



To report a claim:

Return the required documentation detailed below, along with your original, signed claim form to:

Travelers Claims Department
4600 Witmer Industrial Estates, Suite 6
Niagara Falls, NY 14305

Trip Cancellation/Interruption Claims – Medical

Trip Cancellation/Interruption – Medical Claim Form

The entire claim form should be completed, signed and dated by the insured submitting a claim for reimbursement. Incomplete forms will be returned to the insured for completion which may result in a delay of the claim processing.

Cancellation Terms and Conditions:

- Brochure** A copy of the Tour Operator’s cancellation terms and conditions explaining what happens in the event you have to cancel your trip, including cancellation penalties.
- Refund check or credit** A copy of any amount refunded to you for your cancelled trip from any source.
- Original airline tickets if non-refundable** We require the original airline tickets if they are non-refundable. If you were issued e-tickets, we need the e-ticket passenger receipt. If you booked the flight over the Internet, we need the printed ticket confirmation sheet with your ticket numbers.
- Original hotel or cruise vouchers if non-refundable** We require any original vouchers you receive that are non-refundable through any other sources.

Proof of Trip Payment:

- Receipts** Send a credit card statement, cancelled check or cash receipt for each and every payment you made on this trip. If you do not have documentation, contact your travel agent for an invoice that shows the dates and amount of all payments made.
- Trip invoice** A copy of the trip invoice showing a breakdown of the total trip costs (e.g. airfare, cruise/land costs, taxes, etc.).

Receipts for Additional Expenses:

- Hotel, food, transportation** Original receipts and a list of out-of-pocket expenses incurred showing all amounts paid, what the payments were for, and the dates of the payments. Including copies of tickets/e-tickets, along with proof of payment, for the additional cost to continue on the covered trip or return home.

Proof of the Reason for the Claim:

- Doctor’s statement** The doctor’s statement (i.e. the Attending Physician’s Statement section of your claim form) must include the specific diagnosis, date of diagnosis, date of treatment and date of advisement of cancellation.

**Medical
authorization form**

The "Patient Consent to Disclose Health Information" form is included in the packet we send you. We require the sick/injured party's signature to allow us to contact the doctor if we need any additional information to process your claim. If this form is not signed, we then need to contact the insured to get the information from the doctor and submit it to us, which could delay the processing of your claim.

Death certificate

A copy of the death certificate in the event of a death. In some circumstances, we may require additional information which we will request from the appropriate source.