



University of Pittsburgh - Student Insurance - Benefits Statement

Student Name : Ruochi Zhang	Company Name : University Of Pittsburgh
Student ID : 1091031	Web Address :
Address : 356 S Pacific Ave Pittsburgh, Pennsylvania 15224	Address : Craig Hall Pittsburgh, Pennsylvania 15213
Work Phone : (141) 269-2157	Work Phone : (888) 499-6885
Confirmation Id : 203866 - 08/27/2019	

Benefit Statement Details

Mandatory Insurance Attestation I am already enrolled in comparable Health Plan coverage outside of the University.

Coverage Level: I am already enrolled in comparable Health Plan coverage outside of the University.

Your Contribution: \$0.00 Monthly

Carrier Contact Info: Univ. of Pittsburgh <http://www.pitt.edu>

Carrier Name: Univ. of Pittsburgh

Effective Date: 09/01/2019

Medical Decline/cancel existing coverage

Coverage Level: Decline/cancel existing coverage

Your Contribution: \$0.00 Monthly

Carrier Contact Info: UPMC Health Plan <http://www.upmchealthplan.com>

Carrier Name: UPMC Health Plan

Effective Date: 09/01/2019

Dental Decline/cancel existing coverage

Coverage Level: Decline/cancel existing coverage

Your Contribution: \$0.00 Monthly

Carrier Contact Info: United Concordia <http://www.ucci.com>

Carrier Name: United Concordia

Effective Date: 09/01/2019

Vision Decline/cancel existing coverage

Coverage Level: Decline/cancel existing coverage

Your Contribution: \$0.00 Monthly

Carrier Contact Info: Davis Vision <http://davisvision.com>

Carrier Name: Davis Vision

Effective Date: 09/01/2019

Benefit Elections Grand Total

Student Total Contribution Per Month: \$0.00

Survey Results

Acknowledgement of Medical Insurance Coverage

Mandatory Insurance Attestation

Approved

1) Insurance Company Name	UnitedHealthcare Student Resources
2) Insurance Company Address	P.O.Box 809025
3) Insurance Company Telephone Number	866-352-8632
4) Insurance Company Policy or Group Number	2019-203113-91
5) Does your insurance policy meet the following minimum coverage requirements: \$50,000 per accident or illness; Medical evacuation in the amount of \$10,000; Repatriation coverage for up to \$7,500; A deductible of no more than \$500 per illness?	Yes
6) Effective Date of Coverage	09/01/2019