



Student Resources
1311 W. President George Bush Hwy
Richardson, TX 75080

CONFIRMATION OF COVERAGE

Please consider this a confirmation of coverage as of today.

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| Date: | December 07, 2024 |
| Name of Insurance Company: | UnitedHealthcare Insurance Company of New York |
| Name of the Policyholder: | Stony Brook University - Int'l Student and Scholar |
| Policy number: | 2024-203426-41 |
| Name of insured student: | Omkar Rajwade |
| Identification number of insured student: SRID # | 9133506 |
| Type of Coverage purchased: | Student Plan - Injury & Sickness |

Name and address of plan administrator or issuer responsible for providing confirmation:

UnitedHealthcare Student Resources
P.O. Box 809025
Dallas, TX 75380-9025

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| For further information please call: | 1 (888) 714-6544 |
| Date coverage began: | August 15, 2024 |
| Based on information available as of today, coverage ends: | January 14, 2025 |
| Representative providing this information: | Steven Monson |

Please understand that each of our plans has specific exclusions, limitations and qualifications.
This is in response to a request for confirmation of coverage, not a guarantee of payment.
Determinations for payment of claims will be made upon actual receipt of the claim for services rendered. The written terms of the policy will prevail.

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