



UnitedHealthcare Options PPO

Health Plan (123456) 123456789 Group Number: 12345678  
Member ID: 123 123456789 Payor ID: USN01

Insured: **Smith, John**  
Insured Effective Date: **05-AUG-2024**  
IMG Insured ID: **12345678**  
IMG Certificate Number: **PGTAI12345678**



Points of Care  
Discount

Bin No.: 123456  
Rx Group #: IMG123  
PCN#: URX001  
Pharmacy Help Desk  
800.329.0988

Possession of this card does not guarantee coverage.

**This plan contains precertification requirements. Failure to comply will result in a reduction of benefits.**

**MEMBER SERVICES:**

**Telephone:** +1.317.655.4500

**Email:** [customer care@imglobal.com](mailto:customer care@imglobal.com)

**Website:** [www . imglobal . com](http://www.imglobal.com) (Live Chat available)

**Online Provider Network:** [www . imglobal . com / provider](http://www . imglobal . com / provider)



**PROVIDER SERVICES** (all inquiries):

**For providers in the USA** (except Dental):

**Telephone:** 1.888.543.1238

**Website:** [www . usnetworksuhc . com](http://www.usnetworksuhc.com)

**For providers outside the USA and  
all Dental providers:**

**Telephone:** +1.317.655.4500

**Fax:** +1.317.655.4505

**Mail Claims to:**

UHC Global  
PO Box 30526  
Salt Lake City, UT 84130-0526

**Mail Claims to:**

International Medical Group, Inc.  
Claims Department  
PO Box 240429  
Apple Valley, MN 55124

## Confirmation of Coverage

September 11, 2024

RE: Confirmation of Coverage for JOHN SMITH

Certificate Number: PGTAI12345678

To Whom It May Concern:

Please be advised that JOHN SMITH has purchased Patriot America® Lite Group certificate number PGTAI12345678 effective 05-Aug-2024 to 19-Aug-2024 at 12:01 AM EST. The policy is administered by International Medical Group®, Inc., and underwritten by SiriusPoint Specialty Insurance Company, a member of the SiriusPoint Ltd. group with offices in the EU (Belgium, Germany, Sweden, Switzerland), United Kingdom, Bermuda, Canada, United States, Singapore and China. Sirius has an "A-" (Excellent) rating from A.M. Best.

Medical insurance coverage is provided while traveling worldwide outside of the insured person's Country of Residence including United States of America, per policy provisions. Coverage includes the Schengen states per the policy provisions. Emergency evacuation (also known as Repatriation) is provided up to a maximum benefit of 1,000,000.00 USD and Return of Mortal Remains benefits up to the policy maximum are included when coordinated by IMG. A copy of the Schedule of Benefits, which provides an outline of the plan's coverage, limitations, and maximum benefits, as well as a copy of the Declaration page of the Certificate indicated above may be presented as required. This information will verify that Eligible Expenses, including Hospitalization and certain outpatient expenses, are subject to a 1,000.00 USD annual deductible. Eligible Expenses are also subject to the following coinsurance provisions: For treatment received outside of the U.S., the plan pays 100% of Eligible Expenses up to the maximum limit. For treatment received within the U.S. and in the PPO Network, the plan pays 100% of Eligible Expenses up to the maximum limit. For treatment received within the U.S. but outside of the PPO Network, the plan pays 80% of Eligible Expenses up to \$5,000, then 100% up to the maximum limit. The maximum limit of coverage per period of insurance is 100,000.00 USD.

If you need further information, please feel free to contact our office at the number listed below. Thank you.

Sincerely,

Certificate Holder Services

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### Your Producer Contact Information:

Insubuy, Inc. - 51855

4200 Mapleshade Lane, Suite 200

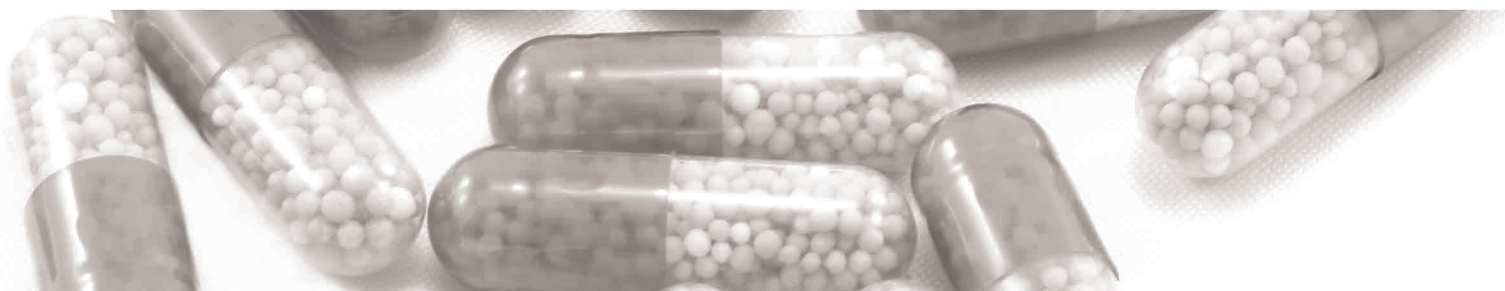
Plano, TX 75093

Telephone: (866) INSUBUY

Fax: 972-767-4470

Email: [info@insubuy.com](mailto:info@insubuy.com)

Website: [www.insubuy.com](http://www.insubuy.com)



## IMG Member Benefits

### Savings

Members save an average of 50% off their medications.

### Free To Use

No enrollment fee, monthly fee, or fee to use.

### No Limit On Usage

There is no termination date or restrictions on usage.

### Everyone Qualifies

There are no pre-existing conditions restrictions.

### One Card Per Household

One card can be used by your entire family.

### Convenience

The card is pre-activated and ready to use.

## Over 55,000 Pharmacies Nationwide

Albertson's Pharmacy  
Bi-Lo  
CVS Corporation  
Duane Reade  
Eckerd  
Fred's Pharmacy  
Giant Eagle, Inc.  
Kmart Corporation  
Kroger Pharmacy  
Publix Pharmacy  
Rite-Aid Corporation  
Safeway Supermarket  
Sam's Club Pharmacy  
Target Pharmacy  
USA Express  
Von's Pharmacy  
Walgreens  
WalMart  
Weis Market Pharmacy  
**Visit [IMGPOC.COM](http://IMGPOC.COM) to find your preferred pharmacy.**

Visit [www.IMGPOC.com](http://www.IMGPOC.com) to learn about the benefits available to you as an IMG member, including:

Prescription Savings | Mail Order Savings (or call 1-800-742-0504) | Diabetes Savings  
Hearing Savings (or call 1-800-591-5080) | Drug Pricing Tool | Pharmacy Locator

Cut out the card below and take to the pharmacy. Hand this card to the pharmacist with your prescription.

<b>Name:</b> _____	
<b>ID:</b> _____	Please enter phone number (XXX-XXX-XXXX)
<b>POC Group #:</b> _____	
<b>Coverage:</b> _____	
<b>Member Services:</b> 1-540-777-7179 <b>Pharmacy Help Desk:</b> 1-800-329-0988	
<b>TERMS AND CONDITIONS:</b> Participating pharmacies must transmit prescription claims online to Pharmacy Data Management. <b>THIS CARD IS NOT INSURANCE.</b> This card is owned by URx program. URx program may revoke, repossess, modify, or cancel at any time. Use of this card constitutes acceptance thereof. The unauthorized or fraudulent use of this card to obtain prescription drugs is punishable by law. The person named on this card assumes responsibility for the use of the card.	
<b>PHARMACIST INSTRUCTIONS:</b> Process claim through Pharmacy Data Management (PDM). Processor ID/BIN#: _____ Processor Control #: _____ For inquiries on electronic claims submission, pharmacies may call 1-800-329-0988	

