

Pequot Health Care  
Pequot Plus Health Benefit Services  
Third Party Administration Division  
1 Annie George Drive  
PO Box 3730  
Mashantucket, CT 06338  
Phone: 888-779-6872  
Local: 860-396-6489  
Fax: 860-396-6157



## CONSENT TO RELEASE OF INFORMATION

I, \_\_\_\_\_ hereby authorize **Medicare** to release any and all information about me and my health care to:

Pequot Plus Health Benefit Services  
Attn: Manager of Administration Services  
1 Annie George Drive, Bldg. 2  
Mashantucket, CT 06338

for the purposes of reviewing my eligibility for coverage of certain health care services provided under the Plan. This release shall apply to any health care and/or medical records or documents that may be contained in my file.

This release is valid for a period of thirty (30) days from the date it is executed, as noted below. All information released pursuant to this Consent shall not be used for any purpose other than as stated above.

\_\_\_\_\_  
Social Security Number

\_\_\_\_\_  
Telephone Number

\_\_\_\_\_  
Street Address

\_\_\_\_\_  
City/State/Zip

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date