


**GRADUATE INSTITUTE OF APPLIED LINGUISTICS  
2009-2010 INTERNATIONAL STUDENT INSURANCE PLAN  
IDENTIFICATION CARD**

This is your Student Health Insurance Identification Card.  
Cut it out and keep it with you at all times.  
This card can be used to verify your coverage (and coverage for dependents, if applicable).

**ID CARD**

 cut out along dashed line

*To send claims by mail or verify eligibility and benefits:  
PERSONAL INSURANCE ADMINISTRATORS  
P.O. BOX 6040  
AGOURA HILLS, CA 91376-6040  
(800) 468-4343  
www.piacclaims.com*

*Providers may submit claims electronically:  
PAYER ID 95397*

Both the effective and termination dates of coverage are subject to verification by the company.  
Benefits are subject to payment of appropriate premium and verification of eligibility.  
Notice to Members and Providers:

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**Student:**

Underwritten by: UNITED STATES FIRE INSURANCE COMPANY  
by Fairmont Specialty, a Division of Crum & Forster

Policy Number: US002598

PPO Network: BEECH STREET  
to find PPO Providers,  
visit [www.beechstreet.com](http://www.beechstreet.com)  
or call 1-800-877-1444

MEDEX: Program #995, 1-800-527-0218



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