



## **SUBMITTING AN MEDICAL and TRIP CANCELLATION /INTERUPPTION/DELAY CLAIM TO ACE NORTH AMERICAN CLAIM**

The first step in reporting an accidental death, dismemberment, medical, personal effects, trip cancellation/interruption/delay or baggage claim is to contact ACE North American Claims at 1-800-336-0627. Our telephones are answered between the hours of 8:00 am and 4:30 pm Eastern Standard Time Monday – Friday. For calls after this time, please leave a message at 302-476-6194 and someone will return your call the next business day. The contact person is Ms. Diane Basa.

Once you have received the claim form it must be completely filled out and remitted back to ACE North American Claims. In addition to the claim form, there will be specific information that is required which is outlined below:

**Medical Claims:** In addition to the completed claim form, the following items should be remitted:

- (1) An itemized bill for the treating physician
- (2) Prescription – receipt showing the claimant’s name and the cost of the medication

**Trip Cancellation/Interruption/Delay:** In addition to the completed claim form, the following items should be remitted:

1. Attending Physicians statement complete by a physician
2. The amount of the non-refundable amounts paid for the trip
  - a. any cancellation charges imposed by a travel agency, tour operator, or other recognized travel supplier for the Covered Trip;
  - b. any prepaid, unused, non-refundable airfare and sea or land accommodations
  - c. any other reasonable additional Trip expenses for travel, lodging, or scheduled events that are prepaid, unused, and non-refundable
3. The cost of a one-way economy air and/or ground transportation ticket

Once this information is complete please email and scan, fax or mail along with the completed claim form to:

**ACE American Insurance Company  
Accident & Health Claims  
P.O. Box 5124  
Scranton, PA 18505  
Fax: 302-476-7857  
ACEAandHClaims@acegroup.com**

[Diane.Basa@acegroup.com](mailto:Diane.Basa@acegroup.com)