

Goodhealth Worldwide (Global) Limited

c/o Aetna Global Benefits Administrators Inc. TF: +1 800 914 2177 (inside USA only)  
 PO Box 30545 T: +1 813 775 0220  
 Tampa, Florida 33614 F: +1 860 262 9111  
 USA E: AmericasServices@aetna.com



**Patient and health insurance information**

Patient's Last Name:  First Name:  Middle:

Group Name:

Date of Birth:  day  month  year Name (Last, First) of Policyholder:

Gender: M  F  Policy Number:

Address:

City:  State:

Country:

Start Date of Policy:  End Date of Policy:

Home Phone No.:

Emergency Contact Name:  Emergency Phone No.:

**Health insurance benefits information**

Deductible:  Co-insurance%:

Policy Limitations:

**Treatment request information**

Facility:

Contact Name:  Telephone No:

Fax No.:  Date of appointment:  Time of appointment:

Name and Speciality of Practitioner:

Address of Practitioner:

City:  State:

Country:

TID Number:

Diagnosis or Chief Complaint:

Treatment Requested:  ICD Code:  CPT Code:

**FOR ADDITIONAL MEDICAL INTERVENTION, PLEASE CONTACT US FOR PRE-CERTIFICATION. FAILURE TO DO SO MAY RESULT IN REDUCED OR NON-PAYMENT OF A CLAIM.**

For diagnostic laboratory work, refer the patient to Quest Diagnostic or Labcorp Diagnostic Centers.

Should you require assistance in identifying in-network providers, please contact Goodhealth Worldwide (Global) Limited c/o Aetna Global Benefits Administrators Inc.

Submit claims and medical records to:

Goodhealth Worldwide (Global) Limited c/o TF: +1 800 914 2177 (inside USA only)  
 Aetna Global Benefits Administrators Inc. T: +1 813 775 0220  
 PO Box 30545 F: +1 860 262 9111  
 Tampa, Florida 33614 E: AmericasServices@aetna.com  
 USA

Final payments are subject to plan benefits, policy guidelines and PPO fee schedule allowance. If you have any questions regarding your coverage or the pre-certification please contact Goodhealth Worldwide (Global) Limited c/o Aetna Global Benefits Administrators Inc.

PRE-CERTIFICATION NUMBER:  PPO NETWORK: