

August 27, 2025

733



Pratiksha Gunwant Wadibhasme  
1216 E Vista del Cerro Dr Apt 2054N  
Tempe, AZ 85281

**Thank you for being a UnitedHealthcare Student Resources member.**

**We're glad you're here.**

This is your UnitedHealthcare health plan ID card. It has information about you and your coverage so you'll want to take it with you wherever you go.

Please be sure all the information on your ID card is correct. Call us using the toll-free member number on your ID card if any information is not correct or you need assistance. You can start using your ID card on your effective date.

**To get the most of out of your plan, follow these steps:**

**1. Get access on the go.**

Create your My Account at [www.uhcsr.com/myaccount](http://www.uhcsr.com/myaccount). Our mobile friendly website will help you:

- Find and estimate the cost of the care you need.
- See what's covered and get information about any additional benefits available to you.
- View claim details and account balances and much more.

**2. Check out our videos page.**



[www.UHCSR.com/video](http://www.UHCSR.com/video) has many informative videos on how to access and utilize key elements in your My Account, as well as a large library of mental health videos provided by Psych Hub.

**3. Know your network.**

With almost every plan, you'll pay less if you choose doctors, clinics and hospitals in your network. Search for network providers on [www.uhcsr.com](http://www.uhcsr.com) or the UHCSR mobile app.

STD (4/25)

*Attached is your new UnitedHealthcare ID card. The ID card contains important phone numbers and claim filing instructions.*

		2025-26 Academic Year
Insured: Pratiksha Gunwant Wadibhasme SR ID #: 9385313      Policy # (80840): 2025-733-1 Plan Name: Arizona State University		
Members: Customer Service <b>1-866-652-9185</b>	Providers: Customer Service <b>1-888-224-4875</b>	
RX Deductible: \$125 DED IND/FAM INN: \$250/ OON: \$1000/	OOPM IND/FAM INN: \$1500/ OON: \$3000/	<b>Optum Rx<sup>®</sup></b> Rx Bin: 610279 Rx PCN: 9999 Rx Group: UHCSTRC01
 UnitedHealthcare Choice Plus		
ID1:25S	Underwritten by UnitedHealthcare Insurance Company	

<p align="center"><b>CLAIMS INSTRUCTIONS</b></p> <p>Submit claims to the company within 90 days or as required by state law after the date of service. Mail all medical bills along with the insured student's name, patient's name, SR ID number, address, and plan name to the address listed below.</p> <p>Send claims to:                  Student Resources                  P.O. Box 809025                  Dallas, TX 75380-9025                  EDI Payer ID: 74227  <a href="http://www.UHCprovider.com">www.UHCprovider.com</a> </p> <p>For emergencies while traveling call:                  UnitedHealthcare Global                  1-877-461-2273 (Toll-free) or 1-410-453-6330                  or email: <a href="mailto:help@assistance.uhcglobal.com">help@assistance.uhcglobal.com</a>                  ID#: 355751             </p> <p>For Hospital pre-admission notification call UnitedHealthcare at 1-877-295-0720.</p> <p align="center"><b>NOTICE TO ALL HEALTHCARE PROVIDERS</b></p> <p>This card is not a guarantee of coverage. For information concerning coverage, co-payment and claims instructions, please call Customer Service at the number listed on the front of this card.</p> <p>25-ID1      <a href="http://www.uhcsr.com">www.uhcsr.com</a></p>
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