

## About Us...

Northern Valley Emergency Medical Services, Inc. (NOVA) is a not-for-profit 501(C)(3) organization which will respond to more than 3,600 emergency calls this year. Our Pennsylvania licensed ambulances are equipped with state-of-the-art equipment and staffed with highly qualified emergency medical personnel who meet the National Standards.

**IN CASE OF EMERGENCY, DIAL 911.**

To schedule non-emergency medical transportation services\* or Community Care Visits, please call the Business Office at 610-262-1075.

## 2019 Service Rates

### 911 Emergency Medical Services

- Basic Life Support - \$750
- Advanced Life Support Level 1 - \$900
- Advanced Life Support Level 2 - \$1,050
- Emergency Mileage - \$15 / loaded mile

### NOVA Household Subscriber ONLY Services

#### Non-Emergency Medical Transportation

- Basic Life Support - \$250
- Advanced Life Support \$350
- Non-Emergency Mileage - \$8 / loaded mile


#### Community Care Visits

- \$20 per visit

**Both subscribers and non-subscribers are responsible for forwarding all payments received for services rendered from their insurance carrier to NOVA immediately upon receipt.**

\* Availability for non-emergency medical transportation is contingent upon ambulance availability and is offered for urgent facility to facility or home to facility medical transportation services.

Keep this for your records:

Amount Paid	Check#	Date
January 1 – December 31, 2019		
		
<b>SUBSCRIPTION</b>		

### NOVA AUXILIARY 2019 CALENDAR

#### JANUARY 2019

Apple Dumpling Sale

#### FEBRUARY 2019

Cherry Pie & Soup Sale  
COMEDY NIGHT DINNER AND SHOW 02/23

#### MARCH 2019

Shoo-fly Pie Sale

#### APRIL 2019

Bazaar with Baskets  
Easter Paska Bread Sale

#### MAY 2019

Primary Election Day Sale: pies, breads, soups & sandwiches

#### JULY 2019

Chicken BBQ (eat in or take out)

#### AUGUST 2019

DESIGNER PURSE BINGO 08/04

#### SEPTEMBER 2019

Shoo-fly Pie Sale

#### OCTOBER 2019

Apple Dumpling Sale

#### NOVEMBER 2019

Election Day Sale: pies, breads, soups & sandwiches  
Thanksgiving Sale: bacon dressing, filling & nut rolls

#### DECEMBER 2019

Holiday Shoppe

**Banquet Hall Rental Inquiries  
Call 610-799-3483 or 610-262-1075**

# NOVA '19

Northern Valley Emergency  
Medical Services, Inc.

*Caring is what we do best!*

NOVA

provides services to Heidelberg, North Whitehall and Washington Townships, the Boroughs of Slatington and Walnutport, and portions of Lowhill Township.



2375 Levans Road | Coplay, PA 18037-2202

610-262-1075

SUBSCRIPTION CAMPAIGN

# BECOME A NOVA SUBSCRIBER TODAY!

Your subscription and donation provide NOVA with the necessary support needed to continue providing exceptional quality emergency care. We are your emergency medical services provider. Money raised through subscriptions is used to meet operating costs, purchase equipment, and train staff.

## Why should I subscribe?

A NOVA Subscription provides peace of mind for you and family members residing in your household should you need emergency medical transportation services. You are financially responsible for the full cost of emergency medical transportation services. While NOVA will bill your insurance carrier for medically necessary emergency services rendered, most insurance carriers only pay a portion of the charges for ambulance services – leaving you with out-of-pocket expenses. As a subscriber, your subscription fee reduces your liability for cost-sharing amounts (deductibles, copayments, coinsurance) up to \$500 per emergency ambulance trip.

In addition, your NOVA Subscription gives you access to urgent non-emergency medical transportation services, NOVA Community Care Visits, and discounted rates with designated providers for wheelchair transportation services.

# 2019 SUBSCRIPTION FORM BUSINESS

Provide your employees with access to the advantages of NOVA's Subscription Program for emergency medical transportation services while they are working at your business location and within NOVA's primary coverage area.

1 – 19 Employees	\$200
20 – 49 Employees	\$400
50 + Employees	\$600

## PLEASE PRINT

Business Name \_\_\_\_\_  
Street Address / P.O. Box \_\_\_\_\_  
\_\_\_\_\_  
City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_  
Phone \_\_\_\_\_  
Township or Borough \_\_\_\_\_  
Contact Name \_\_\_\_\_

### Donations Welcome & Appreciated

\$50 \$100 \$250 \$500 Other \$ \_\_\_\_\_

Subscription Total \$ \_\_\_\_\_

Donation Total \$ \_\_\_\_\_

**Total Enclosed \$ \_\_\_\_\_**

*(Check or Credit Card)*

Name on Credit Card \_\_\_\_\_

Credit Card # \_\_\_\_\_

Expiration Date \_\_\_\_\_ Security Code \_\_\_\_\_

Visa     MasterCard     Discover

Please make checks payable to  
"Northern Valley EMS"

PLEASE DETACH & RETURN THIS PORTION WITH PAYMENT.  
YOUR CANCELED CHECK IS YOUR RECEIPT.

# 2019 SUBSCRIPTION FORM

Single / Individual Subscription: \$45.00  
Household Subscription: \$70.00

## PLEASE PRINT

1. Name \_\_\_\_\_  
Street Address / P.O. Box \_\_\_\_\_  
\_\_\_\_\_  
City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_  
Phone \_\_\_\_\_  
Township or Borough \_\_\_\_\_  
2. Please list full names of family members residing at this address

### Donations Welcome & Appreciated

\$20 \$30 \$50 \$100 Other \$ \_\_\_\_\_

Subscription Total \$ \_\_\_\_\_

Donation Total \$ \_\_\_\_\_

**Total Enclosed \$ \_\_\_\_\_**

*(Check or Credit Card)*

Name on Credit Card \_\_\_\_\_

Credit Card # \_\_\_\_\_

Expiration Date \_\_\_\_\_ Security Code \_\_\_\_\_

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