

Overseas Provider Nomination

Dear Service Benefit Plan Member,

GMMI has a comprehensive overseas network of medical providers including physicians, hospitals, outpatient facilities and other types of ancillary providers. We work to expand the network as much as possible. If you would like to nominate an overseas provider, please use this form. GMMI will contact the provider according to our network guidelines and policies.

OVERSEAS PROVIDER NOMINATION FORM

Please email this form to Fepnetwork@gmmi.com

Please fill out the fields specified below:

Name of the Provider	
Telephone Number of the Provider	
Address of the Provider	
Country	
Group Name (of Provider)	
Contact Person and Telephone Number/ Email/Address	
Provider Type (Hospital, Outpatient Facility, MD, Dentists, Other)	
Provider Specialty	
Other Information	

Nominated by (Name)	
Member ID Number	
Contact Information	
Date Nominated	