

Emergency Medical Evacuation: Keeping Up with Getting Out

Ample coverage and comprehensive medical assistance during an evacuation are foundational elements of all GeoBlue[®] products. You may have some questions about this benefit. We help debunk some common misconceptions about medical evacuations below.



MYTH: Medical evacuation and repatriation are the same.

Reality: Medical evacuation typically means moving a patient from one location where the local care is not adequate to meet the patient's needs to another nearby location that does. Repatriation means transport, usually medically supervised, back to the patient's country of residence. There are situations where a medical evacuation is also a repatriation. Other times, a patient is evacuated to a nearby Center of Excellence (CoE) to receive care and recover, and then the patient continues with their journey. More commonly the patient has been evacuated first to a nearby CoE and then repatriated back home for longer-term care and/or convalescence.



MYTH: In order for a repatriation to be covered, the patient must first have a covered evacuation.

Reality: While it's most common for an evacuation to first occur, not all GeoBlue policies require such for the repatriation to be covered. Our clinical team may determine that a medically supported transport is required to return the patient to their residence, regardless of whether a covered evacuation preceded it. An example is when a member is in a CoE city and is hospitalized and treated, but still requires medically supervised transport to safely get home for further treatment or recovery.



MYTH: Medical evacuation back to the U.S. is always the best course of action.

Reality: Based on the situation and treatment needed, the GeoBlue Global Health & Safety (GHS) team works with the treating facility to determine patient stability and the risk and benefits of moving a patient to another facility. These factors provide important data as to whether a member requires evacuation back to the U.S. In most emergency cases, the patient will first be stabilized, then a plan will be set for medical evacuation to the closest CoE or repatriation. Should transport be recommended, our GHS team coordinates and arranges direct payment for the best method of transportation – for example, ambulance, helicopter, air ambulance – which may require a few days to complete.

MYTH: Evacuations happen quickly; after all, it is an emergency.



Reality: While evacuations normally involve very serious medical conditions, the patient is usually hospitalized in a setting that can meet their immediate, short-term needs. In fact, the patient must be stable enough before an evacuation takes place (a determination that is usually jointly made by the treating doctor, GeoBlue's clinical team, and the transport vendor's medical authority). While GeoBlue maintains a global network of medical transport resources, there are also a number of factors that affect the timeframe for transport, including: arrangements with a receiving care facility, transit time for the transport resources to get to the patient, crew rest, landing permits, seat availability, weather, etc. GHS works to keep the patient and family informed of the timeframes throughout the course of the transport.

MYTH: Medical evacuation by air ambulance is the best method of transport.



Reality: Emergency transportation vehicles have one goal: provide life-sustaining care to patients needing to get from point A to point B. Similar to ground ambulances, air ambulances are packed with life-saving equipment and provide minimal space for travelers. Aside from the necessary travelers – the emergency responder, the patient and possibly one other travel companion – there is usually no extra room for luggage, no extra seats, nor in-flight catering or other amenities. The cabin environment can be loud. Additionally, because of size and range, air ambulances can often only go short distances in comparison to a commercial jet. Depending on the situation, an air ambulance may be the right approach. However, a commercial airline, with or without a medical escort, may be an option. GeoBlue's GHS team has experienced medical staff who can make these determinations based on the patient's condition, needs during transport and distance to the nearest CoE.



FACT: Our global solutions are designed to help members navigate the complexities of international healthcare, providing them with confidence and peace of mind.

In a medical emergency, our teams are available 24/7/365 to support members around the world. We work directly with healthcare facilities to identify the best treatment options and care settings, coordinate appropriate medical transportation and arrange direct pay to healthcare providers for services with a goal to simplify and streamline a challenging, stressful event.

See how we are simplifying the international healthcare experience for the globally mobile. Visit www.about.geo-blue.com



All services are provided through GeoBlue, an independent licensee of the Blue Cross Blue Shield Association. GeoBlue is owned and backed by market leaders, a consortium of Blue Cross Blue Shield plans and Bupa Global.

Blue Cross Blue Shield Global is a brand owned by Blue Cross Blue Shield Association. GeoBlue is the trade name of Worldwide Insurance Services, LLC (Worldwide Services Insurance Agency, LLC in California and New York), an independent licensee of the Blue Cross and Blue Shield Association: made available in cooperation with Blue Cross and Blue Shield companies in select service areas. Coverage is provided under insurance policies underwritten by 4 Ever Life Insurance Company, Oakbrook Terrace, IL, NAIC #80985.

Brought to you by the international
healthcare experts at

GeoBlue