covers the donor's income-tax dependent family members for non-insured portions of the processing fee for blood received during the following 12 months.

What is the length of coverage?

Each time a donor gives blood, coverage is extended 12 months from the current donation. A donor who gives at least once a year will be continuously covered under our program.

What are the guidelines for Blood Donor Group Coverage?

Blood Donor Group benefits, under Florida Blood Services' plan, make it possible for a group to cover individuals who are unable to give blood. When your organization reaches 50% participation within a 12-month period, Florida Blood Services will cover the non-insured portions of the blood processing fee for all blood products received by any member of the group.

Are family members of a Blood Donor Group covered by the group's plan?

Only members of the Blood Donor Group are covered by the group's plan. Individual donors can cover income-tax dependent family members by donating more frequently.

How can I help family or friends who are not covered?

You can help by making a "Gift Donation." A blood donor's third donation in a 12-month period can be made in the name of someone who is unable to donate blood. The Gift Donation must be made 30 days before any blood needs occur and does not cover pre-existing conditions. Special blood drives to benefit patients who have needed or will need blood transfusions can be approved by Florida Blood Services' administration on a case-by-case basis.

Does Florida Blood Services charge a non-replacement fee?

No, but some blood banks and hospitals do. If a Florida Blood Services' donor who is enrolled in the Blood Donor Benefit Program is charged a non-replacement fee by a hospital, Florida Blood Services will pay the cost of that fee up to the amount of times the donor has given blood with Florida Blood Services.

How do I collect benefits?

If you are an individual donor or member of a group, contact your organization's Blood Drive Coordinator, who will call their Community Relations Representative and confirm if the patient is covered under the program. An itemized copy of the hospital bill and insurance documents need to be forwarded to Florida Blood Services to reimburse the patient for the non-insured portions of the blood processing fees.



If you donated as an individual...

Call Florida Blood Services at 1-800-68-BLOOD (25663), dial "0" for the operator, and ask to speak to the Blood Donor Benefit Program Department.

If you are a member of a qualifying group... (For example, your workplace) Follow these steps:

1. Acquire an itemized bill from the hospital, after your insurance company has been billed their percentage.
2. Contact your designated donor group chair person and let them know you received blood and qualify for the Florida Blood Services Donor Benefit Program
3. Blood Drive Donor Chairperson contacts Community Relations Representative, who will confirm coverage under the program.
4. Florida Blood Services will reimburse any portion of the processing fees that have not been covered by your insurance company, up to \$5,000 per patient/per rolling calendar year. The unpaid part will be mailed to the patient.

**For more information, please call
Florida Blood Services
1-800-68-BLOOD (25663)
or visit us at www.fbsblood.org**

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