

**U.S. DEPARTMENT OF TRANSPORTATION**  
*Air Ambulance and Patient Billing Advisory Committee*



**Meeting Summary**  
**First Meeting of the AAPB Advisory Committee**  
**January 15-16, 2020**  
**U.S. Department of Transportation, Washington, D.C.**

The Air Ambulance and Patient Billing (AAPB) Advisory Committee met on January 15 and 16, 2020 in the Media Center at the U.S. Department of Transportation (DOT) Headquarters, 1200 New Jersey Avenue, SE, Washington D.C. 20590. The attached appendix identifies the Committee members, agency employees, and others who attended the meeting. In accordance with the Federal Advisory Committee Act (FACA), 5 U.S.C. App. 2, the meeting was open to the public. The webcast of the meeting is available at: <https://www.transportation.gov/airconsumer/AAPB/meeting-video>.

Several topics were discussed at the meeting: (1) an overview of the air ambulance industry; (2) air ambulance costs and billing; (3) insurance and air ambulance payment systems; and (4) disclosure and separation of charges, cost shifting, and balance billing. The meeting consisted of a morning and afternoon session each day which included presentations and opportunity for discussion. The speaker biographies, and all presentation materials that were provided at the meeting are available for public review and comment at <https://www.regulations.gov>, docket number DOT-OST-2018-0206. The agenda for the meeting is attached as an appendix.

**Day One**  
**January 15, 2020**

**Welcome, introductory remarks, and agenda overview**

The first day of the AAPB Advisory Committee (Committee) meeting began at 9:30 AM on January 15, 2020. Blane Workie, DOT Assistant General Counsel for Aviation Enforcement and Proceedings and Designated Federal Officer (DFO), gave welcoming remarks and provided meeting logistics. Ms. Workie stated the meeting would be live cast and a recording would be available on the DOT website following the meeting.

The committee members introduced themselves and gave brief opening remarks.

Greg Cote, DOT Associate General Counsel, gave remarks and thanked those present for attending. Mr. Cote reviewed the tasks assigned to the Committee by the Committee Charter and the FAA Reauthorization Act of 2018. Mr. Cote stated the intent of the meeting is to provide foundational background information and to begin a discussion on the issues for which the Committee must make recommendations. Mr. Cote reviewed the agenda and encouraged committee members to participate with a spirit of collaboration and a willingness to hear and respect alternative perspectives.

## **Presentations and Committee Discussion**

Following the welcome and introductory remarks, the morning session of day one began. The Committee heard from speakers who presented overviews of the air ambulance industry and air ambulance costs and billing reports. After each presentation, the Committee was invited to ask questions and make comments.

### Overview of Air Ambulance Industry: History, Models, Locations

*Roxanne Shanks, Association of Critical Care Transport*

The Committee first heard from Roxanne Shanks of the Association of Critical Care Transport and David Motzkin of the Association of Air Medical Services who provided an overview of the air ambulance industry. Ms. Shanks and Mr. Motzkin provided information on the history and evolution of the industry; models, business structures, and locations of air ambulance providers; ownership types; operation costs; and billing procedures.

Ms. Shanks gave a short history of the use of air transport to provide medical evacuation. Ms. Shanks described various models of service and medical team configurations and described that critical care standards vary from state to state. Ms. Shanks described the variation of medical helicopter capability in the U.S. fleet and noted that some states require accreditation to operate. Ms. Shanks discussed changes to the air ambulance industry over time, using data from the Atlas and Database of Air Medical Services (ADAMS) database. Ms. Shanks then presented information about the different air medical service delivery models as well an overview of air medical base locations and related changes over time.

### Overview of Air Ambulance Industry: Ownership, Operation Costs, Billing Procedures

*David Motzkin, Association of Air Medical Services*

Mr. Motzkin talked about conditions that must be present to launch an air ambulance. Mr. Motzkin addressed accessibility and other trends affecting the air medical services industry. Mr. Motzkin presented information about the costs of providing air medical services and discussed billing and collection practices. Mr. Motzkin discussed the different bills consumers might receive for air medical services. Mr. Motzkin also provided information on different air medical service provider ownership structures.

### Remarks by General Counsel Steven G. Bradbury

After Ms. Shanks' presentation and prior to the presentation by Mr. Motzkin, DOT General Counsel Steven G. Bradbury gave remarks. Mr. Bradbury discussed the complex nature of air ambulance regulation and noted DOT's authority to take enforcement action against air transportation providers engaged in unfair and deceptive practices. Mr. Bradbury discussed the congressional directives to the Committee and noted his interest in following the Committee's progress and reading the resulting report.

### Air Ambulance Costs and Billing Reports

*John Hargraves and Aaron Bloschichak of the Health Care Cost Institute (HCCI)*

*Marla Kugel, Kugel HPC*

The Committee then heard from John Hargraves and Aaron Bloschichak of the Health Care Cost Institute (HCCI) on their study titled *Air Ambulances-10 Year Trends in Costs and Use*.

Mr. Hargraves began by providing the Committee with some background information on HCCI, including its mission and data sources. Mr. Hargraves noted that the goal of HCCI's report was to gather data on the commercially insured to help fill in the gaps and provide a broader view to support stakeholders – including media and legislators. Additionally, Mr. Hargraves noted that the goal of the study was to report and benchmark data and that the report was not intended to suggest policy, but rather to suggest where more research might be done. Mr. Bloschichak noted that the report used a specific sample of the population and used four (4) specific Current Procedural Terminology (CPT) codes for air ambulance services for data points. Mr. Bloschichak discussed the study's findings and noted that the price and overall spending for air ambulances has increased.

Next, the Committee heard from Marla Kugel of Kugel HPC, on a study titled *Air Medical Services Cost Study Report*. The report was prepared for the Association of Air Medical Services and Members by Xcenda and Ms. Kugel was the main author of the report. Ms. Kugel presented the study and walked through its key findings. Ms. Kugel walked through the methods used by the study and noted that the study used information from responses to a form designed by industry CFOs. Ms. Kugel discussed the data that was collected and how the study made projections based on the data.

Following these presentations, the Committee adjourned for lunch.

During the afternoon session, the Committee heard presentations on different insurance and air ambulance payment system models. As in the morning, after each presentation the Committee was invited to ask questions and make comments.

### Insurance and Air Ambulance Payment Systems: Medicare/Medicaid

*Carol Blackford and Andrew Badaracco from the U.S. Department of Health and Human Services (HHS) Centers for Medicare & Medicaid Services (CMS).*

The Committee heard presentations on Medicare and Medicaid reimbursement in the context of air ambulance services, from Carol Blackford and Andrew Badaracco from the U.S. Department of Health and Human Services (HHS) Centers for Medicare & Medicaid Services (CMS).

Ms. Blackford provided an overview of the different Medicare services. Ms. Blackford discussed the requirements for Medicare Part B reimbursement and provided an overview of the Medicare Part B ambulance transport benefit. Ms. Blackford further described air ambulance transport coverage criteria and described air ambulance reimbursement amounts and calculations. Finally, Ms. Blackford presented the current base rates and mileage payments for air ambulance services.

Mr. Badaracco provided an overview of Medicaid's Division of Reimbursement Services. Mr. Badaracco discussed that the Medicaid program is a joint federal and state program and described the roles of the states in administering Medicaid. Mr. Badaracco also discussed the relationship

between the federal government and the states regarding Medicaid rate setting and noted that CMS cannot require a state change its rates after they have been approved.

Insurance and Air Ambulance Payment Systems: Private Insurance

*Myra Simon, America's Health Insurance Plans (AHIP)*

*Wanda Lessner, CareFirst*

The Committee next heard from Myra Simon from America's Health Insurance Plans (AHIP) and Wanda Lessner from CareFirst. Ms. Simon and Ms. Lesser were asked to present to the Committee about private insurance in the context of air ambulance payment systems.

Ms. Simon described the basics of in- vs. out-of-network approaches, and the responsibilities and incentives of each approach. Ms. Simon provided information on how consumers and patients can learn more about their insurance coverage, but noted that most consumers do not think to look for their air ambulance coverage until after the service has been rendered.

Ms. Simon also discussed the Federal coverage requirements to which private health insurance providers are subject, such as a prohibition on emergency medicine preauthorization. Ms. Simon discussed sources of consumer cost and discussed the variation in emergency and non-emergency situations and how those affect consumer cost. Finally, Ms. Simon discussed air ambulance and other provider disclosures.

Ms. Lessner noted that air ambulance service is covered under most private insurance contracts. Ms. Lesser stated that in non-emergency situations, a prior authorization by the insurance company is usually required for the service to be covered. Ms. Lessner described CareFirst's experience working with air ambulance providers and noted that CareFirst has recently gone in-network with most of the air ambulance service providers in Maryland. Ms. Lessner described pressures from the State legislature, other companies, and the Governor as contributing factors that led to an in-network agreement.

Insurance and Air Ambulance Payment Systems: Other Perspectives

*Brett Edwards, Health Scope Benefits*

*Mary Nichols, Texas Mutual Insurance Company*

The final presentations of the first day were given by Brett Edwards from Health Scope Benefits, and Mary Nichols from the Texas Mutual Insurance Company.

Mr. Edwards was asked to present about employee benefit plans in the context of air ambulance payment systems and Ms. Nichols was asked to present about workers' compensation insurance in the same vein.

Mr. Edwards began with background on laws to which private employers are subject. Mr. Edwards briefly discussed the Employee Retirement Income Security Act of 1974 (ERISA) as an important statute in this area. Mr. Edwards discussed that employee benefit plans are uniquely affected by air ambulance billing issues due to the source of the funds that pay these claims. Mr. Edwards noted that employee benefit plans are funded by employee premiums and/or employer assets and employee plans sometimes buy reinsurance to prepare for catastrophic claims.

Mr. Edwards stated that most of the air ambulance claims filed with employee benefit plans are

related to inter-facility transfers, and Mr. Edwards noted how the cost of this service differs depending on whether the transfer is scheduled or emergent. Mr. Edwards concluded his presentation by discussing the extensive disclosure requirements that apply to employers because of ERISA and suggested that some of these ideas might be borrowed to improve the disclosures made by private insurers.

Ms. Nichols described some of the ways that workers' compensation insurance differs from other types of insurance, such as the requirement that the workers' compensation insurance provider pay the entire amount of a claim. Ms. Nichols noted workers' compensation insurance liabilities are unique as they extend for the lifetime of the worker and cover more than just health care claims. Ms. Nichols noted that because workers' compensation insurance covers the entire claim, there is no balance billing. Ms. Nichols discussed some of the tradeoffs of the highly-regulated workers' compensation system and noted that the employee and the employer each give up certain rights or protections to have the security of specific benefits and liability limitations.

### **Open Discussion and Closing Remarks**

Following the presentations, the Committee members had the opportunity to make final remarks. Ms. Workie reviewed some of the data requests raised by the Committee throughout the day and noted that all the information presented to the Committee would be available on the AAPB Advisory Committee docket.

The meeting was adjourned for the day by Mr. Cote around 4:45 PM and scheduled to reconvene at 9:00 AM the following day.

## **Day Two January 16, 2020**

### **Welcome and Outline of Day Two**

The second day of the meeting of the Air Ambulance and Patient Billing Advisory Committee began at 9:00 AM on January 16, 2020 in the Department of Transportation (DOT) Conference Center.

### **Presentations**

The morning session of day two consisted of presentations on consumer issues. The Committee heard from speakers who presented on cost shifting and balance billing, disclosure of charges and insurance coverage, distinguishing between air transportation and medical charges, and consumer choice and determination of medical necessity. After each presentation, the Committee was invited to ask questions and make comments.

Consumer Issues: Cost Shifting and Balance Billing

*Jack Hoadley from the Georgetown Center on Health Insurance Reforms*

The Committee first heard from Jack Hoadley from the Georgetown Center on Health Insurance Reforms. Mr. Hoadley was asked to present to the Committee about cost shifting and balance billing from the consumer perspective. Mr. Hoadley began by providing an overview of key terms (surprise medical bill, balance bill, cost shifting) to be used throughout his presentation. Mr. Hoadley discussed surprise medical bills and situations where they might arise. Mr. Hoadley then discussed balance billing and conditions in which balance billing might be a strategy for increasing profits.

Mr. Hoadley discussed approaches for protecting consumers from surprise and balance bills. Mr. Hoadley provided a review of recent state legislative activity aimed at increasing consumer protections. Mr. Hoadley concluded his presentation with a discussion of proposed provisions and a look ahead to potential actions by Federal and state governments in 2020.

Consumer Issues: Disclosure of Charges and Insurance Coverage

*Troy Oeschner, New York Department of Financial Services*

Next, the Committee heard from Troy Oeschner of the New York Department of Financial Services who was asked to present about the disclosure of charges and insurance coverage from the perspective of a state regulator. Mr. Oeschner discussed ways in which advance notice of insurance coverage and/or air ambulance charges might help to eliminate or reduce balance billing. Mr. Oeschner noted that many air ambulance trips occur in emergent situations, and thus notice of insurance coverage or potential charges might not be particularly useful in combatting balance bills.

Mr. Oeschner discussed how the documents that are sent to consumers explaining their insurance coverage and explaining their benefits are helpful, but again noted that these documents are sent after the air ambulance services have been rendered. Mr. Oeschner noted other challenges for state regulators, such as the Airline Deregulation Act and ERISA.

Consumer Issues: Distinguishing Between Air Transportation and Medical Charges

*Shawn Gremminger, Families USA*

*Ed Marasco, Quick Med Claims*

Following the presentation by Mr. Oeschner, the Committee heard from Shawn Gremminger of Families USA who was asked to present from the consumer advocate perspective about distinguishing between air transportation and medical charges.

Mr. Gremminger first provided an overview of the average family liquid savings compared with the average medical billing costs. Mr. Gremminger described how the air ambulance services market could be viewed as failing since the cost of the service has not decreased even though the supply of the service has increased. Mr. Gremminger discussed potential effects on consumers of splitting an air ambulance bill into transportation charges and medical charges. He noted that the split might increase transparency in the charges, but it would likely not affect the consumer as they would still be concerned with the total amount of the bill.

The Committee next heard from Ed Marasco of Quick Med Claims who presented about distinguishing between air transportation and medical charges from the billing services perspective.

Mr. Marasco presented on the different organizational structures of air medical service providers and how the different structures could present challenges to the feasibility of distinguishing charges. Mr. Marasco described some challenges in cost analysis, including that medical transport has a high fixed cost, which makes it difficult to determine the actual cost of a transport. Mr. Marasco noted that cost can be affected by many factors such as the weather and transport volume.

Mr. Marasco then presented an overview of claims processing trends and suggested that distinguishing between charges in a bill might have the effect of confusing consumers instead of providing transparency as they may not understand the difference between the bills or how their insurance applies. Mr. Marasco described challenges for the service provider and the consumer in submitting two claims for an air ambulance trip and noted potential challenges to adjudicating multiple claims for one trip. Mr. Marasco highlighted other potential issues with payment processing and noted the potential of a general increase in administrative burden because of distinguishing charges for air ambulance trips

Consumer Issues: Consumer Choice and Determination of Medical Necessity

*Dr. Ed Racht, Global Medical Response*

The final morning session presentation was given by Dr. Ed Racht of Global Medical Response. Dr. Racht was asked to present to the Committee from the medical professional perspective on the issue of consumer choice and the determination of medical necessity.

Dr. Racht presented an overview of the current state of medical services practice and discussed clinical advantages of emergency air ambulance service. Dr. Racht described the importance of a system of decision making and walked the Committee through the decision-making processes of Emergency Medical Technicians when deciding what kinds of services are medically necessary. Dr. Racht discussed the evolution of out-of-hospital care and the resulting impact on impacts air emergency medical services.

Following these presentations, the Committee adjourned for lunch.

During the afternoon session, the Committee heard presentations from DOT's Office of General Counsel. As in the morning, after each presentation the Committee was invited to ask questions and make comments.

Consumer Issues: Consumer Complaints

*Rob Gorman, DOT Office of Aviation Enforcement and Proceedings*

The Committee heard from Rob Gorman from DOT's Office of Aviation Enforcement and Proceedings about DOT's involvement and response to consumer complaints which are received regarding air ambulance services or billing practices.

Mr. Gorman provided the Committee with an overview of the Office of Aviation Enforcement and Proceedings, including its organizational structure, employees, and enforcement practice. Mr. Gorman described DOT's relevant statutory authority found in section 41712 of title 49 of the United States Code and how that authority is interpreted and enforced by the office. Mr. Gorman described the DOT complaint handling process in general and then provided specific information about how air ambulance complaints are handled. In addition, Mr. Gorman provided information on where DOT

houses complaint information and data that is available to the public. Mr. Gorman presented an overview of the kinds of complaints DOT receives relating to air ambulance and discussed other avenues and potential repositories for consumer complaints.

Air Ambulance Litigation, Airline Deregulation Act, and Preemption

*Paul Geier and Charlie Enloe, DOT Office of Litigation and Enforcement*

The Committee then heard from Paul Geier and Charlie Enloe of DOT's Office of Litigation and Enforcement. Mr. Geier and Mr. Enloe were asked to present about DOT involvement in, and a general discussion of, air ambulance litigation, as well as an overview of the Airline Deregulation Act of 1978 (ADA) and related preemption issues.

Mr. Geier provided a description of the Supremacy Clause of the Constitution and explained that it functions as displacement of state law in deference of federal law. Mr. Geier then provided an overview of the ADA and the "regulated era" of aviation. Mr. Enloe explained that the ADA prohibits the regulation of anything "related to" air transportation price, and further explained that "related to" has been interpreted expansively by the Supreme Court. Mr. Enloe discussed how the ADA has interpreted "air carrier" to include air ambulances. Mr. Enloe also discussed the McCarran Ferguson Act and how it allows states to regulate the business of insurance. Mr. Enloe described several principles of state law which require payment to air ambulances who provide service and provided an overview of cases litigating payment issues. Finally, Mr. Enloe presented on evolving body of law related to cases challenging the application of the ADA to various state efforts to regulate air ambulance services.

**Opportunity for Final Comment and Adjournment**

The meeting concluded with the opportunity for final comments from the Committee and the public in attendance. The first meeting of the AAPB Advisory Committee was adjourned by Mr. Cote around 4:00 PM.

I hereby certify that, to the best of my knowledge, the foregoing minutes are accurate and complete.

Gregory D. Cote  
Chairman  
Air Ambulance and Patient Billing Advisory Committee



## Appendix

### Present Committee Members

Michael Abernathy, Physicians

Gregory Cote, Chair and Department of Transportation member

Jon Godfread, State Insurance Regulator

John Haben, Health Insurance Provider

Thomas Judge, Air Ambulance Operator (community/state/government owned)

Patricia Kelman, Consumer Advocacy Group

Anne Lennan, Managers of Employee Benefit Plans

Kyle Madigan, Nursing

Asbel Montes, Air Ambulance Operator (fixed wing)

Christopher Myers, Air Ambulance Operator (rotary wing)

Ray Pickup, Workers' Compensation Insurance Industry

Blane Workie, Designated Federal Officer

Rogelyn McClean, Department of Health and Human Services, Centers for Medicare & Medicaid Services

### DOT and Other Governmental Representatives

Robert Gorman, Department of Transportation

Kim Hargett, Department of Transportation

Peter Cacioppo, Department of Transportation

Emily Jessup, Department of Transportation

Paul Geier, Department of Transportation

Charlie Enloe, Department of Transportation

Carol Blackford, Department of Health and Human Services, Centers for Medicare & Medicaid Services

Andrew Badaracco, Department of Health and Human Services, Centers for Medicare & Medicaid Services

Other Attendees

Roxanne Shanks, Association of Critical Care Transport  
David Motzkin, Association of Air Medical Services  
John Hargraves and Aaron Bloschichak, Health Care Cost Institutes  
Marla Kugel, Kugel, HPC  
Wanda Lessner, CareFirst  
Myra Simon, America's Health Insurance Plans  
Brett Edwards, Health Scope Benefits  
Mary Nichols, Texas Mutual Insurance Company  
Jack Hoadley, Georgetown University Center on Health Insurance Reforms  
Troy Oeschner, New York State Department of Financial Services  
Shawn Gremminger, Families USA  
Ed Marasco, Quick Med Claims  
Ed Racht, Global Medical Response  
Amey Sutkowski, Office of the Governor, New York State  
Bernard Diederich  
Brian Webb, National Association of Insurance Commissioners  
Carolyn Mayle, Air Methods  
Ruthie Barko, Air Methods  
Doug Flanders, Air Methods  
Chris Eastlee, Association of Air Medical Services  
Cameron Curtis, Association of Air Medical Services  
Conor Skelding, Reorg Research  
Daniel Graver, Akin Gump  
Dennis Lloyd, Workers Compensation Fund  
Jim Gould, Workers Compensation Fund  
Ebony Liggins, America's Health Insurance Plans  
Ed Kressler, Angelo & Gordon  
Frank Vlossak, Williams & Jensen  
Heather Stamey, MedStar

Holly Weber, Metro Aviation  
James Thumpston, KMA Zuckert  
Joe Touchner, National Association of Insurance Commissioners  
Jeff Rude, State of Wyoming  
Josh Goldberg, Heath Care Service Corporation  
Kim Godden, Superior AGAS  
Cherie Pepping, Superior AGAS  
Maanasa Kona, Georgetown University  
Mark Galay, Marwood Group  
Maura Hughes, Boston MedFlight  
Jeff Stanek, PHI Health  
Christopher Hall, PHI Health  
Jeff Munk, Munk Policy & Law  
Rachel Cors, Modern Health Care  
Shawn Remick, Indiana University  
Cory Hall, Indiana University  
Thomas A.A. Cook, Global Medical Response  
Tim Pickering, Global Med Response  
Tim Tucker, National Council on Compensation Insurance  
Tom Wilder, UnitedHealth  
Tyler Hoblitzell, American Heart Association



**AGENDA**  
**First Meeting: Air Ambulance and Patient Billing Advisory Committee**  
**January 15, 2020**

- 9:30 to 9:35**                    **Welcome and Housekeeping Matters**  
*Blane Workie, DOT Assistant General Counsel for Aviation Enforcement and Proceedings, Designated Federal Officer (DFO)*
- 9:35 to 10:00**                **Introductory Remarks of Committee Members and Chair**
- 10:00 to 10:10**               **Remarks by General Counsel Steven G. Bradbury**
- 10:10 to 10:15**               **Overview of Agenda and Committee’s Tasks**  
*Greg Cote, Associate General Counsel, DOT*
- 10:15 to 11:15**               **Overview of Air Ambulance Industry: (1) History, Models, Locations;**  
**(2) Ownership, Operation Costs, Billing Procedures**  
*(1) Roxanne Shanks - ACCT; (2) David Motzkin – PHI Health*
- 11:15 to 11:25**               **Q&A**
- 11:25 to 11:35**               **Break**
- 11:35 to 12:10**               **Air Ambulance Costs and Billing Reports**  
*John Hargraves and Aaron Bloschichak - HCCI; Marla Kugel – Kugel HPC*
- 12:10 to 12:30**               **Q&A**
- 12:30 to 1:30**                **Lunch**
- 1:30 to 2:10**                **Insurance and Air Ambulance Payment Systems (1): Medicare/Medicaid**  
*Carol Blackford - HHS CMS (re Medicare); Andrew Badaracco - HHS CMS (re Medicaid)*
- 2:10 to 2:20**                **Q&A**
- 2:20 to 3:00**                **Insurance and Air Ambulance Payment Systems (2): Private Insurance**  
*Myra Simon – AHIP; Wanda Lessner - CareFirst*
- 3:00 to 3:10**                **Q&A**
- 3:10 to 3:20**                **Break**
- 3:20 to 4:05**                **Insurance and Air Ambulance Payment Systems (3): Other Perspectives**  
*Brett Edwards - Health Scope Benefits (re employee benefit plans);  
Mary Nichols – TX Mut. Ins. Co. (re workers’ comp)*
- 4:05 to 4:20**                **Q&A**
- 4:20 to 5:00**                **Open Discussion; Final Q&A; Closing Remarks**  
*AAPB Members and DFO*



## **First Meeting: Air Ambulance and Patient Billing Advisory Committee**

*January 16, 2020*

<b>9:00 to 9:15</b>	<b>Welcome; Summary/Recap of Day 1; Outline of Day 2</b> <i>Blane Workie, DFO; Greg Cote, Chair</i>
<b>9:15 to 9:50</b>	<b>Consumer Issues (1): Cost Shifting and Balance Billing</b> <i>Jack Hoadley – Georgetown CHIR</i>
<b>9:50 to 10:00</b>	<b>Q&amp;A</b>
<b>10:00 to 11:00</b>	<b>Consumer Issues (2): (a) Disclosure of Charges and Insurance Coverage; (b) Distinguishing Between Air Transportation and Medical Charges</b> <i>(a) Troy Oeschner - NY Dept. of Fin. Svcs</i> <i>(b) Shawn Gremminger - Families USA; Ed Marasco - Quick Med Claims</i>
<b>11:00 to 11:10</b>	<b>Q&amp;A</b>
<b>11:10 to 11:20</b>	<b>Break</b>
<b>11:20 to 12:00</b>	<b>Consumer Issues (3): Consumer Choice and Determination of Medical Necessity</b> <i>Dr. Ed Racht - Global Medical Response</i>
<b>12:00 to 12:10</b>	<b>Q&amp;A</b>
<b>12:10 to 1:00</b>	<b>Lunch</b>
<b>1:10 to 1:50</b>	<b>Consumer Issues (4): Consumer Complaints</b> <i>Rob Gorman - DOT</i>
<b>1:50 to 2:00</b>	<b>Q&amp;A</b>
<b>2:00 to 2:50</b>	<b>Air Ambulance Litigation, Airline Deregulation Act, and Preemption</b> <i>Paul Geier - DOT</i>
<b>2:50 to 3:00</b>	<b>Q&amp;A</b>
<b>3:00 to 4:00</b>	<b>Open Discussion; Final Q&amp;A; Closing Remarks</b> <i>AAPB Members and DFO</i>