



USC BUSINESS TRAVELER

12-Jun-2024

Dear USC BUSINESS TRAVELER:

Your request for insurance coverage has been processed. Below you will find your identification card which reflects your dates of coverage: _____ through _____, and your Participant ID: 3179438 under the protection plan number: 24 GLM N04984274-BLANKET. See Attached Confirmation of Coverage for coverage specific details.

Should you require medical attention please be sure to present your identification card to the medical provider. This will ensure that the claim will be sent to us and will enable us to properly identify you as a covered participant under this insurance.

If you should have any questions, at any time, regarding your insurance please contact us at 800-303-8120. We look forward to providing the best coverage and service to you and we hope that your travel abroad experience will be both memorable and rewarding!

Sincerely,

Cultural Insurance Services International



GROUP SPONSOR: UNIVERSITY OF SOUTH CAROLINA

Your protected plan policy number is 24 GLM N04984274-BLANKET
Your participant ID is 3179438

Participant Name: _____
Coverage Dates: _____ to _____

For any questions pertaining to your insurance plan including provider referrals and eligibility verification please contact CISI at 1-800-303-8120 or email claimhelp@mycisi.com
You may submit claims to CISI One High Ridge Park Stamford, CT 06905

KEEP THIS CARD WITH YOU AT ALL TIMES

It is proof of identification as an insured under this plan. If you lose it or have questions about your insurance coverage, call CISI at 1-800-303-8120. Present this card and another form of identification to the hospital or doctor. Complete the claim form, sign and mail to CISI with originals of all medical bills.

Submit claims to: CISI, 1 High Ridge Park, Stamford CT 06905

Should an emergency arise, I authorize any medical provider to release information regarding my condition to CISI or their insurance provider/emergency assistance services, and I understand they may contact my next of kin or my nominated emergency contact without my prior consent.

Underwritten by ACE American Insurance Company & Administered by CISI.

For emergencies only
Call AXA ASSISTANCE at (855) 327-1411 (in U.S.), +001 (312) 935-1703 (call collect from outside the U.S.), Email: MEDASSIST-USA@AXA-ASSISTANCE.US
Your Assist ID # is 23 GLM N04984274-BLANKET.