

Thank You For Your Purchase!

Correspondence Address:

Shreyoshi Chakraborti

51 Piedmont Dr, Apt 73B Port
Jefferson St, NY-11776

An ID card and Summary of Benefits are included with your purchase. We recommend you print and/or save them to your phone and keep them with you at all times when you travel. Should you have any questions about your policy, services provided or need to make policy changes, please feel free to contact our Customer Service team using the contact information shown below, or on your ID Card.

Thank you for allowing us to be of service to you!
Seven Corners, Inc.

PRE-EXISTING CONDITIONS

This insurance policy excludes medical coverage for Pre-Existing Conditions, except as provided for under the Acute Onset of Pre-Existing Conditions benefit.

Pre-Existing Condition(s): Any Injury or Illness, including Mental Illness or Mental or Nervous Disorder, which meet one or more of the following criteria prior to Your Effective Date of Coverage:

- You were diagnosed;
- You received Treatment;
- Treatment was recommended to You;
- There is reasonable medical certainty that the Injury or Illness existed within the last twelve (12) months, whether or not previously manifested, symptomatic, known, diagnosed, treated, or disclosed.

This includes any chronic, subsequent, or recurring complications of an Injury or Illness which meets the above criteria.

Wallet ID Card



 SEVEN CORNERS TRAVEL INSURANCE	
UnitedHealthcare Member ID: 684029758001	UnitedHealthcare Group Number: 76570100
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Member: Shreyoshi Chakraborti Policy Coverage Dates: 4/25/2024 - 4/28/2024 Options PPO Network	Seven Corners Certificate #: 2TMBL23-118221 Policy Name: Seven Corners Travel Medical Basic

This card does not guarantee coverage.

FOR MEMBERS

Urgent Medical Assistance: 24/7 (option 1)
Customer Service: M-F, 8am-9pm ET (option 3)

1-800-335-0611 Toll free
317-575-2852 Worldwide
317-818-2809 Collect
customerservice@sevencorners.com

Find a Provider
sevencorners.com/find-a-doctor

Access Your Account
sevencorners.com/login

Pre-Certification Requirements: This plan requires pre-certification for certain types of medical care in the U.S. Refer to your plan documents or call the number above for instructions. Failure to pre-certify may result in a reduction of benefits.

FOR PROVIDERS


Verify Benefits in the USA
1-855-263-0524 Toll free

Medical Claim Address:
UHC Global
PO Box 30326
Salt Lake City UT 84130-0526

Electronic Payor ID: USN01

Verify Benefits Outside the USA
sevencorners.com/providers



Underwritten By: Lloyd's of London- Amlin (BVI)		Summary of Benefits	
Seven Corners Travel Medical Basic			
Certificate Number	2TMBL23-118221	Policy Number	LON23-230501-01TM
Original Purchase Date	Mar 25, 2024	Destination	ITALY
Coverage Start Date	May 03, 2024	Coverage End Date	May 11, 2024
AD&D Beneficiary		Coverage Days	9
AD&D Relationship			
Insured Information			
Name		Date of Birth	
Shreyoshi Chakraborti		12/18/1994	
Highlight Coverage Details			
Accidental Death and Dismemberment (AD&D)	Up to age 18: \$2,500; Age 19 and over: \$10,000	Adventure Activities	Declined
Deductible	\$0.00	Emergency Medical Evacuation & Repatriation	\$250,000 (separate from the Medical Maximum)
Emergency Medical Reunion	\$200 per day, 10-day limit, to a maximum of \$25,000	Local Ambulance	Up to Medical Maximum
Loss of Checked Baggage	\$50 per article; \$250 per occurrence	Medical Maximum	\$100,000.00
Relationship	Primary	Return of Mortal Remains	\$25,000
Questions About Your Coverage & Benefits		For Immediate Assistance	
<p>SEVEN CORNERS CUSTOMER SERVICE Monday – Friday 8:00 a.m. – 9:00 p.m. ET (option 3)</p> <ul style="list-style-type: none"> • Toll Free: 800-335-0611 • Worldwide: 317-575-2652 • Collect: 317-818-2809 		<p>Pre-certification is required for certain types of medical care in the United States. Refer to your plan documents or call the number below for instructions.</p> <p>Pre-certification does not guarantee benefits, and failure to pre-certify may result in a reduction of benefits.</p> <p>SEVEN CORNERS ASSIST Available 24/7 (option 1)</p> <ul style="list-style-type: none"> • Toll Free: 800-335-0611 • Worldwide: 317-575-2652 • Collect: 317-818-2809 	
Agent Information			
Seven Corners, Inc. 303 Congressional Blvd. Carmel, IN 46032		Phone: 800-335-0611 Toll Free: 800-335-0611 Fax: 317-575-2659	Email: customerservice@sevendcorners.com Web: https://www.sevendcorners.com To Renew: https://renewal.sevendcorners.com
Please Contact Your Agent for Further Information & Purchases			
Claim Submission			
<p>Claims May Be Submitted to: Seven Corners, Inc. P.O. Box 211760 Eagan, MN 55121 Email: claims@sevendcorners.com Online: www.sevendcorners.com/claims Fax: 317-575-2256</p>		<p>To obtain a list of U.S. providers, contact Seven Corners Assist or visit www.sevendcorners.com/find-a-doctor</p> <p></p>	