
OPINION OF TRUSTEES

In Re

Complainant: Pensioner
Respondent: Employer
ROD Case No: 98-034 – November 20, 2002

Trustees: A. Frank Dunham, Michael H. Holland, Marty D. Hudson and
Elliot A. Segal.

The Trustees have reviewed the facts and circumstances of this dispute concerning the provision of benefits under the terms of Employer Benefit Plan.

Background Facts

During a visit to another state, the Complainant's spouse began to have trouble breathing. The Complainant's spouse used an inhaler to try to ease her difficulty with breathing. When her difficulty with breathing did not lessen, the Complainant's spouse sought treatment at a hospital emergency room on June 18, 2000. According to the emergency room medical notes, the Complainant's spouse's symptoms included a sore throat that had started two days prior to her visit to the emergency room. The Complainant's spouse's symptoms and difficulty swallowing were severe enough that the attending emergency room physician ordered soft tissue x-rays of the neck to evaluate the possibility of acute epiglottitis. Epiglottitis is a disorder caused by the inflammation of the cartilage that covers the windpipe when swallowing and can obstruct breathing. After considering the x-ray results and making further observation, the attending physician decided that a diagnosis of acute epiglottitis was unlikely and that the severe swelling in the neck could be from an early retropharyngeal abscess (a collection of pus in the tissues in the back of the throat). The discharge impression was acute pharyngitis (inflammation of the pharynx) which the attending physician treated with antibiotics. Upon being discharged, the Complainant's spouse was instructed to see her own physician to follow up or return to the emergency room if not better in two to three days or sooner if her condition got worse.

The Respondent has denied benefits for the use of the emergency room.

Dispute

Is the Respondent required to provide benefits for the Complainant's spouse's emergency room charge?

Positions of the Parties

Position of the Complainant: The Respondent is required to provide benefits for the emergency room charge because the treatment was medically necessary.

Position of the Respondent: The Respondent is not required to provide benefits for the emergency room charge for the following reasons: 1) The emergency care was not medically necessary; 2) The emergency care was not provided within forty-eight hours following the onset of the symptoms; and 3) The treatment could have been performed with equal efficiency at a lower level of care, i.e. a physician's office. Previous Trustee Opinions—RODs 88-609, 88-365, 88-602 and 88-603—support the Respondent's position.

Pertinent Provisions

Article III A. (2) (a) of the 1998 Employer Benefit Plan states:

(2) Outpatient Hospital Benefits

(a) Emergency Medical and Accident Cases

Benefits are provided for a Beneficiary who receives emergency medical treatment or medical treatment of an injury as the result of an accident, provided such emergency medical treatment is rendered within 48 hours following the onset of acute medical symptoms or the occurrence of the accident.

Discussion

Article III A. (2) (a) provides emergency room benefits for treatment received within 48 hours of the onset of acute medical symptoms.

A Funds' medical consultant has reviewed the documentation submitted in this case and notes that acute epiglottitis, although rare, is a life threatening condition and should always be considered a true emergency. Because of the potentially life threatening conditions evaluated and considered by the physicians involved in the Complainant's spouse's care, the consultant concludes that the emergency room treatment was appropriate. Additionally, the Complainant's spouse's visit to the emergency room was prompted by acute symptoms that worsened within 48 hours of that visit. Therefore, consistent with the provisions of the 1998 Employer Benefit Plan, the Respondent is required to provide benefits for the emergency room charge for the Complainant's spouse's visit on June 18, 2000.

To support its position in this dispute, the Respondent referred to previous Trustee Opinions where coverage for emergency room charges was denied. However, disputes concerning coverage for an emergency room charge are reviewed on a case by case basis because each case must be evaluated on its own merits based on the evidence submitted.

Opinion of the Trustees

Consistent with the provisions of the 1998 Employer Benefit Plan, the Respondent is required to provide benefits for the emergency room charge for the Complainant's spouse's visit on June 18, 2000.