Quality health plans & benefits
Healthier living
Financial well-being
Intelligent solutions

aetna℠

It's easy to verify benefits and file claims

Passport To Healthcare®

Product overview

Aetna's Passport to Healthcare (PTH) PPO product is for Aetna members who are in the United States for temporary and long-term work assignments, to attend a college or university, and/or for personal travel. PTH gives these members access to Aetna providers for cost-effective quality care and case management.

Members may or may not carry a traditional Aetna ID card. An Aetna PTH Verification of Benefits (VOB) is the standard way to identify PTH members. Aetna, a third-party administrator (TPA) or the employer is responsible for providing you with verification of a member's eligibility and benefits.

Contract

Aetna Passport to Healthcare members are a part of the Aetna Open Choice® PPO network. You can provide health care services to PTH members as long as you participate in Aetna's PPO network.

Advantages and ease of administration

Verifying benefits and filing claims for patients from outside the United States can be difficult. Typically, you must deal with various time zones, dialing internationally, which can be costly, and filing claims to out-of-country addresses. PTH simplifies and expedites this process by handling all of the international contact behind the scenes.

PTH verifies eligibility and benefits, and generates a VOB from within the United States. You may file claims electronically or mail them to the Aetna office listed below. To get the status of a claim(s), call Aetna Provider Services at **1-800-414-0596**.

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Benefits and eligibility

When a patient makes an appointment, he and/or she should provide you with the appropriate contact number. Please call to verify the member's eligibility and benefits. This phone call should result in the issuing of a VOB. In an emergency, PTH members who have their policy documents with them will give proof of coverage at the time of services. Please call the phone number on their documentation to verify their eligibility and benefits. Members who present in the emergency room without their documentation should be instructed to call in their policy details once they are discharged.

Precertification

Members who are in the United States and are seeking care from an Aetna participating provider must be precertified.

Provider Service Center

Please contact us at **1-800-414-0596**.

Electronic claims submission

Submit electronic claims using Aetna's electronic Payer ID #60054.

Paper claims submission

Aetna
PO Box 30547
Tampa, FL 33630-3547

Sample member ID/Verification of Benefits

Plan Sponsor Logo Here

Verification of Benefits

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Date Printed: Date faxed to facility
Provider Name: Facility or doctor name here
Fax #: 555-125-1234 (Provider Fax#)

Aetna International

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Effective date:
XX/XX/20XX

Member ID#: 123456789
Member name here
Group#: Control number and suffix here

PPO/NAP

PROVIDER SERVICES: 1-800-414-0596

Aetna Identification

Note: For verification of eligibility & benefits, please call 1-123-456-7899. (Plan Sponsor #)

Please submit claims to:

AETNA
PO BOX 30259
TAMPA, FL 33630-3547

Payor ID#: 60054

PATIENT INFO: **PATIENT SURNAME:** Smith **PATIENT FIRST NAME:** John
PATIENT DATE OF BIRTH: 13-May-1977 **PATIENT GENDER:** Male

VERIFICATION OF ELIGIBILITY: PAYMENT OF BENEFITS IS SUBJECT TO THE PATIENT'S ELIGIBILITY ON THE DATE OF ADMISSION. MEDICAL NECESSITY OF EMERGENCY TREATMENT INCLUDING PHYSICIAN, HOSPITAL AND RELATED EXPENSES. ALL ADMISSIONS, INVESTIGATIONS AND INVASIVE PROCEDURES OR SURGERY MUST BE CERTIFIED IN ADVANCE BY **Plan Sponsor** STAFF. PLEASE NOTE COVERAGE WILL BE SUBJECT TO CONTRACTUAL PROVISIONS OF THE POLICY INCLUDING PRE-EXISTING LIMITATIONS AND EXCLUSIONS.

BENEFITS:
A DEDUCTIBLE IN THE AMOUNT OF $50.00 USD.
THIS POLICY HAS CO-INSURANCE OF 0%
THIS POLICY HAS A MAXIMUM BENEFIT OF $1,000,000.00 USD.

NOTE:

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