

Professional Service, Inc.

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Phone: 1-888-789-4488 Fax: 1-888-789-4499
Email: psi@psiservice.com
www.psiservice.com

CONFIRMATION LETTER

To whom it may concern:

This is to certify that the listed student (and dependents) has purchased medical insurance coverage from Professional Service, Inc. (PSI). The policy is underwritten by Student Resources (SPC) Ltd, a UnitedHealthCare company, rated A&M Best "A", and marketed by PSI Health Insurance.

This plan provides worldwide coverage, except for treatment received in the Insureds home country. It covers maternity as any sickness when conception occurs during the period of insurance.

Platinum Plan has a maximum medical benefits of up to \$500,000.00 per insured, per policy year. It includes FrontierMEDEX which arranges and pays for ALL medical evacuation and repatriation services it provides. There is no maximum limits on the services arranged and provided by FrontierMEDEX. This coverage is renewable. The plan has a \$0 deductible.

This Confirmation Letter serves as proof of coverage until the ID Card is issued.

For full details of the benefits, please refer to the policy brochure or call 1-888-302-6182.

Name: [REDACTED]
UCF PID#: [REDACTED]
Policy Number: **2013-202819-1**
PSI ID#: [REDACTED]
Date of Birth: [REDACTED]
Current Coverage: **09/01/2013-08/31/2014**
Spouse:
Children:

Sincerely,

Professional Service, Inc. (PSI)

www.psiservice.com

