

PPO Networks



TOKIOMARINE
HCC



Your insurance plan will participate in United Healthcare PPO under the following circumstances:

- Your home country or citizenship is not European Union and
 - your initial purchase of Atlas Series, ExchangeGuard, StudentSecure products is on or after July 1, 2019.
 - your initial purchase of Visit USA, Intermedical, WorldMed or Study USA products is on or after August 28, 2019.
- Your home country or citizenship is European Union and
 - your initial purchase of Atlas Series, ExchangeGuard, StudentSecure products is on or after April 1, 2020.



Your insurance plan will participate in First Health PPO under the following circumstances:

- Your home country or citizenship is not European Union and
 - your initial purchase of Atlas Series, ExchangeGuard, StudentSecure products is prior to July 1, 2019.
 - your initial purchase of Visit USA, Intermedical, WorldMed or Study USA products is prior to August 28, 2019.
- Your home country or citizenship is European Union and
 - your initial purchase of Atlas Series, ExchangeGuard, StudentSecure products is prior to April 1, 2020.
 - you purchased Visit USA, Intermedical, WorldMed or Study USA product.



Member

Member Name:

Ville Verde

TMHCC-MIS Certificate #:

123456789

Effective Date:

September 24, 2020

Insurance

Payer ID:

USN01

Health Plan (80840):

911-87601

Group Name:

Tokio Marine

UnitedHealthcare Group Number

76-570000

UnitedHealthcare Member ID:

603100012345

Plan Name:

UnitedHealthcare Options PPO

Provider Claim Submission

Provider UnitedHealthcare Member ID: **603100012345**

- All claims must be submitted with the 12 digit UnitedHealthcare Member ID
- For member benefit and eligibility verification, call 844-251-0747
- Submit claims electronically using **PAYER ID USN01**
- Or submit via mail:
UnitedHealthCare Global, PO Box 30526, Salt Lake City, UT 84130-0526

Member Claim Submission

Member TMHCC-MIS Certificate #: **100012345**

- Claimant statement and authorization forms may be completed online at <https://zone.hccmis.com/clientzone>
- Printable claimant statement and authorization forms are available at <https://service.hccmis.com>
- For additional information call: 800-605-2282 or 317-262-2132
- US provider network search: <https://us1.welcometouhc.com>
- Non-US provider network search:
<https://www.hccmis.com/find-a-doctor>



POSSESSION OF THE CARD DOES NOT GUARANTEE COVERAGE

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TOKIOMARINE
HCC

Medical Insurance Services Group

Primary Insured: Connie Liu

Effective Date: May 21, 2019
Certificate Number: A90000000

POSSESSION OF THE CARD DOES NOT GUARANTEE COVERAGE



Filing a Claim

- Obtain a Claimant's Statement & authorization form by visiting hccmis.com or by calling 800-605-2282 or 317-262-2132
- Complete the Claimant's Statement & Authorization Form; attach original, itemized bills; and forward to HCC Medical Insurance Services. Be sure to fully complete your Claimant's Statement & Authorization Form and sign it.
- If you have already paid certain expenses, attach copies of payment receipts. In many cases, payment will be made directly to the hospital/physician that treated you.

Remember, you are responsible for the deductible, coinsurance and any ineligible charges.

For general questions regarding eligibility / benefits / claims please call **800-605-2282** or **317-262-2132** *Access worldwide toll-free numbers online at <http://hccmis.com/tollfree>

Mail your Claimant's Statement & Authorization Form and itemized bills including diagnosis to:

Electronic Payer ID: HCCMI
Tokio Marine HCC MIS Group Claims Department
Box No. 2005
Farmington Hills, MI 48333-2005
United States



First Health Group Corp. a wholly owned subsidiary of Aetna



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SAMPLE ONLY

INSURANCE



08/26/2020

CONFIRMATION OF COVERAGE

We are pleased to confirm short term medical coverage under the Atlas Series, insured by Lloyd's Syndicate 4141 and administered by Tokio Marine HCC – MIS Group, a member of the Tokio Marine HCC group of companies. Tokio Marine HCC – MIS Group has authority to enter into contracts of insurance on behalf of the Lloyd's underwriting members of Lloyd's Syndicate 4141, which is managed by HCC Underwriting Agency Ltd. Lloyd's is authorized as an insurer in Spain by the Spanish insurance regulatory authority (Dirección General de Seguros y Fondos de Pensiones) under reference L0017. This plan will make direct payment to providers when the plan administrator is contacted and submitted charges are approved.

This coverage is valid worldwide, including the Destination Country(ies) listed below, except for the member's Home Country and countries restricted by U.S. economic sanctions and embargo programs. **Atlas Travel satisfies Schengen Visa health insurance requirements.**

Effective Date: 08/28/2020

Home Country: United States

Destination Country(ies): Turks and Caicos Islands

Name	Certificate	Termination Date	Passport	Citizenship
Jacob Langer	120012345	09/07/2020	A123456	United States

Atlas Premium		
Overall Policy Maximum	\$250,000 (€211,550*)	Two Hundred Fifty Thousand US Dollars
Maximum per Injury/Illness	Overall Maximum Limit	
Deductible	\$250 (€212*)	Two Hundred Fifty US Dollars
Medical Expenses (including hospitalization) (includes COVID-19)	Overall Maximum Limit	
Emergency Medical Evacuation & Repatriation	\$1,000,000 (€846,200*)	One Million US Dollars
Emergency Reunion	\$150,000 (€126,930*)	One Hundred Fifty Thousand US Dollars
Repatriation of Remains	Overall Maximum Limit	
Trip Interruption	\$15,000 (€12,693*)	Fifteen Thousand US Dollars
Personal Liability	\$100,000 (€84,620*)	One Hundred Thousand US Dollars
Emergency Dental (Accident)	Overall Maximum Limit	
Emergency Dental - Acute Onset of Pain	\$300 (€254*)	Three Hundred US Dollars
Paid in full by	American Express	

This coverage is extendable up to the maximum certificate duration. Please see policy documents for further details, or feel free to contact us with any questions or concerns.

COVID 19: Covered same as any other illness to the above mentioned medical maximum.

Sincerely,

Mark Carney

Tokio Marine HCC - Medical Insurance Services Group

Plan Administrator for Lloyd's, Fitzwilliam House, 10 St. Mary Axe, London, England EC3A 8BF

* Plan pays in US Dollars only. Amounts in Euros are provided for convenience and are based on conversion rate as of August 26, 2020