## A YX]W/ '9I dYbgY '7`U]a : cfa '

While on my trip, I had expenses for medically necessary treatment due to an injury or sickness.

ChYd %a Dfcj ]XY 8cWa YbhJh]cb (provide all) Dfcj ]XY h Y Zc``ck ]b[ fYei ]fYX XcWa YbhJh]cb.

Provide copies or photos of your itinerary and paid invoice.

Provide copies or photos of itemized bills or similar documentation from your healthcare providers.

ChYd &! Gi Va ]h:5```DU[ YgcZh\]g7`U]a : cfa 7ca dYhYX WUJa Zcfa UbX XcWa YbhUh]cb Wb YY

gi Va ]hhYX`VmY]h\Yf. GWb#I d`cUX. A YX]Wv '9 dYbgY '7 'U]a : cfa '

BchY-Benefits under any coverage will not be paid for expens reimbursed or services provided by any other source. Bene

## 7`U]a : cfa : fUi X`FYei ]fYa Ybhg A UbXUhcfma'D`YUgY fYUX`UbX`g][ b`VY`ck "