

2024-25

## Student-Athlete Insurance Network (SAIN)

**San Bernardino Community College District** has an excess student accident insurance policy if a student is injured and requires medical attention. The student and the designated college official must complete and sign an injury claim form before submitting it to Student Insurance. Once a claim form is received, the student will be assigned a designated claim number (N#), which will be used to file the claim with the Anthem Blue Cross (SAIN) Program.

Claim & HIPAA forms and other resources can be located at the designated Student Insurance website:

### [San Bernardino CCD - Student Insurance](#)

*This card is for identification purposes only and does not guarantee benefits.*

**Student-Athlete Insurance Network (SAIN)**

Excess Coverage

**San Bernardino Community College District**

**Policy #** 1850VH (Valley College) / 1850VG (Crafton College)

**Group #** SAIN

*No Deductible*

**Policy effective date:** 8/1/2024

Benefits Effective 52 weeks from the date of injury

Treatment must be initiated within 120 days of the injury date

**Coverage Limit per claim:**

- \$25,000 per Athletic Injury
- \$50,000 per Student (non-athletic) Injury

*This card is for identification purposes only and does not guarantee benefits.*

**SAIN Provider Verification:** 866-811-7946

**Reference:** SAIN Program

**Claims Submissions (Medical Providers):**

**Anthem Blue Cross**

Student Health Claims Department

Attn: Claims Manager

21215 Burbank Blvd Woodland Hills, CA 91367

**Priority Fax:** 855-396-8418

Fax or USPS Mail Claim form with all bills (HCFA1500, UB-04, and Primary EOBs)

**\*\*\* Electronic Billing is not available under Anthem's SAIN Program\*\*\***

