

Confirmation of Insurance



Policy Holder Ivan Solano Carrera

Date of birth: 06 May 1997

Member ID: 2360203874

Group ID: 697401

Effective Date: 01 Jun 2023

Termination Date: 05 Oct 2023

The health insurance has, within the framework of the tariff and insurance conditions, an upper limit for the reimbursement:

Maximum Benefit: \$100,000

Emergency Evacuation: \$75,000

Repatriation: \$30,000

Emergency Reunion: \$15,000

Urgent Travel Expense: \$2,000

Copays: \$20 Urgent Care Copay | \$50 Doctor/Specialist Copay | \$100 ER/Hospital Copay

Liability Limits: \$100,000

The insurance coverage expires on the termination date listed above, or when the participant withdraws from the program, or when they are dismissed from the program, or their employment is terminated, whichever comes first.

PROGRAM INFORMATION

DS Number N0033988553

CIEE ID 2360203874

Program Code WAT

CIEE Partner Code MX/SEG

Insurance and Program Start Date 01 Jun 2023

You may not enter the US prior to this date. Insurance coverage starts on this date.

Legal Employment Start Date 06 Jun 2023

Date listed on DS-2019 as "Begin date" of program. You may not start working prior to this date.

SEVIS Compliance Deadline 26 Jun 2023

You must notify CIEE of your address in the US by this date or CIEE will terminate your program and you will be required to return home.

Legal Employment End Date 05 Sep 2023

Date listed on DS-2019 as "End date" of program. You may not continue working after this date.

Insurance and Program End Date 05 Oct 2023

You must leave the US by your departure date. Insurance coverage ends on this date.

This is an important document. Please read it thoroughly. You are insured under the group policy of CIEE for the period of time stated on this document. For complete terms of coverage please refer to the CIEE website at www.ciee.org/insurance. If you have a specific question please call CIEE at 1-888-268-6245.

CLAIMS TO BE MADE TO:

Aetna Student Health
PO Box 981106
EL Paso, TX 79998

OFFERED BY:

CIEE
600 Southborough Drive
Suite 104
South Portland, ME 04106 USA
888.268.6245
www.ciee.org

aetna

Open Choice PPO

Group No CIEE-697401

First Name

Ivan

Last Name

Solano Carrera

Member ID 2360203874



To precertify, prenotify, verify eligibility and/or benefits, please contact CIEE at:

1-888-268-6245
insurance@ciee.org
www.ciee.org/insurance
EDI Payor ID: 60054-0315

Mail all claims to:

Aetna Student Health
P.O. Box 981106
EL Paso, TX 79998

\$20 Urgent Care Copay
\$50 Doctor/Specialist Copay
\$100 ER/Hospital Copay

Aetna is the third party claims administrator and provides the network of participating providers. Aetna does not insure this plan.

Exchange visitors and any accompanying spouse and dependent(s), may be subject to the requirements of the Affordable Care Act.