

GROUP NUMBER:

MEMBER ID:

INSURED NAME:

DATE OF BIRTH:

EFFECTIVE DATE:

TERMINATION DATE:

DEDUCTIBLE - \$

PRESCRIPTIONS - PAY and CLAIM

Contact Information:

Benefits/Eligibility/Claim Status 866-669-9004 Direct 251-928-0939

24 HOUR EMERGENCY ASSISTANCE/EVACUATION

On Call International TOLL-FREE 888-699-1401 Direct 603-952-2075

This card does not guarantee coverage.

All claims with itemized bills including diagnosis, should be mailed to:
Co-Ordinated Benefit Plans, LLC on behalf of Crum and Forster, SPC
PO Box 2069
Fairhope, AL 36533

Insured by Crum and Forster, SPC

AH- 2893

Confirmation of Coverage for Safe Travels International

Today's Date:

To whom it may concern:

We are pleased to confirm international travel medical coverage under the Safe Travels Plans, provided by Crum and Forster, SPC and administered by Trawick International.

Covered Person:	Policy Number: CRIN-12345-12B
Passport:	Certificate Number:
Home Country:	Effective Date:
Destination:	Termination Date:

This coverage is valid worldwide including the destination country listed below as well as all other countries except the USA.

Plan Benefits

*All Currency USD

Deductible:	\$
Medical and Hospitalization Maximum:	\$
Trip Delay:	\$2,000 (including accommodations/lodging)
Emergency Medical Evacuation:	Covered - see certificate for details
Repatriation of Remains:	Covered - see certificate for details
Pre-Existing Conditions:	Covered for Unexpected Recurrence Onset (some limitations apply)

Covid 19: Covered same as any other illness to the above mentioned Medical Maximum

Other limitations and exclusions do apply. Please see policy documents for details or contact us or your agent at the number below for any questions. This document does not contain information for claim filing. Please see your ID card or certificate for information.

Sincerely,



Jane Pennington

Agent Information

AH-2894