

AFL HOTEL AND RESTAURANT WORKERS HEALTH AND WELFARE TRUST

560 N. Nimitz Highway, Suite 114B • Honolulu, Hawaii 96817-5327
Mailing Address P.O. Box 29939 • Honolulu, Hawaii 96820
Telephone (808) 275-2520 • Toll-Free Telephone (844) 808-2520
Facsimile (808) 275-2521
Claims Administrative Office

CONTINUITY OF CARE FORM

Certain medical conditions may qualify you to continue receiving care from your Provider and to be covered by AFL Hotel and Restaurant Workers Health and Welfare Trust at the same innetwork level of benefits for up to 90 days. This form is provided to you to assist you in your request for continuity of care. Complete and submit this form as soon as possible to initiate a review of your medical condition to determine if you qualify for Continuity of Care.

Examples of situations that might involve continuity of care include:

- patients who are undergoing a course of treatment for a serious or complex condition
- undergoing institutional or inpatient care
- scheduled to undergo non-elective surgery including postoperative care
- pregnant and undergoing treatment
- terminally ill and receiving services

Member Information:

Name: _____

ID#: _____

Birthday: _____

Name of treating Provider: _____

Phone # of treating Provider: _____

Please describe your circumstances and reason for request of continuity of care:

Upon completion, please mail form to:

Pacific Southwest Administrators
PO Box 29939
Honolulu, HI 96820

Or fax this form to the following:

808-275-2521

Please contact Customer Service at 808-275-2520 between 8:00am to 5:00pm HST, Monday through Friday if you have any questions.