



Letter & ID Card

**Maine College of Art & Design– Participant Accident  
Group # ST1507AC**

**IMPORTANT INFORMATION - READ CAREFULLY**  
**Know Your Benefits and Exclusions**

Dear Participant,

You are enrolled in the **Maine College of Art & Design** Participant Accident Plan.  
Please use this information when seeking medical care.

1. This Participant Accident Insurance card is NOT to be used as your comprehensive health plan. This Insurance is only used for accidents that occur while on school grounds, participating in a scheduled, sponsored, and approved activity for your College.
2. This Participant Accident Insurance Plan is an Excess Plan and will require and Explanation of Benefits (EOB) from the student's primary insurance before the claim is processed.
3. The following must be received to process a claim:
  - a. Completed Injury Claim form with accident details.
  - b. Primary Insurance EOB (s).
  - c. Itemized bills submitted by the provider of service to the address shown on the ID card below.



**WELLFLEET**  
STUDENT

Group: ST1507AC  
Policy #: W12223MEACC05  
Group Name: Maine College of Art

Participant Name: \_\_\_\_\_

Student ID#: \_\_\_\_\_

**THIS IS AN EXCESS POLICY**

The following must be received to process a claim:

1. Accident details
2. Provider itemized bill and primary insurance EOB
3. Prescriptions – member submit.

**Mandatory Accident Insurance  
INSTRUCTIONS FOR FILING  
CLAIMS**

**Mail claims to:**

Wellfleet Insurance Co.  
PO Box 15369  
Springfield, MA 01115  
EDI Payer ID#: 87843

Eligibility/Claims: 877-657-5039  
Customer Service: 877-657-5039

Possession of card does not  
guarantee coverage.