2024-25
Student-Athlete Insurance Network (SAIN)

San Diego 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 Diego Community College District

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

SAN DIEGO CITY COLLEGE

Student-Athlete Insurance Network (SAIN)
Excess Coverage

San Diego City College
Policy # 1850VR

Group # S.A.I.N

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: S.A.I.N 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***

Anthem ⊕

2024-25

Student-Athlete Insurance Network (SAIN)

San Diego 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 Diego Community College District

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SAN DIEGO MESA COLLEGE

Student-Athlete Insurance Network (SAIN)
Excess Coverage

San Diego Mesa College
Policy # 1850VS

Group # S.A.I.N

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: S.A.I.N 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***

Anthem ✚

2024-25

Student-Athlete Insurance Network (SAIN)

San Diego 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 Diego Community College District

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

Student-Athlete Insurance Network (SAIN)

Excess Coverage

San Diego College of Continuing Education
Policy # 1850VU

Group # S.A.I.N

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: S.A.I.N 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*** *

2024-25
Student-Athlete Insurance Network (SAIN)

San Diego 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 Diego Community College District

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

SAN DIEGO MIRAMAR COLLEGE

Student-Athlete Insurance Network (SAIN)
Excess Coverage

San Diego Miramar College
Policy # 1850VT

Group # S.A.I.N

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: S.A.I.N 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***

Anthem ⊕