



Medicare Supplement Business Contacts

Sales Support

1-855-278-9329

Underwriting

1-855-278-9329

Compensation Support

1-855-278-9329

Policy Owner Customer Service

1-855-278-9329

Claims Customer Service

1-855-278-9329

Claims Address

Combined Insurance Company of America
PO Box 981625
El Paso, TX 79998-1625

Supplies

E-mail supply order form to:

combinedsupplies@aiasvcs.com

Fax (866) 545-6036

Submit Applications

Normal Delivery:

Combined Insurance Company of America
PO Box 14207
Clearwater, FL 33766-4207

Overnight Delivery:

Combined Insurance Company of America
2650 McCormick Drive, Suite 200T
Clearwater, FL 33759

Initial Premium Paid through Automated Clearing House (ACH)

Fax 1-866-545-8076

When Clients electronically pay the first premium through ACH, you may fax Medicare Supplement required forms (found in application packet) with the application. This fax is for applications with ACH only; all other applications must be mailed with the first full modal premium included.