



## Claim Submission Instructions

1. Insured participants are required to submit a completed medical claim form to CISI for each accident or sickness. Claim forms may be downloaded from our website, **[www.cisi-bolduc.com](http://www.cisi-bolduc.com)**, by going to the Medical Benefit Info tab and selecting "Medical Claim Form." Be sure that all questions are answered and all blank spaces are filled with an appropriate statement such as "Not Applicable." Claim forms can be mailed or faxed to CISI at the contact address or number below:

### Send All Completed Medical or Personal Liability Claim Forms To:

Cultural Insurance Services International  
River Plaza  
9 West Broad Street  
Stamford, CT 06902

If you have questions regarding benefits, or claim submission, contact  
CulturalInsurance Services International  
Telephone: (800) 303-8120  
Outside USA: (203) 399-5130  
Fax: (203) 399-5596  
Email: [cisiwebadmin@culturalinsurance.com](mailto:cisiwebadmin@culturalinsurance.com)

2. Please contact Team Assist 24-7-365 at the numbers below for pre-departure, medical, legal, and travel assistance, and to help facilitate billing directly with a foreign provider.

**Telephone:** (877)-577-9504  
**Outside USA**(Call Collect): (240) 330-1520  
**Email:** [ops@europassistance-usa.com](mailto:ops@europassistance-usa.com)

Underwritten by ACE American Insurance Company.

It is understood and agreed that all coverage's under the Policy and any replacement Policy are subject to a combined lifetime maximum payment of \$500,000 under both PLAN A and PLAN B.

### **Team Assist:**

One of the most important features of this plan is a worldwide assistance program. Upon enrollment in the Plan, you are eligible to use any of the assistance services that make up this comprehensive program. An outline of the assistance services appears below; additional information is contained in the Summary of Benefits.

### **Pre-Departure Assistance:**

- Advice on required and recommended immunizations.
- Passport and visa information.

- Health information and precautions for medically remote or underserved areas.
- Information for handicapped or disabled travelers.
- Help in arranging special medical services needed while traveling.

**Telephone:** (877)-577-9504

**Outside USA**(Call Collect): (240) 330-1520

**Email:** [ops@europassistance-usa.com](mailto:ops@europassistance-usa.com)

### **Medical Assistance**

- Worldwide, 24-hour medical care locating service.
- Medical case monitoring, arranging communication between patient, family, physicians, consulate, etc.
- Medical transportation arrangements.
- Emergency message service for medical situations.

### **Legal Assistance**

- Worldwide, 24-hour contact for legal emergencies.
- Legal referral, to help you locate a consular official or attorney.

### **Travel Assistance**

- Worldwide, 24-hour telephone contact for advice on handling losses and delays.
- Help with lost passports, tickets and documents.
- Advice on filing insurance claims.
- Arranging shipments of forgotten, lost or stolen items.
- Relaying emergency messages.

### **Claim Procedures:**

If any covered loss occurs or begins, the Insured must send us written notice within 30 days or as soon after that as is reasonably possible. This notice should include written proof of the occurrence, type and amount of loss, and should state the Insured's name and policy number. This notice should be sent to the address shown on Page 1 of this booklet. Claim forms must be sent to the Cultural Insurance Services International no more than 90 days after a covered loss occurs or ends, or as soon after that as is reasonably possible.

### **Payment Of Claims: When Paid**

Claims will be processed as soon as due proof of loss is received. If a claim covers benefits for more than a month, all amounts due at the end of each month will be paid. If there are any benefits due at the end of the period claimed, they will be paid when due proof of loss is received.

### **Payment Of Claims To Whom Paid**

Death benefits, if any, will be paid to the beneficiary chosen by the Insured. This choice must be in writing and filed with us. If the Insured has not chosen a beneficiary, or if there is no beneficiary alive when the Insured dies, we will pay:

- (a) Parents or legal guardian, if the Insured is a minor.
- (b) Otherwise, we will pay the Insured's estate.

If the Insured is a minor; or is unable to give a valid release because of incompetence, any amount due will be paid to a parent, guardian, or other person actually supporting him or her. Any payment made in good faith will end our liability to the extent of the payment.

Any other benefits will be paid to the Insured, if he is living. If not, we will pay the estate of the Insured. All claims for medical expense benefits submitted for payment by an Insured will be paid directly to the provider of medical services.

If an Insured has already paid a provider for medical services, a written request must be submitted to Cultural Insurance Services International, accompanied by a copy of the paid bill and a completed claim form indicating that payment should be made to the Insured or the individual or organization who paid the bill. Change of Beneficiary - The Insured has the right to select or change the beneficiary without the beneficiary's consent. Any such selection or change must be in writing. We will not be bound until we have received a signed copy of it. We are not responsible for its validity or sufficiency. If the Insured is a minor, his or her parent or guardian may exercise this right for him or her.